Self-organizing initiatives

An exploration of the road to success of care cooperatives

Never doubt that a small group of thoughtful, committed citizens can CHANGE THE WORLD
Indeed, it is the only thing that ever has.

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Word count: 27,743
Abstract
The number of care cooperatives as self-organizing initiatives increased enormously over the past few years due to changes in the health care system and encouraging individual responsibility and active citizenship. Hence, citizens are auto organizing and setting up initiatives, like care cooperatives. However, the empirical understanding of self-organization in the public sector is scarce. The aim of this thesis is to investigate and identify which factors are of influence on the success of care cooperatives as a form of self-organizing initiatives in the social policy domain in the Netherlands. Besides, examining the role that the government takes regarding self-organizing initiatives and how their attitude influences the success. Data for this qualitative research were collected by conducting a multiple case study of four care cooperatives in the Netherlands, namely care cooperatives Putte, Gemert, Wijzelf Zoetermeer and Kadoze Kattendijke.

The thesis discusses four factors that contribute to the success of self-organizing initiatives according to theory. The results suggest that focus in informal networks, boundary spanning and trust are crucial factors for the success of care cooperatives. In addition, the scale and public support that the initiative gets are also important factors of success, while network management by government is not considered as a decisive factor. Hence, the role that the government takes is not decisive for the final success although a facilitating municipality contributes to the successfulness of care cooperatives. In order to review the successfulness of care cooperatives in depth; future research is necessary, which shows the development over a longer period of time and includes the perspectives of more actors, such as caregivers and care recipients.
Acknowledgement
After an intensive period of six months, I can finally write this note of thanks as the finishing touch on my thesis. It has been a learning process for me, on a personal level but also in the scientific field. I would like to show my gratitude to the people who have supported and helped me throughout this period.

I would first like to thank my tutor, prof. dr. Klijn, for the support and valuable comments while writing this thesis. Your guidance helped me with the tools that I needed to choose the right direction and successfully complete my thesis.

I also want to thank my supervisor from my internship at VPNG for his cooperation and for the opportunities and the advice that I got to conduct my research. I thank my fellow students and my friends for the listening ear and advise they gave me during this period.

Additionally, I would like to express my gratitude to my parents and my sisters for their wise counsel and unconditionally support throughout my life. Finally, I would like to say thank you to my boyfriend for all his love and support.

Thank you all very much!

Eva Schrauwen

Rotterdam, August 26, 2016
Content

Abstract ............................................................................................................................................ 3
Acknowledgement ............................................................................................................................ 4
1. Introduction .................................................................................................................................... 8
   1.1. Research objectives .................................................................................................................. 9
   1.2. Societal relevance .................................................................................................................. 9
   1.3. Theoretical relevance ............................................................................................................ 10
   1.4. Research structure ................................................................................................................ 11
2. Theoretical framework .................................................................................................................. 12
   2.1. Self-organization .................................................................................................................. 12
      2.1.1. Characteristics of self-organizing initiatives ..................................................................... 12
      2.1.2. Process of self-organization .......................................................................................... 13
   2.2. Success of self-organizing initiatives ................................................................................... 14
      2.2.1. Defining success .............................................................................................................. 14
      2.2.2. Barriers for success ....................................................................................................... 16
   2.3. Factors that influence self-organization processes ............................................................. 16
      2.3.1. Focus in informal networks ............................................................................................. 17
      2.3.2. Boundary spanning ....................................................................................................... 18
      2.3.3. Trust .............................................................................................................................. 20
      2.3.4. Network management by government ........................................................................... 21
   2.4. Conceptual model .................................................................................................................. 22
3. Research design and methods ....................................................................................................... 25
   3.1. Operationalization ................................................................................................................ 25
   3.2. Research design .................................................................................................................... 27
      3.2.1. Multiple case-study ........................................................................................................ 27
      3.2.2. Case selection ................................................................................................................ 28
      3.2.3. Data collection: desk research, semi-structured interviews and closed questionnaire .... 28
      3.2.4. Reliability ..................................................................................................................... 29
      3.2.5. Validity .......................................................................................................................... 30
4. Background - care cooperatives in the social policy domain ....................................................... 31
   4.1. The rise of care cooperatives as a form of self-organizing initiatives .................................... 31
   4.2. Characteristics of the four care cooperatives ......................................................................... 32
   4.3. Care cooperatives: successful self-organizing initiatives ..................................................... 34
      4.3.1. Perceptions of success .................................................................................................... 34
4.3.2. Barriers for success .................................................................................................................. 37
4.3.3. Conclusion ................................................................................................................................. 38
5. Empirical findings and analysis ........................................................................................................ 39
  5.1. Focus in informal networks analyzed ......................................................................................... 39
    5.1.1. Trigger .................................................................................................................................. 39
    5.1.2. Focus ..................................................................................................................................... 41
    5.1.3. Informal networks .................................................................................................................. 43
    5.1.4. Conclusion ............................................................................................................................. 46
  5.2. Boundary spanning analyzed .................................................................................................... 47
    5.2.1. Boundary spanners and their characteristics ........................................................................ 47
    5.2.2. Boundary spanning activities performed .............................................................................. 49
    5.2.3. Conclusion ............................................................................................................................. 51
  5.3. Trust analyzed ............................................................................................................................ 52
    5.3.1. Meaning of trust ..................................................................................................................... 52
    5.3.2. Trust between board members ............................................................................................ 52
    5.3.3. Trust of the environment in the care cooperative ................................................................. 54
    5.3.4. Conclusion ............................................................................................................................. 56
6. Role of the government regarding the care cooperatives ................................................................. 58
  6.1. Facilitating role of the municipality ............................................................................................ 58
  6.2. Experiences with network management by government ............................................................ 59
    6.2.1. Experienced role of the municipality by board members ....................................................... 61
    6.2.2. Experienced role of the municipality by government officials .............................................. 62
  6.3. Conclusion .................................................................................................................................... 63
7. Conclusion, discussion and recommendations ............................................................................. 65
  7.1. Central research question ............................................................................................................ 65
  7.2. Discussion ..................................................................................................................................... 67
  7.3. Research limitations ................................................................................................................... 69
  7.4. Further research .......................................................................................................................... 69
  7.5. Recommendations ....................................................................................................................... 70
References ............................................................................................................................................... 71
Appendix A: list of interviewed persons ............................................................................................ 74
Appendix B: interview guide and topic list .......................................................................................... 75
Appendix C: closed questionnaire ...................................................................................................... 76
List of tables and figures

Table 1: Characteristics of the four examined care cooperatives..........................................................33
Table 2: Core ideas of the four care cooperatives..................................................................................34
Table 3: Main triggers for the emergence of the four care cooperatives................................................41
Table 4: Main focus of the four care cooperatives................................................................................41
Table 5: Usage of informal networks by the four care cooperatives.......................................................43
Table 6: Ways to gain trust of the environment in the four care cooperatives........................................55
Table 7: Index ranking of success factors visible in the four care cooperatives......................................66

Figure 1: Statements in closed questionnaire to measure content outcomes.................................15
Figure 2: Statements in closed questionnaire to measure boundary spanning.................................19
Figure 3: Statements in closed questionnaire to measure trust..............................................................20
Figure 4: Statements in closed questionnaire to measure network management by government........22
Figure 5: Conceptual framework...........................................................................................................24
Figure 6: Operationalization................................................................................................................27
Figure 7: Content outcomes showing the degree of success of the four care cooperatives..............36
Figure 8: Portrait of a boundary spanner with the main characteristics.............................................49
Figure 9: Boundary spanning activities within the four care cooperatives.........................................50
Figure 10: Trust between board members of the four care cooperatives...........................................53
Figure 11: Facilitating role government...............................................................................................59
Figure 12: Network management strategies by government...............................................................60
1. Introduction

In recent decades, the Dutch civil society is changing due to the rise of costs of healthcare and welfare and the decrease of government spending on these sectors (Boumans et al., 2015: 23). Furthermore, from 2015 onwards municipalities in the Netherlands are given much more responsibility in the social policy domain. This so-called 3D (three decentralizations) development consists of three specific areas: work and income, youth policy and services for persons with disabilities. By delegating these tasks to municipalities, the central thought is that municipalities are closer to the citizens, can provide for tailor made care, for more efficient services and can prevent fragmentation. An additional share from the national budget is given to municipalities, although they need to fulfill a larger set of tasks. As a result, a new playing field with old and new stakeholders is emerging who create opportunities, but that can also lead to dilemmas, as will be discussed later.

In addition, municipalities are supposed to stimulate broad participation from citizens and also to provide better support when needed. In relation to this, individual responsibility and active citizenship are increasingly encouraged (Van Dam et al., 2014: 323). These developments lead to a clear rise in the number of self-organizing initiatives from citizens, since they are encouraged to go into concerted action in a range of fields within the public domain (Bovaird, 2007). Self-organizing initiatives by and from citizens are considered to be valuable for producing urban development, because they start from within the urban area itself, which increases the chance that it fits local needs, circumstances and the commitment of the involved local stakeholders (Van Meerkerk et al., 2013: 1631). Especially in the social policy domain with the recent changes and developments, citizens are increasingly taking matters in their own hands by establishing self-organizing initiatives (Van de Wijdeven, 2013: 3). Hence, a clear rise is visible in the number of citizen-led initiatives, which arrange their own care and welfare services via healthcare and welfare cooperatives, also called care cooperatives (Boumans et al., 2015: 23).

However, there remains a lot of uncertainty about how to realize a successful self-organizing initiative and which factors are important in this process. Moreover, it is difficult for initiatives to establish linkages with governmental institutions (Edelenbos and Van Meerkerk, 2011: 169). Besides, municipalities struggle to find ways to deal with self-organizing initiatives, because when citizens are putting their ideas into practice, they organize things in their own way and this might conflict with the governmental policy (Van Dam et al., 2014: 323). The wide variety in self-organizing initiatives and their ability to transform also makes adequate governance responses challenging and can be seen as a threat by other care organizations and professionals (Van Dam et al., 2014: 323). In addition, municipalities have problems with assessing and measuring the (potential) success of self-organizing initiatives beforehand. Consequently, the road to success of care cooperatives as a form of
self-organizing initiatives is unpaved and can be regarded as a learning process with opportunities, challenges and uncertainties.

1.1. Research objectives
The rise of self-organizing initiatives and especially care cooperatives asks for further examination on the factors that could make these initiatives successful. Furthermore, more attention should be paid to the dilemmas and uncertainties in the relation between the government and self-organizing initiatives. Therefore, this research is designed with the following research question that will be investigated and answered:

*Which factors are of influence on the success of care cooperatives as a form of self-organizing initiatives in the social policy domain in the Netherlands?*

The main goal of this research is to add to existing theory on which factors influence the success of care cooperatives as a form of self-organizing initiatives by conducting a multiple case study. To answer this research question, a case study was conducted involving four care cooperatives in the Netherlands. More specifically, this research will focus on the process of self-organization and tries to identify several factors that can contribute to the process of making self-organizing initiatives successful. The four case studies provide in-depth knowledge on the citizens inside those self-organizing initiatives, for example what is their initial idea and how are they trying to realize it; what do they need? In addition, it is important to look at what they perceive as crucial factors to make their initiative successful and what they see as the role of the municipality. The perspectives of civil servants involved in the care cooperative are also included in this research, to get insight in what they consider to be their role and how they perceive the success of the initiative.

1.2. Societal relevance
Our current society is becoming more and more a participation society where individual responsibility and active citizenship are encouraged (Van Dam et al., 2014: 323; Sørensen & Triantafillou, 2009: 10; Tonkens & Verhoeven, 2010). The Netherlands is also known for the very rich organizational universe and the history of accommodation to social interests from the government, which stimulates self-organizing power from society (Pierre & Peters, 2000: 39). Self-organizing initiatives are a ‘hot’ topic in policy land, due to societal and political developments, which stimulate active citizenship. Citizens increasingly engage in setting up initiatives in different sectors in the public domain.

It is therefore important to understand and analyze aspects of self-organizing initiatives from citizens in order to make it successful, like the process, but also motivations, needs and demands. In
addition, the role of government is relevant to examine, because they are increasingly facing citizens that organize themselves and they find it difficult to deal with these initiatives in an appropriate and effective manner. Government officials describe in their policy documents the intention to facilitate and stimulate self-organizing from a bottom-up perspective. However, this seems to be not easy in practice (Oude Vrielink & Verhoeven, 2011: 378). By studying four different care cooperatives; more can be understood about the role that the government takes in practice and what they can improve.

Moreover, the social policy domain is an excellent example of a rapid changing environment with a new framework of regulations where old and new stakeholders have to find their position. Care cooperatives are popping up all over the country as a response to the ageing society and dissatisfaction of citizens about decreasing level of facilities in municipalities. Due to the potency of care cooperatives as future-proof health care, further research is of societal and scientific importance in order to gain more insight in the functioning of care cooperatives (Boumans, 2015: 28).

1.3. Theoretical relevance

There is an increase of attention for self-organizing initiatives from a theoretical perspective in recent years, although much remains unclear (Van Dam et al., 2014: 323). The attention focuses on the perspective from which government looks at the citizens. Hence, small and informally organized civil society actors are not often taken into account, even though much of the transmission work happens there around the boundaries between the state and civil society (Dodge, 2010). Besides, empirical understanding of self-organization in the public sector is scarce as well as empirical research with a broader focus on formal and informal boundary spanners (Boonstra & Boelens, 2011). Much of the attention goes to the role of central actors from official responsible organizations, while boundary spanners originate not only from these organizations, but also from NGOs, societal and community organizations (Van Meerkerk & Edelenbos, 2014). Additionally, this research focuses on a specific type of network, namely care cooperatives as a form of self-organizing initiatives and factors that influence their success. Trust is seen as such a factor, which follows the research suggestion of Klijn et al. (2010a: 210) to explore in depth the relation between the characteristics of networks and trust.

Furthermore, research on self-organizing initiatives tends to be focused on the field of urban development (Boonstra & Boelens, 2011: 99; Edelenbos & Van Meerkerk, 2011: 3; Van Meerkerk et al., 2013: 3; Van Meerkerk & Edelenbos, 2014). Therefore, it is interesting to look at another policy domain, namely the social policy domain where lots of changes have taken place in recent years in the Netherlands. This new level playing field with old and new stakeholders makes it challenging and relevant to conduct research on the success of self-organizing initiatives. This study contributes to our knowledge of care cooperatives in a scientific way, since only a few studies have been conducted on the initiators of care cooperatives and none was scientifically based (Boumans et al., 2015: 24).
1.4. Research structure

Following this introduction where the main research question and the goal of this study is clarified, chapter two will provide a theoretical framework where, inter alia, the relevant elements for the success of self-organizing initiatives according to academic literature are discussed. In chapter three, the operationalization of the elements and the selection for the research design are explained. Chapter four introduces the cases concerning their main characteristics and provides background information on the changes in the social policy domain with special focus on the rise of care cooperatives in the Netherlands. The empirical findings and the analyses of the cases related to success factors within the initiative itself are discussed in chapter five, followed by the analysis of the role of the government in chapter six. Subsequently, chapter seven will present the conclusion, discussion and recommendations of this research, by answering the research question, discussing the main findings and research limitations. In addition, reflecting on possibilities for future research and presenting several recommendations for (starting) care cooperatives for civil servants regarding the success factors of self-organizing initiatives.
2. Theoretical framework

In this chapter, an overview of the literature on self-organization and self-organizing initiatives from citizens is provided. The various definitions and interpretations of self-organization are discussed, before defining the success of self-organizing initiatives and turning to their main characteristics and the process of self-organization. Furthermore, several barriers for success will be pointed out. This provides the basis for the formulation of several factors that can contribute to the process of making self-organizing initiatives successful. Finally, all relevant factors and their relations are gathered in a conceptual model to show which factors are essential to establish successful self-organizing initiatives according to the available scientific literature.

2.1. Self-organization

The concept of self-organization is originated in the physical and biological sciences and broadly explained as the emergence of order out of ‘chaos’ or complex processes (Ashby, 1962; Kauffmann, 1993). In the field of public administration, the concept of self-organization is defined in different ways and settings. Boonstra and Boelens (2011: 100) define self-organization in urban development as ‘initiatives for spatial interventions that originate in civil society itself, via autonomous community-based networks of citizens, outside government control’. Furthermore, Van Meerkerk, Boonstra and Edelenbos (2013: 3) use a complexity thinking perspective towards urban regeneration and define self-organization as ‘the emergence and maintenance of structures out of local interaction, an emergence that is not imposed or determined by one single actor, but is rather the result of a multitude of complex and non-linear interactions between various elements’. Moreover, Comfort (1994: 397) argues that self-organization is essentially a collective process of communication, choice and mutual adjustment in behavior based on a shared goal among members of a given system. In general, the concept of self-organization in public administration refers to non-governmental actors adapting their behavior and to the emergence of collective action without governmental interference (Pierre & Peters, 2000).

Consequently, self-organization can be seen as a spontaneously emerging group of citizens (with diverging interests, resources and interdependencies) in order to deal with a collective challenge; not imposed by a single actor and able to maintain itself (Cilliers, 1998; Heylighen, 2001; Jantsch, 1980; Nederhand et al., 2015: 3).

2.1.1. Characteristics of self-organizing initiatives

These definitions of self-organization point to several clues to describe the characteristics of self-organizing initiatives. First of all, the concept of ‘self-organizing initiatives from citizens’ can be explained as ‘processes of self-organization where (organized) citizens and social interest groups
spontaneously come to common action’ (Edelenbos et al., 2008). Comfort (1994: 410) argues that spontaneity is an essential but elusive characteristic of self-organization, while it cannot be imposed by external regulation. Hence, the citizens themselves take the initiative, involve others in the process and have a vision on what they want to achieve (Boumans et al., 2015: 27). Other characteristics of self-organizing initiatives are according to Comfort (1994: 396) communication, adaptive capacity, interdependency and a shared commitment to a common goal, as will be explained below.

The core of self-organizing initiatives is a shared commitment to a common goal or public interest by actors that actually take action out of their own movement (Oude Vrielink & Verhoeven, 2011: 378). In order to pursue this common goal, actors need to work together to adapt, adjust and deal with challenges, such as changing conditions in the environment (Kauffman, 1993: 173). Furthermore, communication is essential in the process and development of self-organization and consists of direct or indirect communication transferred between actors within the initiative or between the initiative and the environment (Luhmann, 1986). Another characteristic is the interdependency in the system; actors are dependent on each other’s actions and choices to reach the common goal. Intrinsic motivation of actors is vital and self-organizing initiatives are mainly founded on a shared commitment towards a common goal. This is leading in their interactions and sets the boundaries of the system (Comfort, 1994: 397). Additionally, Nederhand et al. (2015: 16) refer to the absence of governmental control as an inherent characteristic of self-organization.

2.1.2. Process of self-organization
The process of self-organization can be understood according to eight components from Comfort (1994: 398). The first four components characterize the process of self-organization in any setting, namely the number of actors, frequency of interactions among actors, goal of the action and the boundaries of the system. Four other characteristics from the environment – event, location, time and operating conditions - are also identified as critical for understanding the process of self-organization.

In addition, Van Dam et al. (2014: 326) view the organizing process in citizens’ initiatives as one of institutionalizing modes of internal and external cooperation. They operate in an informal (fellow residents) and formal (institutional actors) context. In this respect, citizens’ initiatives are seen as having no clear inside-outside boundaries, fluid and possibly surrounded by a larger group of people that sympathize with the initiative and that are eager to become part of it (Van Dam et al., 2014: 326). The theory on bonding processes in terms of social capital becomes relevant, because citizens’ initiatives are geared to getting more people actively involved. On the one hand, bonding social capital involves trusting cooperative relations between initiators and their fellow residents.
who are similar in terms of social identity. On the other hand, bridging social capital implies connections between initiators and other local groups who are dissimilar. Thus, they have different interests or orientations, but they are more or less equal in terms of their status and power (Putnam, 2000). The process of linking can be seen as the interaction between initiators and institutional actors, which are unequal in terms of power and influence (Van Dam et al., 2014: 326).

2.2. Success of self-organizing initiatives
In the previous section, a definition of the success of self-organizing initiatives is given before discussing their characteristics and the process of self-organization. Subsequently, in order to examine which factors are of influence on the success of self-organizing initiatives, an exploration on what the success actually entails is important. Hence, this subchapter will shed a light on the measurement and possible barriers of the success of self-organizing initiatives.

2.2.1. Defining success
In many cases, there is variety in the perceptions on whether an initiative is successful or not. This illustrates the difficulties concerning their evaluations and brings up the question of how to evaluate the performance and outcomes of self-organizing initiatives (Klijn & Koppenjan, 2016: 240). In this respect, it is useful to see self-organizing initiatives as governance networks in which the initial complexities are reduced through interaction (Klijn & Koppenjan, 2016: 246). Learning processes about these complexities are then an important indicator to measure the success or failure of self-organizing initiatives. However, learning can take place in several ways and therefore it is important to specify the focus of this research as learning behavior at the level of the network: learning between different (groups of) actors and how these actors learn to mutually adjust their strategies and to arrive at joint outcomes (Provan & Milward, 2001).

Klijn and Koppenjan (2016: 246) define learning as ‘the sustainable increase in shared knowledge, insights and work methods between parties’. They distinguish three areas between learning processes, namely cognitive learning (learning about substantive complexity), strategic learning (learning about strategic complexity) and institutional learning (learning about institutional complexity).

In this research, the emphasis is on cognitive learning as a substantive or content criteria following the definition of Klijn and Koppenjan (2016: 247): ‘the increased shared knowledge and insights about the nature, causes and impacts of problems, possible solutions and their effects, actors’ perceptions on these matters and the common grounds for joint problem solving, policymaking and service delivery’. By choosing to focus on content outcomes, it becomes clear what has been achieved in the process (the substance) of making a self-organizing initiative successful,
whereas process outcomes or strategic learning focuses more on the quality of the process itself (Klijn et al., 2010a: 202). Moreover, the factors that influence the success of self-organizing initiatives according to the literature show also how joint fact finding is being done, for instance by establishing a shared goal. Figure 1 displays the statements asked in the closed questionnaire to respondents of the four care cooperatives in order to measure content outcomes.

**Cognitive learning effects** can be categorized in two types: joint image building and goal intertwinement (Klijn & Koppenjan, 2016: 247). First of all, joint image building involves actors that achieve better insight into the nature of the problem and the consequence of solutions as a result of interaction and research. They have to come to an agreement about perceptions and to consensus about solutions that are defensible on the basis of (scientific) knowledge. In the end, the realization of negotiated knowledge, frame alignment and consensus building are necessary in order to see how self-organizing initiatives can lead to successful outcomes by creating cognitive learning effects.

Secondly, goal intertwinement refers to finding a win-win solution, namely a solution that realizes the objectives of multiple parties simultaneously or more in the sense that a solution constitutes an improvement in a problematic situation. A solution, which improves the position of one actor without damaging the other actors’ positions, can also be seen as a success. Therefore, cognitive learning does not necessarily result in consensus, while joint solutions are possible as different perceptions persist (Klijn & Koppenjan, 2016: 248).

Goal intertwinement can be measured according to two criteria, ex post satisficing and enrichment, integration of services and inclusiveness of solutions. The criterion of ex post satisficing implies to what extent actors are satisfied with the intermediate and final results (Provan & Milward, 2001). This incorporates changing goals and learning on objectives, because the judgment is based on ex post goals. In addition, there is the danger of ex post rationalization when actors are unwilling to acknowledge that the self-organizing initiative is not successful, because they invested a lot of time and effort in it. To deal with this, it is possible to do a ‘reality check’ and ask if the various actors’ satisfaction is based on the achieved results with regard to the actors’ interests. Moreover, it is important to underline that actors do not have to agree on success or failure. A mixed picture is

**Statements: Do you think that...**

<table>
<thead>
<tr>
<th>Innovative ideas are developed in the initiative?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Different societal functions have been connected sufficiently?</td>
</tr>
<tr>
<td>In general the involved actors have delivered a recognizable contribution to the development of the results?</td>
</tr>
<tr>
<td>The solutions that have been developed really deal with the problem at hand?</td>
</tr>
<tr>
<td>Do you think that the developed solutions are durable solutions for the future?</td>
</tr>
<tr>
<td>The benefits exceed the costs of the cooperation process in general?</td>
</tr>
</tbody>
</table>

*Figure 1: Statements in closed questionnaire to measure content outcomes*
possible, since self-organizing initiatives are new and seldom complete successes or failures.
Secondly, goal intertwinement is assessed by the degree of substantively enrichment of intermediate and final solutions, as well as the degree in succeeding to integrate services and to include various needs of parties (inclusiveness of solutions). This can be measured by looking at whether new innovative solutions are developed or criticism is addressed adequately or proposals for solutions have changed during the process (Klijn & Koppenjan, 2016: 250). Consequently, the information on the degree of cognitive learning gives insight in why and to what extent a certain self-organizing initiative can be seen as a success or not.

2.2.2. Barriers for success
The potential success of self-organizing initiatives can be constrained by several barriers regarding the initiative itself and measurement the success. First of all, it is difficult for non-state actors to put their initiative into practice due to a lack of resources or power of these actors or because they cannot make effective connections with governmental institutions to ensure implementation (Edelenbos, 2005). Furthermore, local residents can perceive problems and think about solutions, though when nobody can or is willing to invest time and effort to turn the ideas into action, a successful care cooperative will not be established.

In addition, it is also hard to measure the success of self-organizing initiatives, because actors can have different goals and also different perceptions about what success entails. Furthermore, the decision-making processes can be lengthy and the goals of actors can change over time, which makes measurements of outcomes problematic (Klijn et al., 2010b: 1065). Effects of self-organizing initiatives can be also difficult to measure, since effects are not always visible. Finally, determining causality is considered as problematic, because it is not always easy to connect factors to the observed results (Klijn & Koppenjan, 2016: 244).

2.3. Factors that influence self-organization processes
Since the success of self-organizing initiatives is defined, it is relevant to review factors that can influence it. The literature on self-organization refers to several factors that shape the course, content and outcomes of self-organization processes. Nederhand et al. (2015: 3-4) provides an overview of six factors that influence self-organization processes, namely: the presence of a trigger, trust-worthy relations, focus in interaction, locus in interaction, boundary spanning and adaption of grown practices. Moreover, the literature on adaptive capacity of systems and processes of institutional change shows three vital and interrelated factors regarding processes of adaptation, innovation and uncertainty that possibly affect the evolution of institutions (Edelenbos & Van Meerkerk, 2011: 5). These processes can be found in the boundary spanning activities that actors
perform as discussed below. Additionally, Klijn et al. (2010b: 1065) refer to network management strategies to govern processes in networks, which can influence the success of care cooperatives.

Hence, combining those factors leads to the formulation of four main factors, namely focus in informal networks, boundary spanning, trust and network management by government. They are essential to review what makes self-organizing initiatives successful and will be explained in depth.

2.3.1. Focus in informal networks
The presence of a trigger, the creation of a focus in interaction and the usage of informal networks are considered as important factors to shape and initiate self-organization processes. These factors can be taken together under the name of focus in informal networks, because they are all seen as conditions necessary to start and facilitate the self-organization process. Moreover, these factors are straightforward and combined they provide a stronger basis, which can influence the success.

Firstly, the presence of a trigger is important to create interactions, which can lead to self-organization. Van Meerkerk et al. (2012: 1648) identify disruptive effects from (external) events on people, such as the threatening of the demolition of buildings or the death of a person that triggered locals to take initiative. Nederhand et al. (2015: 17-18) show that the different forms of self-organization have different triggers; it can be caused by a disruptive NIMBY-type situation or an emerging process based on tradition. Specht (2012) confirms that the presence of a trigger is essential for citizens to actually undertake action. The decreasing facilities in the area can be seen as an important trigger for citizens to form care cooperatives. Furthermore, citizen’ initiatives arise as a reaction to proposed government policy, mostly when citizens are not satisfied with the actions of the government. Hajer (2003) uses the metaphor of ‘citizens on stand-by’ to explain that citizens are generally relatively passive, although they become active when policy interventions interfere in their living environment or personal life sphere.

Secondly, self-organization can be stimulated by a focus, meaning the development of a clear and shared goal, which can structure the evolving interactions (Comfort, 1994; Nederhand et al., 2015: 4). When there is a common ground for joint action, citizens might be more inclined to join the initiative and to exchange ideas and experiences. Oude Vrielink and Verhoeven (2011: 378) also emphasize the importance of a shared commitment to a common goal or public interest by actors.

Finally, informal networks consist of interactions between actors outside formal institutions in a network with an informal character, which gives room to connect with different actors and interact outside their established rules and roles (Edelenbos & Van Meerkerk, 2011: 5). In this way, actors can feel freer and are not held directly accountable for certain statements. Therefore, informal networks can enhance opportunities of experimentation, which may lead to innovative policies and arrangements. Besides, structural embeddedness as safeguarding of exchanges in networks is
important, because not every informal network facilitates institutional evolution (Granovetter, 1973). The self-organizing initiative can get more notoriety by strong informal networks of their members that spread their message. Hence, the initiative can grow rapidly and can gain trust, which increases the chance of success of the self-organizing initiative.

Consequently, when there is a clear focus in informal networks around self-organizing initiatives, trust can be built and this could positively influence self-organization processes.

2.3.2. Boundary spanning

Boundary spanning activities are seen as an important factor for successful self-organization. In this research, a boundary spanner is someone from within the self-organizing initiative, which performs boundary spanning activities. The boundary spanner is considered to be a skilled networker that is able to build sustainable inter-organizational relationships, to mutual exchange information and to coordinate across organizational boundaries (Williams, 2002: 115). Furthermore, they are specialized in negotiating interactions between the organization and its environment in order to make a better ‘fit’ (Van Meerkerk & Edelenbos, 2014:6). Therefore, boundary spanners need to have internal (own organization) and external (with other organization) linkages in order to both gather and transfer information (Tushman & Scanlan, 1981). There is some ambiguity about the concept of boundary spanning in the literature, as a result of differences in operationalization (Van Meerkerk and Edelenbos, 2014: 6). On the one hand, boundary spanning is referred to as a one-step information flow, which involves representational roles. On the other hand, boundary spanning is viewed as a two-step information flow, where external information is acquired and transmitted internally. In this research, boundary spanning is seen as individuals who are involved in the two-step information flow and several main activities from boundary spanners can be derived from this (Tushman & Scanlan, 1981: 292; Van Meerkerk and Edelenbos, 2014: 6; Williams, 2002: 115).

Firstly, boundary spanners are known for their ability to build sustainable and trustworthy relationships. This involves connecting or linking different people and processes at both sides of the boundary. In this way, boundary spanners can be seen as essential in self-organizing initiatives, because they are able to connect and understand emerging roles and rules in the informal network that they are in with the established roles and rules of the existing governmental institutions (Edelenbos & Van Meerkerk, 2011: 6). Furthermore, Williams (2002: 116) argues that the development of sustainable relationships asks for certain qualities, like respect, openness, tolerance, reliability, sensitivity, honesty and an easy and inviting personality. A boundary spanner needs to be an active listener and able to understand other actors’ needs, which enables them to search for shared meanings (Williams, 2002: 115). Consequently, they can create and maintain sustainable relationships with different actors from various backgrounds.
Secondly, selecting relevant information or signals on both sides of the boundary is an important activity from boundary spanners. This coincides with the third main activity from boundary spanners, namely, translating the information across boundaries (institutional practices, language). This involves the process of adopting another language or way of expressing in order to convert the information to the different forums (Quick and Feldman, 2014:5). It is therefore important that a boundary spanner is able ‘to talk the right language’, since they are constantly connecting different people, organizations and processes (Williams, 2002: 121).

Fourthly, mobilization of the home organization to consolidate network activities and decisions is an activity of boundary spanners. This refers to the gathering of persons within the organization to take a decision, which is not always easy due to the different conflicting perceptions. Therefore, it is vital for boundary spanner to be aware and understand the dependencies, responsibilities, motivations and roles of the members in the network.

A fifth key activity of boundary spanners is the alignment between intra-organizational processes and those in the environment/network, which consists of recognizing them and finding manners to enhance connections (Quick and Feldman, 2014: 6). Some differences in processes and developments cannot be aligned, are unchangeable or even valuable to keep. In addition, adaptation is seen as vital in self-organizing processes, because actors need sufficient flexibility and autonomy to adjust their behavior towards developments (Edelenbos & Van Meerkerk, 2011: 5).

Finally, boundary spanners are seen as innovators, which transform routines or practices to make meaningful connections. New knowledge and solutions for problems can emerge as a result of boundary spanning activities, such as the creation of a safe environment where persons can step out of their current environment (Edelenbos & Van Meerkerk, 2011: 5; Quick and Feldman, 2014: 6). In this way, boundary spanners can enhance trust between organizations, which is useful in making a self-organizing initiative successful. Van Meerkerk and Edelenbos (2014: 4) show that there is a strong positive relationship between the presence of boundary spanners, trust and governance network performance. Hence, this indicates a partially mediating role of trust in this relationship. Besides, they demonstrate that boundary spanners originate less in governmental organizations, but more in private and societal organizations. Deduced from theory, figure 2 provides the statements asked to respondents in a closed questionnaire to measure boundary spanning in care cooperatives.

<table>
<thead>
<tr>
<th>Statements: Do you think that there is a boundary spanner active which ...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is able to build sustainable and trustworthy relationships?</td>
</tr>
<tr>
<td>Selects relevant information or signals on both sides of the boundaries (initiative/government)?</td>
</tr>
<tr>
<td>Translates the information across boundaries?</td>
</tr>
<tr>
<td>Mobilizes the home organization to consolidate network activities and decisions?</td>
</tr>
<tr>
<td>Aligns between intra-organizational processes and those in the environment/network?</td>
</tr>
<tr>
<td>Innovates?</td>
</tr>
</tbody>
</table>
2.3.3. Trust

Another important factor that can influence the success of self-organization processes is the presence of trustworthy relationships among actors. Trust is viewed as a vital facilitating mechanism for cooperation between actors, since it helps actors to tolerate uncertainty and to make decisions in situations where uncertainty is present (Edelenbos & Van Meerkerk, 2011: 6). In self-organizing initiatives, there can be uncertainty about the roles and rules of actors from different backgrounds, for instance government officials and citizens. They must trust and have faith in the intentions and competences of the other for accepting their views and influence.

However, in order to understand how trust could influence the success of self-organizing processes it is important to define trust. In this research, trust is defined as ‘the expectation of an actor A that another actor B will abstain from opportunistic behavior when an opportunity for that emerges’ (Klijn & Koppenjan, 2016: 115). Hence, actor A expects that actor B will take the interests of actor A into account, but there is no guarantee that actor B will act as expected. In order to measure trust within the network or rather inside the initiative, five items are used deriving from theory as figure 3 shows. The first statement or item refers to agreement trust, followed by benefit of the doubt, reliability, absence of opportunistic behavior and goodwill trust (Klijn et al., 2010a: 197).

<table>
<thead>
<tr>
<th>Statements: Do you think that the actors in this initiative…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generally live up to the agreements made with each other?</td>
</tr>
<tr>
<td>Give one another the benefit of the doubt?</td>
</tr>
<tr>
<td>Keep in mind the intentions of other actors?</td>
</tr>
<tr>
<td>Do not use the contributions of other actors for their own advantage?</td>
</tr>
<tr>
<td>Can assume that the intentions of the other actors are good in principle?</td>
</tr>
</tbody>
</table>

In this respect, trust is a valuable characteristic in networks and important for several reasons. First, trust can result in the reduction of transaction costs. If there is trust among actors than the risks involved in transactions will be reduced and cooperation is enhanced due to greater predictability (Klijn & Koppenjan, 2016: 116). Furthermore, contracts need fewer details and the possibility of unexpected interactions as a result of opportunistic behavior is reduced. Second, trust can stimulate actors to invest their resources (money/knowledge) in the initiative and provide a stronger basis for cooperation despite the perceived risks and uncertainties. Third, learning and the exchange of information and knowledge can be encouraged by trust. Self-organizing initiatives, which consist of various actors, can generate different information and knowledge and can also exchange them in order to learn from each other and create better tailored solutions (Klijn et al., 2010a: 197).
Finally, trust can facilitate innovation through reducing uncertainty about opportunist behavior (Klijn & Koppenjan, 2016: 119). Consequently, trust is seen as an important factor, because it leads to more knowledge and information exchange, resulting in better outcomes, new insights, innovative power and enhanced problem-solving capacity (Klijn et al., 2010a: 198).

In order to gain the advantages of trust in self-organizing initiatives, trust has to be built and is not already present. Several factors can influence the growth and emergence of trust (Klijn & Koppenjan, 2016: 119-120). First of all, the reputation of actors can enhance the development of trust, because when experiences in the past are positive and an actor is regarded as trustworthy, there is more inclination to trust them. Furthermore, the expectation of future benefits can be favorable for growing trust because knowledge in interactions will be mutually beneficial. Moreover, interactions in the past can have a positive impact on trust, because the more interaction and social contacts occur, the more trust can be created. This is emphasized in theories about social capital. The social capital in a neighborhood refers to communities with a shared history of past collaboration and many existing networks, groups and contacts (Putnam, 2000). Hence, they can overcome barriers to collective action and a shared sense of belonging is easier created when people know and trust each other (Pierre & Peters, 2000). They are motivated to participate in a collective manner. Conversely, interaction may lead to distrust, implying that interactions do not necessarily lead to more trust.

2.3.4. Network management by government

Network management is seen as the purposeful attempt to govern processes in networks. It aims to initiate and facilitate interaction processes between actors and to create and change network arrangements for better coordination (Klijn et al., 2010b: 1065). In self-organizing processes, the government can use network management strategies to facilitate the self-organizing initiative. This can be seen as process management strategies which attempt to facilitate interactions between actors indirectly and accept the structure of the network as a given (rules, positions of actors and resource division). Network management is seen as necessary, due to the increasing complexity of policy-making and service delivery, to make the connections between various actors and policy levels to achieve worthwhile outcomes (Agranoff & McGuire, 2003: 123).

There are four different categories of network management that can be distinguished to facilitate the interaction process between actors as shown in figure 4 (Klijn et al., 2010b: 1069). Firstly, the connecting strategy is used to start the interaction process with the activation of actors or resources. In this way, mediation, coalition building or removing obstacles to cooperation initiates interactions between actors. Secondly, when the interaction process begins, strategies of exploring content are needed to clarify goals and views of actors and to search for goal congruency. Thirdly, arranging strategies are used to create structures of consultation and deliberation, like a project
organization or communication lines. Finally, process agreements are established to set the rules for interaction between actors. These agreements are seen as ground rules for behavior and interaction in networks, such as rules for entrance, conflict regulation and rules that specify veto possibilities.

The network management strategy of connecting is seen as a connective management style by Van Meerkerk et al. (2015: 38) and includes boundary-spanning activities focused on interrelating actors, layers and domains. To avoid the blurring of network management strategies and boundary spanning, this research explicitly emphasizes network management by government and boundary spanning from within the self-organizing initiative.

In this research, network management is focused on the strategies of the government in making self-organizing initiatives turn into a success. Therefore, network management can also be seen as meta-governance (Nederhand et al., 2015: 4), since both concepts concern the way political authorities promote and guide self-organization of governance systems through rules, institutional tactics, organizational knowledge and other political strategies. Nederhand et al. (2015: 16) analyzed the interplay between self-organizing communities and meta-governing local governments in the establishment of two community enterprises. They found that the actions taken by the initiators were closely interwoven with the actions of civil servants and politicians leading to the success of the two robust community enterprises. In this way, the government played an important role by using meta-governing techniques to influence the shaping and outcome of self-organizing processes. The case studies show two different types of government steering, a fear-based and a benevolent shadow of government, with both successful emerging community enterprises. This empirical evidence shows that the context matters and self-organization is mainly viewed as a local contingent process of co-evolutionary interactions (Nederhand et al., 2015: 17).

2.4. Conceptual model

The previous sections show the different variables of this master thesis. In order to understand how the factors interact with each other and to assess whether they produce successful outcomes, it is important to put them in order and to form expectations about their relations.

As presented, there are four independent variables: focus in informal networks, boundary spanning, trust and network management by government. These are all factors that influence the success of self-organizing initiatives according to academic literature. Besides, there are also context
factors, such as actors in the environment with diverging interests and resources, which can have an influence on the final success of self-organizing initiatives. The success of self-organizing initiatives is the dependent variable and is defined as cognitive learning, which implies an increase in shared knowledge and insights about the nature, causes and impacts of problems, possible solutions and their effects, actors’ perceptions on these matters and the common grounds for joint problem solving, policymaking and service delivery (Klijn & Koppenjan, 2016: 247).

**Expectation 1**
Focus in informal networks in terms of a clear and shared goal, the presence of a trigger and strong informal networks can positively contribute to the success of self-organizing initiatives. Informal networks and a shared commitment to a common goal are important for the initiative to grow and to get publicity. Besides, the presence of a triggering event is also seen as a stimulating factor for the initiative to get a boost and to gain support. Moreover, these indicators can influence trust between actors in a positive way if actors have strong informal networks, goals are shared and openly discussed as formulated in expectation 1: *a strong focus in informal networks will enhance trust within the self-organizing initiative and positively influences the success of the initiative.*

**Expectation 2**
Boundary spanning activities are performed by a boundary spanner, which is considered to be a skilled networker from within the self-organizing initiative. The boundary spanner tries to improve trust by building sustainable relationships, aligning processes and searching for innovative solutions. They have both internal and external linkages to gather and transfer information and can mobilize their organization to consolidate network activities. This will positively contribute to successful self-organizing initiatives and leads to the following expectation 2: *more boundary spanning activities will increase trust between actors, which leads to a more successful self-organizing initiative.*

**Expectation 3**
Trust is seen as important in governance networks for achieving better (perceived) outcomes (Klijn et al., 2010a: 209). However, this variable is influenced by the other independent variables, namely when there is more focus in informal networks, more boundary spanning activities and more network management by government, than the trust within the self-organizing initiative will be enhanced. Therefore, trust has an intermediary position in this conceptual model and seen as vital for the final success of the initiative as expressed in expectation 3: *trust within the self-organizing initiative has a determining impact on successful outcomes and is influenced by focus in informal networks, boundary spanning and network management by government.*
Expectation 4

Network management by government is expected to have a positive influence on the success of self-organizing initiatives, because strategies like arranging and exploring content can be important to make the initiative successful (Klijn et al., 2010b: 1070). Furthermore, network management activities can positively influence the other independent variables, namely focus in informal networks, boundary spanning and trust. The facilitation of interaction as a network management strategy by governments can lead to more frequent interactions between actors. This can contribute to a better focus in informal networks, to more boundary spanning and to the further development and strengthening of trust (Klijn et al., 2010a: 199). Therefore the following expectation 4 is formed: if government employs more network management strategies towards the self-organizing initiatives, the initiative will be more successful in terms of content outcomes.

Conclusion

All independent variables are positively correlated to the success of self-organizing initiatives. Hence, more focus in informal networks, boundary spanning activities, trust and network management by government, will positively influence the success of self-organizing initiatives.

The four expectations above, which are formed according to theory, are the bases of this research. They are logically converted into several sub questions, which are needed to answer the main research question: Which factors are of influence on the success of care cooperatives as a form of self-organizing initiatives in the social policy domain in the Netherlands?

Therefore, several sub questions are formed in order to make the research steps visible:
1. How do the four examined care cooperatives, as a form of self-organizing initiatives, differ in their characteristics and how does it influence the perceived success?
2. What do the municipal officials and citizens active in the four examined self-organizing initiatives perceive and understand as successful?
3. To what extent can focus in informal networks, boundary spanning, trust and network management by government be seen in the four cases as important factors for the success?
3. **Research design and methods**

This chapter presents the design of this study. The first paragraph deals with the operationalization of the dependent and independent variables in order to make clear how the concepts accurately measure what we want to know. Paragraph 3.2. discusses the chosen research design, namely a multiple case study and the selection of the four cases. Document analysis and semi-structured interviews with an additional closed questionnaire are conducted in order to obtain in depth knowledge on the factors that influence the success of self-organizing initiatives. Finally, the reliability and validity of this research are explained.

3.1. **Operationalization**

This section provides an operationalization of the independent and dependent variables with the definitions and the indicators to measure them. The indicators set are used as conditions or parts of the variables to find out whether and to what extent the factors for success of self-organizing initiatives can be seen in the cases. For instance, the indicators of the variable network management by government are intended more as strategies that the government can have and shows the degree to which the government uses strategies to manage the network. Appendix B displays the semi-structured interview guide and topic list, which reveals the questions that are asked to measure the variables. Furthermore, the closed questionnaire in appendix C is used as a check to confirm if and the extent to which the indicators below are visible in the cases.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Definition</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Focus in informal networks</strong></td>
<td>The development of clear and shared goals by using an informal network which gives room to connect with different actors and to interact outside their established rules and roles (Edelenbos &amp; Van Meerkerk, 2011: 5)</td>
<td>• Focus: development of a clear and shared goal</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Informal network: actors within the initiative have and make use of professional, political and social networks</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Presence of a trigger: events or developments which stimulate self-organization</td>
</tr>
<tr>
<td><strong>Trust</strong></td>
<td>The expectation of actor A that another actor B will abstain</td>
<td>• Agreement trust: live up to agreements</td>
</tr>
</tbody>
</table>
|                            |                                                                                                                                                                                                                                                                                                                                                                                                          | • Benefit of the doubt: actors give each other the...
| **Boundary spanning** | Skilled networker that is able to build sustainable inter-organizational relationships, to mutual exchange information and to coordinate across organizational boundaries (Williams, 2002: 115). | • Ability to build sustainable and trustworthy relationships  
• Selecting relevant information or signals on both sides of the boundaries (initiative /government)  
• Translating the information across boundaries  
• Mobilization of the home organization to consolidate network activities and decisions  
• Alignment between intra-organizational processes/ developments and those in the environment/ network  
• Innovation: new knowledge and solutions emerged |
| **Network management by government** | The purposeful attempt to govern processes in networks by governments by initiating and facilitating interaction processes between actors in self-organizing initiatives (Klijn et al., 2010b: 1065). | • Connecting: activation of actors or resources and mediate interactions.  
• Exploring content: clarify goals and views of actors and search for goal congruency.  
• Arranging: create structures of consultation and deliberation.  
• Process agreements: rules for interaction between actors (entrance or exit, conflict regulation, veto possibilities) |
| **Success of self-organizing initiatives: cognitive** | The increased shared knowledge and insights about the nature, causes and impacts of problems, possible solutions and their effects, actors’ | • Joint image building: better insight in nature of the problem and consequence of solutions  
• Frame alignment and consensus building: agreement about perceptions and consensus about solutions |
| learning                                                                 | • Development of negotiated knowledge: result of interaction and (scientific) research  
|                                                                      | • Goal intertwinement: win-win situations, solution that is seen as an improvement  
|                                                                      | • Ex post satisficing: satisfaction of actors with results  
|                                                                      | • Enrichment, integration of services and inclusiveness of solutions (include needs parties): development of innovative solutions |

*Figure 6: Operationalization*

### 3.2. Research design

This paragraph deals with the research design and explains why a multiple case-study approach is the best manner to conduct this research. Furthermore, the selection of the cases and the used methods of data collection are discussed, namely desk research and semi-structured interviews with an additional closed questionnaire.

#### 3.2.1. Multiple case-study

In order to understand and analyze the complex issue of self-organization in the social policy domain, a case study is the best way to obtain in-depth knowledge. A case study allows the researcher to retain the meaningful characteristics of real-life events and to explain how and why some social phenomenon work (Yin, 2009: 2). The object of this research is dynamic, which implies that a case study is the most suitable manner to analyze the process and to understand causalities.

Furthermore, the goal of this thesis is to add to existing theory on which factors influence the success of care cooperatives as a form of self-organizing initiatives. Currently, the empirical understanding of self-organization in the public sector is scarce, especially on the specific form of care cooperatives (Boonstra & Boelens, 2011; Nederhand et al., 2015: 6). That is why a multiple case study is needed to gain more knowledge and to understand why and how certain factors lead to the success of self-organizing initiatives.

In the theoretical framework, several factors that can possibly contribute to the success of self-organizing initiatives are discussed. However, additional factors appeared to be important for the success of care cooperatives while conducting the interviews and the analysis of the multiple cases. Therefore, the empirical research and understanding about how these four care cooperative emerged and what they perceive as important for the success is essential and a multiple case-study is the suitable method to reach this goal.
3.2.2. Case selection
In order to select the cases, the interactive map of self-organizing initiatives in care and welfare from Vilans is used to see how many and which care cooperatives are active in the Netherlands (http://www.vilans.nl/nieuwsoverzicht-zorgcoöperaties-en-burgerinitiatieven-op-de-kaart.html). This map gives a clear impression of the amount of self-organizing initiatives in care and welfare in July 2014, although the majorities of the initiatives are village cooperatives and not specifically care cooperatives. In addition, the map does not comprise all care cooperatives that exist nowadays. Therefore, search machines like Google (search word: zorgcoöperatie) were used to find more care cooperatives. On the bases of the following criteria, twelve care cooperatives were chosen and contacted to participate in this research:

- In the social policy domain: care and welfare (qualified as care cooperatives)
- From and by citizens: citizens are the ones that took the initiative, which emerged spontaneously without government influence (external)
- Robustness: some kind of formal organization and size, intended to remain existent
- Continuity: the initiative is active and exists more or less one year

The twelve care cooperatives differ in geographical location, size, specific approach and durability. However, the mission of the initiatives is the same, namely to provide services in the area of care and welfare in order to help their fellow citizens and for instance to improve their self-empowerment, the livability of the area and the social cohesion. Hence, the following four care cooperatives were willing to participate in this research and will be examined in-depth: Wijzelf care cooperative Zoetermeer, care cooperative ‘Zorg om Zorg’ Putte, care cooperative Gemert and KaDoZe (KAttendijke DOet het ZElf) care cooperative Kattendijke. Paragraph 4.2 provides detailed information about the cases and discusses the differences.

3.2.3. Data collection: desk research, semi-structured interviews and closed questionnaire
This sub-section clarifies what kind of data has been used to get in-depth knowledge about the four cases and which methods are used to collect these data.

Firstly, desk research is conducted by consulting the available information on the Internet. The websites of the four care cooperatives provide sufficient materials like, official and administrative documents, position papers and newspaper or journal articles. This information is used to obtain deeper insight in the activities, mission and context of the initiatives. Furthermore, documents serve to verify the evidence from other sources, such as information gathered in the interviews, in the interest of triangulation (Yin, 2009: 87).
Secondly, interviews are seen as a valuable source to conduct case study information and to overcome possible gaps due to the lack of information in desk research. Especially for this case study with the purpose of examining the factors that lead to a successful self-organizing initiative, interviews are important to obtain insight in the motives, strategies and needs of the self-organizing initiatives. Several types of interviews can be distinguished: open-ended, semi-structured, focused, structured or a survey. In this research, semi-structured interviews will be conducted in order to gain the necessary information by using an interview guide and topic list (appendix B), which allows the researcher to be flexible in the sequence of asked questions. Furthermore, the interview guide provides several formulated questions and topics. The intention of this way of structuring the interview is that a conversation will develop which gives the respondent the opportunity to place the story into its own context. The interview questions are based on the operationalization of the variables in paragraph 3.1. Besides, appendix A shows an oversight of the interviewed persons of the four care cooperatives. From every care cooperative, three persons are interviewed: two persons are actively involved in the initiative itself and one person is involved from the side of the municipality.

Thirdly, in addition to the semi-structured interviews a closed questionnaire is designed to overcome possible gaps between the theory and the answers given by the respondents (appendix C). In order to measure exactly what we want to know in this research, the closed questionnaire provides extra information about whether the factors derived from theory are present in the initiatives. It is conducted after the interview, although not every respondent had time to fill in the questionnaire or knew enough about the specific initiative in the case of civil servants. Finally, nine from the twelve respondents completed the questionnaire and at least two persons from every initiative, which provides a sufficient image of the indicators to derive conclusions. The closed questionnaire is based on the literature and operationalization of the factors that have an influence on the success of self-organizing initiatives (Klijn et al., 2010a: 205). The variable ‘focus in informal networks’ is excluded, because the indicators are more straightforward and can be measured in the interview itself.

3.2.4. Reliability

In order to indicate the reliability of the research, the central question is whether a repetition of this research will give similar results (Van Thiel, 2010). To ensure the reliability, a careful operationalization of the variables is important. In this way, other researchers will obtain the same results. The used method of conducting interviews is considered as not a very reliable method, since the collected data is not objective. The outcomes depend on the answers of the respondents and the interaction with the researcher during the interview.

Several factors are taken into account to make the research more reliable, such as
interviewing twelve different respondents. From every care cooperative, three persons are interviewed: one that is closely involved from the municipality and two from within the care cooperative itself. Additionally, this research is based on different sources of information, like available policy documents, information on Internet, the semi-structured interviews and a closed questionnaire. The semi-structured interviews are conducted by using an interview guide and a closed questionnaire to make sure all topics necessary for the research are discussed. A coding scheme and transcribing the interviews also contribute to an enhanced reliability of this research.

3.2.5. Validity
The validity of the research is seen as the most important feature, since measuring what is supposed to be measured and no other things is essential (Van Thiel, 2010). In this respect, a careful operationalization of the variables is also important to enhance the internal validity and to make sure that the research measures exactly what the researcher wants to measure. The use of a closed questionnaire as a supplement to the semi-structured interviews provides an extra means to ensure that the output is precisely what we want to know in this research.

This case study is considered to be low on external validity, because only one sector in one country is examined. However, this study can enhance the understanding of self-organization processes in a more analytical way by examining the complex interplay between actors from the initiative and the municipality, and the factors that lead to a successful self-organizing initiative.
4. Background - care cooperatives in the social policy domain

In this chapter, the background of the rise of care cooperatives as a form of self-organizing initiatives in the social policy domain is discussed. The first paragraph will describe the various developments in the social policy domain in the Netherlands and reasons for the increase in self-organizing initiatives. Paragraph 4.2 explains the specific characteristics and the background of the four care cooperatives to get a clear image of each case. Finally, in order to get a complete image of the four care cooperatives; the last subchapter will discuss how success is perceived in the different cases according to respondents. Chapter five and six deal will subsequently deal with the four factors that influence the success derived from theory.

4.1. The rise of care cooperatives as a form of self-organizing initiatives

As already set out in the introduction, the Dutch civil society is changing. This is mainly due to trends, like individualization, which leads to more tailor-made care, ageing which leads to a higher demand for care provision, migration and the current economic developments. These trends have visible effects on the health care system with governmental budget cuts, increasing costs and a decline in the supply of care and welfare facilities especially in rural areas (Boumans et al., 2015: 23). These developments and the fact that the government more and more encourages individual responsibility and active citizenship, result in the rise of self-organizing initiatives (Van Dam et al., 2014: 323).

Forms of those self-organizing initiatives are care cooperatives in which citizens arrange their own care and welfare services. Care cooperatives are seen as local networks of citizens who deliver care and support to each other on a voluntary basis (Schoorl & Winsemius, 2015: 1).

The concept of care cooperatives is increasingly seen as an umbrella term for different kinds of cooperatives in the field of care and assistance. The four analyzed cases display already differences in the used approach, for instance Wijzelf care cooperative Zoetermeer is clearly different from the other three care cooperatives. They are more a social enterprise with only an online platform where the care recipient is a member and their interests are represented. The other three care cooperatives put more emphasis on the village where they live and act on the basis of ‘give and receive’.

Therefore, it is difficult to define the concept of care cooperatives. However, by looking at the core characteristics of care cooperatives as a form of self-organizing initiatives, an image can be formed about what care cooperative is. Firstly, citizens themselves take the initiative; they ascertain a problem, like a lack of sufficient and fitting care and assistance or dissatisfaction with the current health care system. Secondly, those citizens try to involve other local residents and ask their opinion and advice about what to do with this problem. Thirdly, they form together a mission, such as the residents should be able to continue to live longer in this village. Finally, they come up with solutions for the problem, such as organizing neighborly help and care at home.
Over the past few years, the number of care cooperatives has increased enormously from around 30 initiatives in 2013 to 101 initiatives in 2014 and even more in 2015 (TransitieBureau Wmo, 2014). The first care cooperative already started in 2005 with the goal to let older residents continue to live in the village. Hence, the care cooperative is not a complete new phenomenon, although it undergoes a remarkable revival and transformation (Bokhorst, 2015: 28). Boumans et al. (2015: 27) argue that the current growth of care cooperatives is a result of the policy in the field of healthcare. The supply level of the government continues to drop and neither the market nor the existing care organizations are filling this gap. Hence, active citizens try to fill this gap, which is called ‘vacuum hypothesis’ by Van Opstal (2008), with care cooperatives. That is why, the goal of the initiators of the care cooperative is often to provide for the desired care services and facilities themselves in order to make sure that citizens can continue to live in their village as long as they want (Bommeljé & Keijl, 2014). Furthermore, the aim is to make connections and to build a network.

The establishment of care cooperatives fits well within the ‘participation society’ that the government has in mind (Boumans et al., 2015: 28). The government is stimulating active citizenship and encouraging citizens to take more initiative and self-control. They focus on future proof care and letting citizens continue to live as long as possible at home. The government expects that citizens exercise control about their lives and ask first in their network, for instance to family and friends, if they need care and assistance. This network is becoming more important and care cooperatives are increasingly embraced by government directors, which see them as a source of inspiration and a means for effective care provision (Bokhorst, 2015: 27).

To conclude, the rise of care cooperatives seems a logical result from the developments in our society and in the field of healthcare that affect different parties, such as citizens, government and care organizations. In the next paragraph, the four analyzed care cooperatives are introduced and are explained by their characteristics.

4.2. Characteristics of the four care cooperatives
The four analyzed care cooperatives are different in terms of the specific characteristics they display, such as size and activities that they organize. In general, they are all seen as care cooperatives, with the main goal of providing services in the area of care and welfare in order to help their fellow citizens to continue to live in their village and for instance to improve their self-empowerment, the livability of the area and the social cohesion. However, as argued before and as becomes clear from the case studies, there is not a clear definition of what a care cooperative is. Therefore, it is interesting and relevant to discuss and compare the background of every care cooperative. Table 1 gives a first impression of the characteristics of the four care cooperatives before briefly discussing each initiative. As a result, table 2 explains the core ideas of each case.
Table 1: Characteristics of the four examined care cooperatives

<table>
<thead>
<tr>
<th>Name care cooperative</th>
<th>Location</th>
<th>Amount of inhabitants</th>
<th>Amount of members</th>
<th>Date of foundation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wijzelf care cooperative Zoetermeer</td>
<td>Zoetermeer</td>
<td>124,000 inhabitants</td>
<td>&gt; 100 members</td>
<td>30th of May 2013</td>
</tr>
<tr>
<td>Care cooperative Putte</td>
<td>Putte</td>
<td>3600 inhabitants</td>
<td>220 members</td>
<td>14th of April 2015</td>
</tr>
<tr>
<td>Care cooperative Gemert</td>
<td>Gemert</td>
<td>15,000 inhabitants</td>
<td>1400 members</td>
<td>24th of April 2015</td>
</tr>
<tr>
<td>Care cooperative Kadoze</td>
<td>Kattendijke</td>
<td>550 inhabitants</td>
<td>60 members</td>
<td>1st of January 2015</td>
</tr>
</tbody>
</table>

**Wijzelf care cooperative Zoetermeer**

This care cooperative is the first in a currently growing chain of nine Wijzelf care cooperatives in the Netherlands. It is established by Maurice Smit and Willemien Visser, both engaged entrepreneurs with their background in the automatization. They developed an online platform where citizens can organize their own care by choosing a caregiver and arranging a meeting themselves. In this way, stimulating self-reliance of local residents. The care cooperative currently exists three years and is trying to professionalize by making annual reports, financial statements and by creating a suitable message to reach their target group.

**Care cooperative Putte**

The care cooperative Putte is an organization for and of the residents of the little village Putte, close to the Belgium border. With 3600 inhabitants, an ageing and lonelier becoming population and a decreasing amount of services and facilities; the pressure on the liveability of the village increased. This led to the establishment of the care cooperative after conducting a survey, which concluded that citizens were willing to care and look out for each other. At this moment, the care cooperative exists more than a year and is still growing with the ambition to realize several ideas to improve the liveability as will be discussed in the next chapter regarding the focus of the initiative.

**Care cooperative Gemert**

In 2015, six involved and known local residents of Gemert established the care cooperative. They experienced a changing society with a focus on self-reliance and changes in the health care system, like budget cuts and bureaucracy, leading to the emergence of this initiative. The board members try to connect questions for help or care with their known volunteers. Hence, this initiative could grow fast due to the cooperation with the seniors association (KBO) and handicapped association; their members are automatically members of the cooperative.
Care cooperative Kadoze

The care cooperative Kadoze in Kattendijke, a tiny village of 550 inhabitants in the province of Zeeland, emerged from the village plans of the municipality Goes. There are no facilities, only a community centre and a chocolate shop, which increased the need to think about the future of the village. The care cooperative is founded as a result of a survey conducted among the local residents and currently community activities are organized and the initiative provides help and assistance.

<table>
<thead>
<tr>
<th>Name care cooperative</th>
<th>Core ideas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wijzelf care cooperative Zoetermeer</td>
<td>Make practical care in and around the house accessible, reliable and affordable and give citizens back the leading role about their own care and support with the tool of an online platform</td>
</tr>
<tr>
<td>Care cooperative Putte ‘zorg om zorg’</td>
<td>Provide a renewed neighbourly help to maintain the level of facilities and to increase contact between local residents</td>
</tr>
<tr>
<td>Care cooperative Gemert</td>
<td>Create more security for the future and independence by ‘giving’ help or care and ‘receiving’ it in order to continue to live at home</td>
</tr>
<tr>
<td>Care cooperative Kadoze ‘KAttendijke DOet het Zelf’</td>
<td>Organizing community activities and providing help and assistance in order to promote social cohesion and to let citizens live at home</td>
</tr>
</tbody>
</table>

*Table 2: Core ideas of the four care cooperatives*

4.3. Care cooperatives: successful self-organizing initiatives

The actors within the four examined care cooperatives are all positive about the initiative and perceive it as successful for various reasons. In line with sub question two; the perception and understanding of the concept of success by the actors are discussed in the first paragraph, resulting in barriers or obstacles to achieve success.

4.3.1. Perceptions of success

The respondents of the four care cooperatives have different interpretations about what the success of a self-organizing initiative entails, because when can you see an initiative as successful? Each care cooperative refers to the growing amount of members as a sign of success, because members make the initiative work. Some differences are visible between the initiatives regarding the specific perception of success. Respondents from Wijzelf Zoetermeer regard the initiative as successful, because the goals that the care cooperative has set are achieved, the formula works well and people are using it. In the case of Gemert, the success is primarily visible according to the actors in the sense that local residents approach the care cooperative by themselves and also professional organizations increasingly want to talk and cooperate. Care cooperative Putte and Kadoze put more emphasis on the improvement of social cohesion, the new connections made and the positive experience and
support by the local residents to define the success.

Nevertheless, the expectation about what is seen as successful by each respondent itself determines the actual perception that they have about the success. For instance, Wijzelf care cooperative Zoetermeer does not see the initiative as successful in the sense that they are not financially independent whereas other care cooperatives are also not financially independent, but do not see that as their goal. So, high expectations cannot be met easily causing that an initiative is seen as less successful, while lower expectations, like achieving three goals out of five, can be met earlier.

‘When is such an initiative successful and how do you measure it? I think the output is good; there is a continuous line of participants and even growth. Also the impact is good; people are getting to know each other better and social contacts flourish’ (respondent K)

All care cooperatives, to a greater and lesser extent, experience involvement from local residents and see that more social contacts are made in their villages. Especially, this social aspect of care cooperatives is seen as successful. There is a clear urgency and demand for the creation of care cooperatives, which manifests itself in wide public support and citizens that spontaneously ask for help or want to be a volunteer.

‘You can approach success in different ways, like when goals are met. However, I think it is successful, because there is so much movement and liveliness. People meet each other and start to think about what they can contribute to the village. I think it fulfils a need that is only increasing’ (respondent F)

Moreover, the closed questionnaire (appendix C) gives more insight in the perception of the actors regarding the indicators of success of the care cooperatives as described earlier. In this research, the success of self-organizing initiatives is seen as cognitive learning, which is visible in the alignment of perceptions, the enrichment of solutions pursued and the realization of policies and services that are agreed upon, which also takes various objectives and interests of actors into account. There are two types of cognitive learning effects, joint image building and goal intertwinement; the latter is clearly visible in the first three bars in figure 7. The total figure shows the degree of success regarding content outcomes according to respondents from the four initiatives together. Due to small differences between the cases, it is unsuitable to display them separately.
Goal intertwinenent as the creation of win-win situations and a solution that is seen as an improvement is considered as important for the examined initiatives to become successful. The actors are satisfied with the results and they all view the care cooperative as successful. The first three bars in figure 7 display a positive image of care cooperatives as innovative, where all actors contributed in a recognizable way and societal functions are connected. For instance, all nine respondents of the closed questionnaire agree or strongly agree that innovative ideas are developed in the initiative, with all respondents from Wijzelf and Putte that strongly agree. The same holds for the involvement of actors, they delivered a recognizable contribution to the development of the results according to all respondents, mainly from Gemert, Kadoze and Wijzelf. In addition, different societal functions are sufficiently connected according to eight out of nine respondents, primarily Wijzelf and Putte. This means that the care cooperative is seen as a satisfying innovate enrichment. There are not many differences visible between the cases concerning goal intertwinenent, all respondents agree or strongly agree with the statements, which makes ranking difficult.

The other type of cognitive learning is joint image building, which is also seen as important for the final perception of success of self-organizing initiatives. This type is visible within the initiatives, but less as goal intertwinenent. For instance, care cooperatives Putte and Kadoze conducted a survey to get a better insight into the nature of the problem and what they can do to solve it by asking local residents what should be done to overcome the perceived problems. Hereby, they are trying to align frames and to build consensus in order to reach an agreement about what can be the solution. Furthermore, conducting a survey contributes to the creation of knowledge and
a joint image of the problem. Yet, it is doubtful whether the survey can be seen as scientific research and if negotiated knowledge is really developed. The respondents are also less convinced that the developed solutions really deal with the problem at hand, for example respondents from Kadoze answered ‘neutral’, which can indicate that there is more needed to tackle the problems than the initiative can provide for. They also score lower on the effectiveness of the solution in the future while Putte scored the highest on this statement. Though, the general image is positive and almost all respondents view the care cooperative as a durable solution, especially Putte and Wijzelf. Moreover, the benefits exceed the costs of the process to begin with the care cooperative, which implies that the costs do not overrun the benefits and it is worthy to start with the initiative. An overall look at the outcomes of the questionnaire indicate that the respondents from care cooperatives Putte and Wijzelf most often strongly agree with the statements, while Kadoze scored the lowest. Yet, the differences are small and it is not possible to derive concrete conclusions or to rank the initiatives.

4.3.2. Barriers for success
Since it is evident that all respondents view their care cooperatives as successful, it is relevant to review the challenges or so-called barriers they are dealing with to make their initiative successful. The most mentioned barrier for a care cooperative to really flourish is question embarrassment, in other words the fact that people are shy or embarrassed to ask for help or care. So, the challenge is how to get more care recipients and in some cases also more volunteers for the care cooperative. Care cooperative Kadoze tries to solve this issue by showing the positive things of what they do, by making contact and look for cohesion. In addition, to actively involve the village, ask what they need and align to this.

‘We do not talk about volunteers, but about the utilization of voluntary capacity. If you ask people would you like to help if you have time, then they say yes. So, they filled in a form with what they would like to do and the coordinator calls them when there is a request. They can say no, because it is not mandatory and that is very important. Hence, we have a lot of voluntary capacity’ (respondent D)

Moreover, financial support is essential for the initiative to grow and can be an obstacle when there is a lack of financial resources. Hence, finding financial support from organizations or professionals is crucial, especially in the beginning when the initiative does not have many means to build the organization as in the case of Zoetermeer. They also struggle to find their way or to position themselves next to the other possibilities local residents have to arrange care and support. Besides financial support, dealing and searching for cooperation with other organizations and professionals is also seen as a barrier for success when organizations are distrustful and view the initiative as
competition. Explaining what the care cooperative does and why they do it is very important to gain understanding and recognition as emphasized by care cooperative Putte and Kadoze.

The care cooperatives also refer to rejuvenation as a barrier for success, for instance care cooperative Kadoze tries to twist the image of an old lady club into a club for the whole population, for young and old. Initiatives like a tablet or computer course by younger residents for the elderly can be seen in Putte, Kadoze and Gemert, which stimulate the linking of different age groups.

Furthermore, care cooperatives often have high ambitions and the drive to undertake action, but this can also be a weakness when there are only a few people very active and choices have to be made in what you can do. Examples exist of initiatives or organizations that succumb to their own success in the sense that they grow so hard and turn into an uncontrollable organization, which eventually harms the success. In the cases of Putte and Kadoze, keep it small and local is the slogan. Thus, boundaries have to be set and related to this attention must be paid on what is the right message to promote or even sell the initiative.

All in all, the changes and the transformation in the social policy domain require a culture change that takes time. Yet, initiators and municipal officials of care cooperatives are aware of this culture change, but in practice people still expect that everything is arranged while currently it is more about what you can do yourself or if you can get help from your family or friends.

4.3.3. Conclusion

To be brief, the respondents of the four care cooperatives all consider their initiative as successful, but in different manners. For example, Wijzelf Zoetermeer emphasizes the achievement of goals, the proper working of the formula and citizens that join. Additionally, Putte and Kadoze see success as the improvement of social cohesion where new connections are made and there is support from the local residents. Gemert considers their initiative as successful, mainly because local residents and professional organizations approach the care cooperative by themselves. Yet, it remains difficult to note differences between the initiatives, because they are all satisfied and they all believe that their care cooperative is successful. Still, the closed questionnaire indicates that the respondents from Kadoze are slightly less convinced of the success, especially of the effectiveness of the solution now and in the future. On the contrary, Putte shows the most strongly agree answers, which implies that they perceive their initiative as very successful. Gemert and Wijzelf are in between with positive answers as altogether displayed in figure 2.

In contrast to the success factors, there are also barriers for success. The most frequently mentioned barriers are question embarrassment, rejuvenation and a lack of financial support. Additionally, searching for cooperation with other organizations and professionals can be seen as troubling as well as being clear about what you can and mostly cannot do as care cooperative.
5. **Empirical findings and analysis**

The previous chapter gave insight in the characteristics and emergence of the four care cooperatives and examined the degree of success regarding content outcomes of the initiatives. In this chapter, the four care cooperatives are analyzed more in depth by comparing the cases and review how the factors derived from theory can influence success. The first subchapter analyzes the factor ‘focus in informal networks’ to give an impression whether it is seen as important and to what extent it contributes to the success of the initiatives. Other subchapters deal with the factors trust and boundary spanning and compare the initiatives on the degree to which those factors influence the success of care cooperatives.

### 5.1. Focus in informal networks analyzed

Since the main ideas, characteristics and the degree of success of the four care cooperatives are displayed, it is relevant to look at how the initiatives emerged by analyzing the factor focus in informal networks and the three indicators: trigger, focus and informal network. Hence, questions such as: what was the main trigger, what is the focus or main goal and how important were informal networks in this process, will be answered by reflecting on the similarities and differences between the cases.

#### 5.1.1. Trigger

The respondents of the four analysed care cooperatives all mention the changes in the health care system as an important trigger for the emergence of their care cooperative. Yet, what kind of changes do they actually mean? The respondents refer firstly to a decline in the supply of care and welfare facilities; secondly to increasing costs and governmental budget cuts as main changes. Furthermore, societal developments like an ageing and lonelier becoming population and the rising focus on a participation society with more self-reliance are also reasons why people start to think about care and welfare in their own village. These changes are most visible in Putte, where decreasing care and welfare facilities with an ageing population is the main reason:

‘*In 2013, the image in the media arose that the health care system was going to collapse. Together with developments in our village, such as closing of the local nursing home, the new procurement of the public bus line and the moving away of facilities, like shops and banks. I started to think more and more about the livability of Putte, something had to be done if we want to continue to live here, especially with an ageing population*’ (respondent D)

The event of closing the nursing home is a clear trigger for the local residents of Putte to come into action. A shared sense of urgency to do something now is encouraging the establishment of a care cooperative for and by the residents of Putte. In this case, the municipality of Woensdrecht
is actively encouraging self-control and participation by the local residents. They have boosted the public debate about the future of the village by asking the local residents which ideas or initiatives they have. This can be also seen as a trigger, because citizens were stimulated to think about the future of their village, although the actual ideas or initiatives remained from themselves. The same holds for care cooperative Kadoze, where the municipality Goes initiated village plans and actively encouraged local residents to undertake action, which led to the establishment of the care cooperative. Both villages are small and confronted with challenges as described earlier. Moreover, social networks are changing, because younger residents move to the cities. These developments might explain the stimulating attitude of the municipality, because they benefit from a village that organizes care and assistance themselves.

In the case of Wijzelf Zoetermeer, the main motive is personal experiences with the care and assistance for relatives, which incited the initiators to think about how it should be done better.

‘Experiences with the help and care for our parents and our thoughts about how we would like our care and assistance to be arranged are the basis for this concept’ (respondent B)

In addition, personal work experiences in the health care sector contributed to the conviction that care and support should be organized differently, with more self-control from citizens. Hence, personal belief or rather idealistic and social motives were the reasons for the emergence of Wijzelf Zoetermeer. This is seen as a weaker trigger, because it is not rooted in the environment or shared by more people, which makes it more difficult to gain public support with just a personal trigger.

Moreover, personal experiences with the health care and welfare system were also the main trigger in the case of Gemert. Especially experiences with bureaucracy and slow procedures where people were send from pillar to post contribute to the belief that citizens can better do it themselves. Furthermore, the ‘cooperation thought’ is founded and lives in east Brabant where Gemert is positioned and therefore it is easier to set up a care cooperative. Still, this trigger is not seen as strong, because it is mainly based on personal experiences even though cooperation with elderly organisations and the cooperation thought can provide for public support. On the contrary, in the cases of Putte and Kadoze a stronger trigger can be found to establish their initiative, because they have support of the municipality and public support, which is obtained from the conducted survey with the question if there is a need for a care cooperative and what it should do.

Consequently, all four care cooperatives experience the changes in the health care system as one of the most important reasons to start and take the initiative to create the care cooperative. However, there are differences in the specific triggers, because in the cases of Wijzelf and Gemert personal experiences with care and the bureaucratic system were also important in setting up the initiative and are seen as weaker triggers. While in the cases of Putte and Kadoze reducing care and
welfare facilities and the active attitude of the municipality played a vital role and are referred to as stronger triggers. This difference can be explained by looking at the size of the villages of the care cooperatives. Reducing facilities and a benefitting municipality by realizing the care cooperative is decisive in the smaller villages while personal experiences prevail in the bigger cities. In table 3, the main trigger of each care cooperative is given and ranked from strongest trigger to weakest trigger.

<table>
<thead>
<tr>
<th>Name care cooperative</th>
<th>Main trigger</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care cooperative Putte</td>
<td>Decreasing amount of services and facilities (closing nurse home)</td>
</tr>
<tr>
<td>Care cooperative Kadoze</td>
<td>Village plans of the municipality</td>
</tr>
<tr>
<td>Care cooperative Gemert</td>
<td>Personal experiences with changes in the health care system</td>
</tr>
<tr>
<td>Wijzelf care cooperative</td>
<td>Personal experiences with the health care and welfare system</td>
</tr>
</tbody>
</table>

*Table 3: Main triggers for the emergence of the four care cooperatives*

5.1.2. Focus
Fewer differences are visible between the four care cooperatives in the focus, meaning the creation of a clear and shared goal. One of the main goals of all four initiatives is to create possibilities for local residents to continue to live in their village as long as they want, mainly by providing services in the area of care and welfare, like matching citizens’ supply and demand. This is a general and broad goal, so it is interesting to look at the different interpretations and ways to obtain this goal in each care cooperative. Table 4 gives a first impression of the most important focus of each initiative.

<table>
<thead>
<tr>
<th>Name care cooperative</th>
<th>Main focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wijzelf care cooperative</td>
<td>Stimulate the self-reliance of the citizens</td>
</tr>
<tr>
<td>Care cooperative Putte</td>
<td>Providing and maintaining decent amount of services and facilities to let citizens continue to live in their own homes</td>
</tr>
<tr>
<td>Care cooperative Gemert</td>
<td>Create more security, independence and possibilities for citizens to continue to live longer at home on the basis of ‘give and receive’</td>
</tr>
<tr>
<td>Care cooperative Kadoze</td>
<td>Improve social cohesion and let citizens continue to live at home</td>
</tr>
</tbody>
</table>

*Table 4: Main focus of the four care cooperatives*

Care cooperatives Putte, Kadoze and Gemert can be seen as similar regarding the focus in several ways; they are all based on the thought of ‘giving and receiving non-profit assistance’ and have the purpose of promoting the livability of the area and the social cohesion. However, the way they do that differs. For instance, care cooperative Putte focuses on helping each other to continue living in their own homes as long as possible by ensuring and maintaining a good level of facilities as appeared necessary from the conducted survey. Several ideas to improve the liveability in the village
are put into practice, like the emergence of a multiple generation house, a central telephone information point, residential care forms and a meeting point. They also provide a renewed neighbourly help with administrative issues, transportation, care mediation and chores in and around the house. This last part coincides with the activities of care cooperative Gemert, which offers also company and help with groceries. In both Putte and Gemert, the care recipient needs to fill in a form or send an email with what kind of help they need and then the board connects the questions accurately with their known volunteers. The specific focus of Gemert is to create more security, independence and more possibilities for the citizens to continue to live longer at home on the basis of ‘give and receive’. Besides, their mission is to collaborate and to strengthen organizations in the field of care and assistance.

‘Our goal is to improve the social cohesion and to make it possible for people to live longer at home. We try to organize fun and pleasant activities by means of the care cooperative, but it has to fit with what we can do’ (respondent K)

The goal of care cooperative Kadoze, becomes clear from the quote above. In the tiny village with no facilities, there was a demand for a care cooperative, which organizes community activities, like a coffee morning, a computer course and a cooking club and which provides help and assistance. As evidenced from the conducted survey in the village about what citizens find important and need.

The case of Wijzelf care cooperative Zoetermeer is the most divergent, because this initiative is seen as a social enterprise where the profit is returned to the society. The main goal is to stimulate self-reliance on a social, entrepreneurial and innovative way with the tool of an online platform where local demand and supply of care are brought together. Citizens can choose someone online that can provide care and support and they can arrange a meeting themselves without any interference, so management by the citizens. The four voluntary board members check the caregivers that subscribe to guarantee the quality and reliability. The target of the initiative is to be financially independent and to be a real care cooperative consisting of citizens that know each other. Thus, the system is as a means to reach the goal:

The online platform is a central tool, but not the goal. It’s about the empowerment of the people, the self-reliance (respondent A)

Therefore, this care cooperative is deviating from the rest with only an online platform, care givers that can be paid and just care receivers can be members of the care cooperative. Despite the different approach, all care cooperatives try to solve problems without professional care and serve the interests of their members. Every initiative wants to provide care and welfare services for the local residents to let them stay as long as they want in their own village as one of their main goals.
Improving the self-reliance is the most important goal of Wijzelf, while the other initiatives consider also improving the livability and the social cohesion of the area as crucial goals. Another similarity is the focus on elderly and care needy as target group, assuming that they need it the most. Yet, Putte, Gemert and Kadoze are actively trying to link different age groups by organizing for instance tablet or computer courses by younger residents for the elderly.

Hence, it can be concluded that all care cooperatives formed clear goals. However, the extent to which the goals are shared differs. In Putte and Kattendijke (Kadoze), a survey was conducted among the local residents, which provides support for the initiatives and for the related goals and activities. This is not the case in Wijzelf Zoetermeer and Gemert, which implies that the formulated goals are less shared and less common ground for action is created.

5.1.3. Informal networks
The use of informal networks is in the academic literature considered as important for an initiative to start, take the first steps and to grow. All four care cooperatives used informal networks to promote their initiative, although variation is evident in the degree and way in which networks are used. This section will discuss the ways in which informal networks are used to promote the initiative and compare the cases. First of all, it is relevant to elaborate on the understanding of informal networks, because what characterizes informal networks? In this research, the degree to which professionals, political and social networks are used, are indicators and predictors to evaluate how important informal networks were in the process of setting up and promoting the initiative. Table 5 shows the frequency in which the three types of networks are used in each case varying from ‘often, sometimes, seldom, never’. The frequency is determined by looking at the number of actors and contacts that each care cooperative maintains.

<table>
<thead>
<tr>
<th>Name care cooperative</th>
<th>Professional network</th>
<th>Political network</th>
<th>Social network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wijzelf care cooperative</td>
<td>Sometimes</td>
<td>Seldom</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Care cooperative Putte</td>
<td>Sometimes</td>
<td>Often</td>
<td>Sometimes</td>
</tr>
<tr>
<td>Care cooperative Gemert</td>
<td>Often</td>
<td>Seldom</td>
<td>Often</td>
</tr>
<tr>
<td>Care cooperative Kadoze</td>
<td>Seldom</td>
<td>Often</td>
<td>Often</td>
</tr>
</tbody>
</table>

*Table 5: Usage of informal networks by the four care cooperatives*

Firstly, the professional network is characterized by the number of contacts with professional organizations, such as general practitioners, village supporters, (elderly) associations, entrepreneurs and other care or support organizations. From table 5 becomes clear that Gemert makes the most usage of professional networks, because they have a close cooperation with the seniors association (KBO) and handicapped association (Houvast). Members of these associations are automatically
members of the cooperative, unless they do not want to. In this way, the initiative could grow fast to around 1400 members, although the members who really use the services of the care cooperative is lower, since there are around 200 matches made. Furthermore, they used the network of the village supporters, general practitioners, and entrepreneurs, Rotary and of other social organizations to reach the local residents of Gemert and to set up initiatives like a social map of Gemert.

‘Searching and enter into cooperation is very important, you need other parties to make connections, because it will be very difficult to be on your own as a care cooperative. The initiative needs to be a supplement to what is already there and strengthen the networks that exist’ (respondent I)

The interviews with the respondents show that every care cooperative tries to establish cooperation with professional organizations in different ways. For example, Wijzelf Zoetermeer uses the network of the Rotary and entrepreneurs and is developing partnerships with association Piëzo and the association of caregivers (Mezzo and Per Saldo). In addition, care cooperative Putte uses the network of the seniors association (KBO), the village council and involves via the pilot with the municipality also general practitioners and other care organizations. Yet, some care organizations see this initiative as competition and time is needed to establish cooperation. Kadoze experienced tensions with other organizations too, mainly with the village council, which saw the care cooperative as a threat towards their own activities instead of a supplement. However, they focused on cooperation with entrepreneurs to make deals for their members, like discount on valet service, but less on cooperation with care organizations. That is why, compared with other cases, Kadoze uses seldom professional networks and Putte and Wijzelf sometimes use professional networks.

Secondly, political networks as good relations with the municipality are also considered as important to bring the initiative further. There is a clear division visible between on the one hand, the close cooperation and active support from the municipality in the cases of Putte and Kadoze where the relationship is good and they have often contact. On the other hand, the less supportive municipalities in Gemert and Zoetermeer, where a ‘wait and see’ attitude prevails. Even though there are conversations between the municipality and the initiatives, the municipality does not play a big role in both cases. Only in Gemert, the initiative got a start subsidy from the municipality, but they prefer to be independent, like Wijzelf Zoetermeer. This division between the cases will be elaborated in chapter six regarding the role of the municipality towards the initiatives. Finally, all the care cooperatives made use of their own social network, they tried to get more attention and more demands by activating their family, friends, neighbours and acquaintances. Wijzelf care cooperative Zoetermeer used the initiators’ network of the local church:
‘Informal networks, I think it is disappointing what it can do. You can call in your own network that you started this and I’m a member of the local church, but it’s not like half of the church wants to be a member then’ (respondent B)

However, the current board members of Wijzelf argue that their social networks are valuable to bring in sponsors. They also emphasize the importance of social media to promote their initiative for instance by creating their own Facebook site. Just like Kadoze, which also actively uses Facebook to reach the local residents. Furthermore, all four initiatives focus on the more classical promotion activities, such as organizing information meetings, advertisements in local newspapers and distributing flyers door to door. These activities contribute to the visibility, awareness and understanding of people about how the care cooperative works. In Gemert, the initiators are known in the village and are aware about what is going on. They can get easy access to for instance subsidies from the Rabobank or the Rotary due to their valuable social networks. While in Putte, the initiators are not from the village itself, which makes it more difficult to use social networks. Yet, they conducted a survey to know what the local residents want and in this way, the initiators could gather a group of likeminded citizens around them to develop the care cooperative further as also Kadoze did explained in the quote below:

‘The care cooperative is an ‘us knows us’ story, the initiators knew the right people and more and more citizens are joining. This is very important and therefore the initiative could grow fast’ (respondent L)

Another way to look at social networks is by analysing the amount of contacts and atmosphere within the board of the initiative. They all experience a good atmosphere among the board members, but there are some differences in the frequency of contacts. Wijzelf Zoetermeer and Putte have a meeting approximately once a month, but have more contact by mail or phone, while Gemert gathers every week. Kadoze is less strict and meet when they have to discuss something.

Consequently, by analysing the frequency of using professional, political and social networks a conclusion can be drawn on which initiative uses their informal network the best. The most complete usage of informal networks is done by care cooperative Putte, which makes often use of their political network and sometimes of their professional and social network. However, Gemert and Kadoze are following quickly by both making often use of their social network. Yet, Gemert seldom uses their political network while Kadoze uses that often and for the professional network it is the other way around. The only care cooperative that is lacking a bit behind is Wijzelf, because they sometimes use their professional and social network and just seldom their political network. Still, this ranking is not fixed or determining the final success of the care cooperatives and more is needed to make it successful and to convince people to join the initiative. Yet, care cooperatives can
get more notoriety and can grow fast by using strong informal networks that can help to establish cooperation and to get publicity, like positive word of mouth advertising.

5.1.4. Conclusion

The previous paragraphs showed the development of the care cooperatives regarding the trigger, focus and usage of informal networks. By comparing the four care cooperatives, a cautious ranking can be made on which care cooperative used the factor ‘focus in informal networks’ the most and what this means for the final success of the initiatives. Hereby, answering the first sub question.

First of all, the analysis of care cooperative Putte shows a clear and urgent trigger with the closing of the nurse home and the decrease of facilities. As well as shared and clear goals as outcomes from the conducted survey in the village to see whether there was a demand for a care cooperative, what people needed or what could be done better. In this way, the initiative could gain public support easily, because they knew exactly what citizens want. Additionally, they make the most use of informal networks meaning professional, political and social networks. In short, care cooperative Putte can be seen as the initiative with the most visible focus in informal networks.

Yet, closely followed by care cooperative Kadoze which also conducted a survey that was very valuable for the initiative to formulate clear and shared goals. The quote below makes clear that the survey was used to gain commitment and support from the local residents.

“What we think is really important is the commitment of the citizens. You can want a lot of things as initiators, but do the local residents want it? So, we conducted a village consultation’ (respondent D)

Furthermore, Kadoze proves to have a strong trigger and they use informal networks, mainly political and social networks, to boost their initiative. Both initiatives are actively supported by the government and can use their network, which explains in part why Putte and Kadoze are displaying more focus in informal networks. Another similarity is the fact that both initiatives are rooted in a small village, which also contributes to getting more public support.

By way of contrast, the other care cooperatives of Gemert and Wijzelf Zoetermeer are established on the basis of personal experiences and experience less involvement of the municipality. They formulated clear goals, although those goals seem less shared, because the initiatives did not consult the local residents, which make it difficult to see whether there was common ground for action. Yet, Gemert and Wijzelf Zoetermeer conducted an environment analysis in order to identify the parties they are dealing with and what their needs and interests are. Hence, they try to establish cooperation with professional organisations and to use their social network to promote the initiative.

On the whole, a clear trigger that provides reasons for the initiative to emerge, the development of clear and shared goals and a sense of urgency together with informal networks to
promote the initiative are crucial to flourish. An additional indicator for focus in informal networks and a factor that influences the success is the degree of public support. All four care cooperatives are from and by the citizens, so the public support of the local residents is essential in developing a self-organizing initiative. This was not specified in the theoretical part of this research, but arises from the interviews with respondents. Without support of the local residents, an initiative is destined to fail.

In addition, Kadoze and Putte refer to the scale of their care cooperative as an important factor of their success, namely small and locally organized. The thought exists that care cooperatives in small communities or villages have more chances of success than care cooperatives in bigger communities, because it is easier in a village to build up connections, to create a shared goal and a sense of urgency. People are dependent on each other in smaller villages and that is less in bigger cities where there are more facilities and possibilities for people to get care and assistance. Moreover, the municipality of the bigger city, in this case Zoetermeer, feels also less the urgency to support the care cooperative, because there are other possibilities for people to arrange their care and assistance. The municipality does not feel the necessity to be actively involved in the care cooperative, while municipalities from smaller villages are more inclined to stimulate the initiative. They benefit themselves from a successful care cooperative, like in Putte and Kadoze.

5.2. Boundary spanning analyzed
Since it is clear from the section above what citizens involved inside the initiative perceive as the meaning of success of self-organizing initiatives, it is relevant to review the factors that lead to the achievement of goals or the improvement of social cohesion. Hence, what is the underlying layer that enables the care cooperatives to be viewed as successful? One factor that can contribute to the success according to theory is boundary spanning. This section analyzes the characteristics, activities and the role of boundary spanners within the initiative. Firstly, comparing the four care cooperatives on the basis of whether there are boundary spanners active inside the initiative and which characteristics they have. Second, addressing the role and activities of boundary spanners in order to research how they act within their care cooperative. Finally, providing a short conclusion on the importance of a boundary spanner and the initiative in which they are most evidently present.

5.2.1. Boundary spanners and their characteristics
The four care cooperatives all have active boundary spanners that started the initiative. These persons are also seen as key figures or initiators of the process, each initiative has one or two board members or initiators that can be described as a boundary spanner. However, what actually characterizes them? The boundary spanners inside the initiatives have different backgrounds and live in different contexts. Still, some general trends are visible from a distance, for instance there are an equal amount of men and women acting as boundary spanners and the average age of boundary
spanners within care cooperatives is high with the majority enjoying their pension. This can be explained by the fact that they have more time and belong to the target group, which would like to continue to live at home. Furthermore, the following analysis discusses the characteristics of boundary spanners in the four care cooperatives according to the respondents. It is difficult to say how many characteristics a person needs to be seen as a boundary spanner, although a combination of elements is in most cases evident.

The first and most mentioned characteristic of a boundary spanner is an active, driven and motivated person that is enthusiastic, has a clear mission and is willing to invest time and effort into the development of the self-organizing initiative. In all four cases, this general characteristic of a boundary spanner is visible and listed as crucial.

Other characteristics, which are close to the ones expressed before, are a ‘do’ mentality; a boundary spanner is a person who really acts and can see what is necessary. For example, Kadoze has three actively involved board members of whom the chairwomen is the most visible, which are independent, try to delve into what is necessary, see chances and really act on the basis of that. Moreover, when there is a problem and people have opinions about how it should be done better or what is necessary, then the boundary spanner translates those thoughts into real action and gathers the right people around him or her to help to solve this problem. This is also obviously visible in the cases of Putte and Gemert, where the initiators gathered a likeminded group of citizens around them and ideas were transformed into real action. Hence, the characteristics of undertaking action and being able to gather and activate the right people are very important for boundary spanners.

Furthermore, a big network in the local village and knowledge of the local organizations and associations can help to promote the initiative and to gain trust in order to boost the care cooperative. This can be seen clearly in the case of Gemert; the six initiators are known in the village and have big social networks, which boosted the initiative.

‘We as the board ‘pull the wagon’; we are all known in Gemert and have big social networks. Some of us also have experience with governing and with the care sector, which is important’ (respondent G)

Yet, some tensions can arise that boundary spanners need to be aware of. For example in Gemert, some key figures were involved in politics, which can cause a certain tension with the municipality. In addition, Kadoze experienced tension with the village association and with key figures in the village. They tried to hold on and explain exactly what they do and why. So, it is vital to take key figures and organizations in the village seriously and to involve them in decision making.

Besides the network, experience in the health care sector is also seen as beneficial for the development of the initiative. Knowing how the system works and what is necessary to improve it can be an advantage. Additionally, a boundary spanner can be innovative and can have an
entrepreneurial spirit in the sense that new and transforming ideas are developed and implemented. Wijzelf Zoetermeer is an example of entrepreneurial couple that started their own social enterprise and chain of care cooperatives. The outcome of the closed questionnaire shows that all nine respondents agree or strongly agree with the statement that a boundary spanner innovates, which means that a boundary spanner is someone that looks from an innovative perspective to problems.

Finally, for a self-organizing initiative to become successful, one or several boundary spanners are needed, which are seen as the faces of the care cooperative. The familiarity and reputation of those boundary spanners and the ability to build sustainable relationships as well as to act as a connecting and binding person can enhance the trust that local residents have in the initiative. It is valuable for a boundary spanner to be able to switch between the role of being inside the care cooperative, having to talk to formal organizations and to act as a resident of the village where talking to your fellow residents is important. The ability to switch between those roles and to translate information is mentioned as vital for a boundary spanner; to truly ‘span the boundaries’.

‘The ability to switch between being a resident of the village with fellow residents and acting as chairman of the care cooperative with various professionals, that is a great strength’ (respondent F)

As this quote reveals, the initiator of care cooperative Putte is seen as very competent in connecting and switching between formal and informal roles.

5.2.2. Boundary spanning activities performed
Since all four care cooperatives have boundary spanners that share general characteristics, a composition of the ‘perfect’ boundary spanner can be made. This is made visible in figure 8 according to the respondents. In short, a boundary spanner is the face of the care cooperative, which is an active, engaged and motivated person, with a ‘do’ mentality that is enthusiastic, innovative, and able to build sustainable relationships and is willing to invest time and effort. A big network in the local village, experience in the health care area and the ability to gather and activate the right people.

| Portrait of a boundary spanner | - Driven, motivated and enthusiastic  
- Able to build sustainable relationships  
- ‘Do’ mentality  
- Innovative  
- Willing to invest time and effort  
| Preferably: network in the local community, experience in the health care sector and able to switch between different roles and environments |

**Figure 8: portrait of a boundary spanner with the main characteristics**
can help to stimulate the self-organizing initiative. The output from the closed questionnaire (appendix C) is displayed in figure 9, where a general overview of the respondents answers of the four initiatives is given regarding to the boundary spanning activities that boundary spanners perform. Hence, several implications can be made about the activities or the role that a boundary spanner takes within the initiative by analyzing figure 9.

![Figure 9: boundary spanning activities within the four care cooperatives](chart)

First of all, a boundary spanner is able to build sustainable and trustworthy relationships, together with being innovative; this is seen as the most important role or activity that a boundary spanner can perform. Subsequently, mobilizing the initiative to consolidate network activities and decisions is also seen as an activity that boundary spanners undertake. This means gathering the right people and organizing network activities. These activities are the clearest visible in care cooperative Putte where the respondents strongly agree on all three statements. Eventually, selecting and translating information and aligning developments in the environment with those in the initiative are mentioned as boundary spanning activities too, but less convincing. Especially by Wijzelf Zoetermeer, which answered ‘neutral’. Yet, the outcomes of the closed questionnaire show that most respondents agree or strongly agree, which implies that the boundary spanners in their initiative perform these activities. This makes it difficult to describe differences and to rank the initiatives, because boundary spanners are present in all cases, which equally demonstrate these activities. However, in general the most ‘strongly agree’ responses come from Putte and Kadoze.

As the characteristics and the activities of boundary spanners are discussed, it is interesting
to look at what would happen if those boundary spanners were gone. Most respondents argue that the care cooperative already improved a lot in the village, like the contact between local residents and the informal network that was established and that will not disappear anymore even without the boundary spanners. Still, care cooperative Gemert emphasizes that boundary spanners are important to maintain certain activities and to be constantly alert on what is going on in the village. Additionally, respondents from Putte feel like the care cooperative is no longer needed in this shape:

‘When all the goals are achieved and the connections are made, maybe there is no need for the organization of the care cooperative anymore. Something has already been put into motion that will continue to develop itself’ (respondent E)

Care cooperative Kadoze focuses more on finding young and new people that can continue with the initiative when the current board members are gone and Wijzelf Zoetermeer consists of an online platform which can maintain itself more easily although a ‘quartermaster’ as they call it, is still needed to pull the wagon locally and is seen as the spider in the web.

5.2.3. Conclusion
According to the respondents, a boundary spanner is seen as important for the development of the initiative and for the ultimate success as can be seen in figures 8 and 9. The focus of boundary spanners in all cases lies primarily in the early phases of setting up, gathering the right people, making connections, building relationships and promoting the care cooperative. In this sense, care cooperative Putte shows slightly the most active boundary spanner, which is innovative, gathered the right people and transformed ideas into real action. Additionally, he is very competent in connecting and switching between formal and informal roles and hereby establishing cooperation. Yet, closely followed by the other initiatives which all have their own boundary spanners with strong points. For instance, the six initiators from Gemert all have big networks and specific experience that can bring the initiative further and are able to establish cooperation with existing organisations.

The board members of Kadoze are all engaged boundary spanners with a ‘do’ mentality that listen carefully to what is needed in the local village and act on the basis of that. In addition, the strong point of the two initiators of Wijzelf Zoetermeer is their entrepreneurial and innovative capacity. Their concept of an online platform is seen as social innovation, especially because it is easy to copy resulting in nine Wijzelf care cooperatives in the Netherlands. Furthermore, they were active inside the board for just one year, which suits the character of an innovator as having presumably a short attention span; because the challenge lies mainly in setting up the initiative and making it work instead of maintaining it for years.

Consequently, less visible differences between the cases can be seen regarding the boundary
spanners active inside the care cooperatives. The focus of boundary spanners is aimed in particular at the beginning, when they try to make a success of the care cooperative by finding innovative solutions for actual problems and implementing them. In addition, to make a self-organizing initiative successful, at least one person is needed which is actively involved and that is considered as an enabler or drives who boosts the initiative too.

5.3. Trust analyzed
Another factor that can contribute to the success of self-organizing initiatives according to theory is trust. This section will give insights in what the respondents of the four care cooperatives understand and experience by the concept of trust by examining the trust among board members in the initiative and the trust of the environment in the care cooperative, such as local residents and professional organizations. Yet, first the general meaning of trust according to the respondents is explained.

5.3.1. Meaning of trust
All respondents mention trust as a determining factor to create a successful and lasting self-organizing initiative. Still, the concept itself remains vague, because what is trust exactly? Is it especially trust between people or trust in a system that counts and when is something seen as trustworthy? Those questions are difficult to answer, because a different view on trust is comprised depending on everyone’s context and understanding. Nevertheless, the respondents see trust mainly as an intention or rather as a sensation about the intentions of other board members. They relate it to the image that they as board members and the care cooperative as a whole want to radiate towards the environment or rather towards local residents and professional organizations. Hence, there is a difference between the trust among board members and the trustworthiness that the initiative wants to display. The next section will discuss the trust among board members and initiators followed by the last section about trust of the environment in the care cooperative and ways in which the trustworthiness can be enhanced.

5.3.2. Trust between board members
Board members or initiators involved in the care cooperatives generally trust each other as figure 10 demonstrates. There are not many differences between the four cases regarding the level of trust among board members, they all mainly agree of strongly agree with the statements as expressed in appendix C. Yet, it is evident that the most respondents from all four initiatives strongly agree with goodwill trust, which means that they assume that the intentions of other actors are good in principle. Closely followed by reliability, where actors keep in mind the intentions of other parties as strongly agreed by all respondents from Gemert. Furthermore, all respondents agree or strongly agree with agreement trust, which implies that they believe that board members live up to agreements made. In addition, there are slightly less people that strongly agree with giving each
other the benefit of the doubt. Nevertheless, seven out of nine respondents agree. They also do not use contributions of other actors for their own advantage as the bar ‘absence of opportunistic behavior’ shows. Only one respondent from Putte disagrees, which means that some actors perform opportunistic behavior. Therefore, a very positive image is created by these outcomes, because all four care cooperatives believe that trust is important and they trust each other as board members.

**Figure 10: Trust between board members of the four care cooperatives**

Trust among board members is expressed in the sense that board members are being open and transparent towards each other as the following quote from Putte demonstrates:

‘Off course you need trust within the board, otherwise you cannot work together and I even think that the care cooperative would not exist without trust. Being open and transparent towards each other, that is essential’ (respondent E)

As a result, there needs to exist trust between the board members. A care cooperative is an initiative from and by the citizens and the cornerstone is trust. The board members need each other to make it work, so it is important to create a good atmosphere to work together and to function as desired. The goal is central and needs to be kept in mind when making decisions as respondents from Kadoze argue. In the case of Wijzelf Zoetermeer, the board members have different areas of expertise, some know more about the care sector and others know how to run an organization. Those are two sides of the same coin that needs to be properly put together. They argue that it is important to listen carefully to each other and to not turn with every change of the wind direction. Also in Gemert, the six board members each have their own specific area of expertise and they
strengthen one another, but confidence in the capabilities of the other board members is essential. The outcomes of the closed questionnaire point out that Gemert has the most trust among board members, since the respondents strongly agree with the most statements. This can be explained by the fact that their board and the networks that they have are extremely important for the success, so there should be a high level of trust between the six board members. Minor differences are visible between the other three cases of Kadoze, Wijzelf and Putte where the respondents mainly agree with the statement of the closed questionnaire (appendix C).

5.3.3. Trust of the environment in the care cooperative
Given the high level of trust between the board members of all four care cooperatives, it is expected that the board members also perceive the trust of the environment, such as local residents and professional organizations, in the initiative as high. This paragraph explains how the respondents inside the care cooperative try to gain and foster the trust of the environment as displayed in table 6. In fact, all board members believe that in order for a care cooperative to grow and to succeed, it has to be seen as trustworthy. Yet, how do the initiatives stir the public opinion to be seen trustworthy? How do they try to foster trust?

The respondents of Wijzelf Zoetermeer mention that their system of an online platform needs to be reliable and accessible for all potential users in order to be seen as trustworthy. This involves giving clear information about how they work, screening the caregivers and backing up their members if something goes wrong. The backing of financial and juridical procedures and the reviews of other members must render confidence. Additionally, they emphasize on establishing contact and figuring out what is the actual desire of their members:

‘There is no one that wants to have a passport, but you need it to travel. That is the same with care, you need or maybe want care, but mostly you want a good life and care is a part of that. So, trying to figure out what is really the desire by being open and transparent is vital to gain trust’ (respondent A)

Care cooperatives Putte and Gemert also indicate that being open and transparent as a board is crucial to foster the trust of local residents and of other organizations. They refer to being clear about what you do, what you earn and how you spend it, but also being open to suggestions and trying to learn from each other as essential element to gain trust. Both initiatives act in a more informal way by matching the care recipients and caregivers themselves. This requires an even higher level of trust of members in the abilities of the board members of the care cooperative to make the right matches. Care cooperative Gemert tries to establish this trust by relying on the prestige and notoriety of their board members and the fact that people trust them because of for instance their political expertise and knowledge of the village. They also use cooperation with existing professionals.
and organizations to increase their visibility and to win trust from local residents, just like care cooperative Putte, which can profit from the network and cooperation of the municipality that helps to convince other parties to collaborate and citizens to join. Moreover, positive reviews and word of mouth advertisement are very important for an initiative in order to be seen trustworthy.

Care cooperative Putte tries to foster trust by making contact and explaining what they do and how. They experienced that people may be distrustful at first and the citizens think what is happening there. However, using practical examples, simple language and videos can contribute to the feeling that people are taken seriously and they can say what they want as displayed in the case of Wijzelf and Kadoze. In addition, a ‘face’ of the care cooperative and a contact person can work to establish even more trust. This could be in the form of a boundary spanner, which is able to build sustainable and trustworthy relationships, like in the case of Gemert where the initiators have big social networks and are known in the village. Respondents from Kadoze are using a code of conduct towards the environment, focusing on treating each other with respect, leaving everyone in its own value and providing space to people to say what they want in order to make them feel comfortable.

<table>
<thead>
<tr>
<th>Name care cooperative</th>
<th>Way to gain trust of the environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care cooperative Putte</td>
<td>Establishing contact and making clear what they do by using practical examples and simple language</td>
</tr>
<tr>
<td>Care cooperative Kadoze</td>
<td>Usage of a code of conduct with respect as central value</td>
</tr>
<tr>
<td>Care cooperative Gemert</td>
<td>Rely on prestige and notoriety of board members and using cooperation with existing professionals and organizations</td>
</tr>
<tr>
<td>Wijzelf care cooperative</td>
<td>System as reliable and accessible online platform with backing of financial and juridical procedures and screening of the care givers</td>
</tr>
</tbody>
</table>

Table 6: Ways to gain trust of the environment in the four care cooperatives

These examples of the four care cooperatives and their ways to foster trust demonstrate that they are all aware of the importance of safeguarding the privacy of their members in order to be seen as trustworthy. In fact, people are asking private questions for help or company and they do not want the whole village to know it. For this reason, it is crucial that board members are regarded as confidential persons to whom members can express their questions. In order for people to join the initiative, the system and the way information of the members is handled must appear trustworthy. If the privacy is not safeguarded enough and there is no transparency about what happens with the questions and data, then people will not ask questions anymore and this will damage the success of the care cooperative.

Besides safeguarding privacy, the content of the care cooperative itself needs to be seen as
trustworthy too. According to the respondents of all initiatives, this entails a personal approach where direct contact, focus on the care recipient as well as on the volunteers and the opportunity to meet each other are central. This contributes to the community feeling and to the improvement of the social cohesion, which can only be fostered if they are founded on trust. Another important element to positively stir the public opinion of local residents is by ensuring reciprocity as a part of the care cooperative. When local residents feel like they can give, but also receive than there is a bigger incentive to join as in the case of Gemert where ‘give and receive’ is the core idea. Citizens need to feel ownership and involvement with the initiative. They are part of something that is meaningful for the village and where they benefit from, resulting in a positive image and higher trust.

These aspects noted before can enhance the trust towards the environment of the care cooperative. Nevertheless, trust is also vulnerable; one ‘bad’ story about the care cooperative or its board members can damage the initiative. Especially in a small village where one story in a gossip circuit can go around fast and trust is difficult to repair. Therefore, it is important to protect the privacy of people and to be alert and aware about what is going on. As a result, trust can be perceived different in a small village than in the city, because everyone knows each other in a village and trust can be established easily.

‘The care cooperative must appear trustworthy; people are asking private questions for help or company. So, it maybe works better in a neighbourhood or village than in a whole city’ (respondent C)

With regard to this hypothesis, a care cooperative in a smaller village would be able to establish trust faster than in a bigger city where people do not know each other. The downside can be that people in a village know each other so well, that they are afraid to ask questions and trust can be damaged quickly by just one story that goes around. For instance, in the little village of Kattendijke (Kadoze), the ‘Zeeuwse’ mentality of arranging things yourself is very strong and citizens are embarrassed to ask questions, which makes it difficult for a care cooperative to win trust and to work well. Eventually, positive and good experiences are determining and making contact and ask or even involve them actively to find out what they need.

5.3.4. Conclusion
In sum, trust is considered to be very important for the initiative to grow and to work properly. It is seen as an intention or rather as a sensation about the intentions of other board members. Trust between board members of the four care cooperatives is high as made visible in figure 10; they all trust each other and believe that trust is vital for an initiative to work. There are minor differences visible between the cases, with Gemert as initiative with the highest trust between board members.

Furthermore, trust is also related to the image that board members and the care cooperative
as a whole want to radiate towards the environment or rather towards local residents and professional organizations. In order to gain the trust of the environment and to be seen as trustworthy the four initiatives try to be open and transparent. Wijzelf Zoetermeer focuses on a trustworthy system, just like Kadoze and Putte, which focus more on privacy and safeguarding the information of people as a board by establishing contact and using a code of conduct. In addition, Gemert relies more on the notoriety of the board members and the cooperation with existing organizations to establish trust. Hence, they all have different strong points and elements on which they focus in order to create trust among their board members and towards the environment.

Consequently, a care cooperative is an initiative from and by the citizens and the cornerstone on which it is build is trust. It is important to keep in mind that trust has to grow and time is needed in order to build it up. Furthermore, awareness about how fast trust can be damaged is indispensable and the fact or sensation that people trust the initiative does not naturally mean that they also become a member. More is needed for local residents to really subscribe and for the care cooperative to be a success. For instance, local residents have to feel like the care cooperative has something to offer and that they want to be a part of it. Thus, trust is very important and without trust the initiative will probably not work, but there are more factors leading to the final success.
6. Role of the government regarding the care cooperatives
The previous chapters analyzed important factors for the initiative to be established, to grow and which contribute to the success of the care cooperatives, such as focus in informal networks, boundary spanning and trust. According to theory, another successful factor of self-organizing initiatives is network management by government. A facilitating role of the municipality is desired as will be explained in the first paragraph. Furthermore, the experiences of network management by the government according to board members are discussed before elaborating on the experiences of civil servants themselves with the role that the municipality takes.

6.1. Facilitating role of the municipality
The respondents from the side of the initiative and from the municipality argue that the government in general should adopt a facilitating role towards self-organizing initiatives, which is also more and more what citizens are asking and what the government sees as their role. A facilitating government that is trustful, connecting parties and searches for cooperation and new opportunities.

‘We are aware of our new role as a municipality, the society is changing and is asking different and new things and we have to move along. All that citizens can do themselves, they have to do and we have to learn to let go as a municipality, that is a process and we are still searching’ (respondent L)

Hence, the quote above represents the general perspective of the four municipalities on their new role as a more facilitating and more releasing or ‘letting go’ government role. However, it is difficult to act in a different way and to look from a different perspective when civil servants have to deliver a specific production on time and they are used to do that in a specific way. So, a change in attitude and habits takes time as civil servants from all care cooperatives confirm.

Furthermore, not many municipalities are really applying it, but the ones that do have to deal with many problems. The question is: what do you do then? Crawl back into your comfortable zone or continue and learn from your mistakes. It is easy to fall back on old habits and procedures, but the changing society demands more. If the aim is to boost the independence of the citizens, a different approach is needed. As a civil servant, you are serving the society; so helping citizens to bring their initiative further and to make it successful should be the core business.

‘The municipality is unconsciously competent while they have to be conscious incompetent. They should be conscious that they know so little about what is going on in the society and work from there instead of using a lot of methods, rules and procedures to structure the work. That is safe, but it is not what the society is asking for.’ (respondent A)

This quote shows the side of the initiatives and draws the attention to tailor made work and to being conscious about the environment in order to get closer to the daily lives of citizens. It is an
invitation for the government to look inside the society what is happening, to truly listen and to show and link that internally. Wijzelf Zoetermeer emphasizes that the government should be happy with self-organizing initiatives and appreciate it more. Besides, the initiatives agree that it is important that the municipality adheres to agreements, is open minded and trustful. Yet, it remains difficult to actually take this facilitating role due to old habits and the tendency to stay in control. Nevertheless, the outcomes of the questionnaire show a positive image concerning the role of the government as displayed in figure 11. The majority of the respondents believe that the government is adopting a facilitating role concerning their own self-organizing initiative. In the sense that the municipality is attempting to govern processes by initiating and facilitating interaction processes. Care cooperatives Putte and Kadoze show the most positive answers and agree or strongly agree that the municipality is facilitating, while Gemert and Wijzelf are less positive. These differences will be examined more in depth in the next section.

**Facilitating role government**

![Facilitating role government chart](image)

*Figure 11: Facilitating role government*

### 6.2. Experiences with network management by government

There is a clear division visible between the four care cooperatives regarding the experienced role and attitude of the municipality as became already clear from figure 11. In Putte and Kadoze, the municipalities Woensdrecht and Goes are very involved and have a facilitating or even activating role. They are seen as a partner of the initiative; in Putte they even cooperated in a pilot to arrange things decentral by establishing a village supporter. On the contrary, the municipalities in Gemert and Wijzelf Zoetermeer are less active and less involved in the care cooperatives. There are conversations, but that did not lead to agreements or cooperation. The government is adopting a more wait and see attitude. This cleavage between Putte and Kadoze versus Gemert and Wijzelf will be explained in depth by looking at the network management strategies that the government
performs. Figure 12 below explains to which extent board members and civil servants from the four care cooperatives see the government using four types of network management.

**Network management by government**

![Network management by government graph](image)

**Figure 12: Network management strategies by government within the four care cooperatives**

At first glance, it becomes clear that a mixed image prevails with respondents that primarily disagree and some that agree or strongly agree. Firstly, the most respondents strongly agree with the strategy of connecting, which implies that the municipalities are activating actors or resources and trying to mediate interactions, especially in the case of Putte where all respondents strongly agree.

Secondly, municipalities also try to explore content by clarifying goals and views of actors and finding a consensus. Just like with the connecting strategy, the respondents that strongly agree all come from Putte. By the contrary, the respondents that disagree come from Gemert. This shows how different the role of government is experienced in the various cases.

Thirdly, the respondents less see the strategy of arranging and creating consultation structures as a strategy that the government uses. Again Putte is the most positive, followed by Kadoze, Wijzelf and eventually Gemert, where the respondents disagree.

Finally, the strategy of creating process agreements as in rules for interaction is the least mentioned strategy that the government performs, even in the cases of Putte and Kadoze. Consequently, these results of the closed questionnaire suggest a more connecting and enabling experienced attitude of the municipality instead of an arranging and creating municipality. This is also the desired way of working by the government itself, although not in all examined cases the respondents experience this. So, there is still plenty to improve and the main positive and negative
experiences of the board members will be discussed below followed by the experiences of the civil servants themselves with the new role of the municipality.

6.2.1. Experienced role of the municipality by board members
As previously stated, the board members and initiators of the four care cooperatives perceive the role of the municipality different. Starting with several positive experiences from the cases of Kadoze and Putte. They state that the government adopts at least three of the four network management strategies and see the involvement of the municipality as positive and facilitating:

‘The civil servant and his team are very supportive, enthusiastic and thinking along with us. They said: you decide what happens and we will support you, so let’s just start and we will solve ‘bears on the way” (respondent D+E)

As is apparent from this quote, a key element of the positive experiences with the municipality is the fact that both initiatives have a good relationship with the involved civil servant. They are on the same line, keep each other informed and talk about new developments or their needs. Furthermore, there are always issues and it is important according to the respondents to just start and act while the energy is high and people are enthusiastic. As time passes and nothing can be done, also the energy flows away and that can be fatal for the initiative. Moreover, there is mutual respect and appreciation, as both parties are important stakeholder for each other:

‘The municipality needs us to tackle this and we need the municipality to facilitate and support us. So, we need each other and stay informed about what we do’ (respondent J+K)

Therefore, the attitude of the civil servant and the sense of urgency are important to actually undertake action. In addition, the acquiring of financial support is vital for the initiative to start and to be able to develop, as turned out in the cases of Gemert, Kadoze and Putte. Nevertheless, the last two care cooperatives perceived the relation and collaboration with other parties as more difficult, because some organizations are distrustful and view the care cooperative as competition. However, the municipality remains supportive and the involvement gives a positive statement towards other parties that the initiative can be trusted.

In the two other care cooperatives of Gemert and Zoetermeer, the role of the municipality is perceived differently. They feel that the municipality did not actively uses network management strategies. Yet, the municipalities are not negative towards the initiative, but they do not support or facilitate it directly. They adopt a more wait and see attitude and the feeling arises that the municipality is hearing but not actually listening. Thus, the municipality is not actively using network management strategies, but it leaves the initiative ‘where it belongs’, from and by the citizens. The
respondents get the impression that the municipality is not really opening up and still thinking from a mistrustful perspective.

‘The municipality is afraid to lose control; they want to decide and think more from a distrustful perspective. They should be more sincere and truly listen to the citizens based on trust’ (respondent G)

Hence, care cooperative Gemert got a start subsidy and there are also conversations, which tighten the distance between them. However, it needs time and step-by-step the cautious and prudent attitude is improving. In contrast to Gemert, Wijzelf did not get a start subsidy and the initiative has to show their maternity and continuity. Perhaps due to a lack of trust in the concept from the side of the municipality and not knowing how to deal with this initiative that is clearly different from others. Yet, there are several conversations between the care cooperative and the municipality Zoetermeer regarding cooperation and the intentions are there. They try to understand each other, but no concrete agreements are made due to the cautious attitude of the municipality.

6.2.2. Experienced role of the municipality by government officials
The government officials also display a diverse image of how they perceive their role as a municipality towards self-organizing initiatives. The civil servants of the two closely involved municipalities in the cases of Putte and Kadoze see their role as facilitating. The plan to start with the care cooperative came from the two initiatives themselves and the municipality mainly facilitated the process and supported financially. They see it as important in their position to support and to cheer or applaud the initiative by listening and being open to questions. Besides, talking and knowing about what is going on is very important, like what do the initiators want and need. At one moment a more active attitude is required to bring the initiative further and to stimulate the development and the next moment it goes naturally and only an advising role is needed.

‘Sometimes I have to act more business-like and other times more as an advisor by letting them go their own way and giving space to develop things and see what comes out of it. Also giving confidence that it is not bad if something goes wrong or does not work out’ (respondent F)

Hence, the involved civil servants in Putte determine per issue and per discussion which role they take depending on what is necessary to let the initiative grow. Furthermore, they emphasize the fact that cooperation from the side of the municipality helps to convince other parties to collaborate and for citizens to join. This is a more symbolic role in which the initiative can be stimulated only by the effect that the cooperation with the municipality has.

The government officials of Gemert and Zoetermeer are more emphasizing that the care cooperatives as self-organizing initiatives from and by the citizens themselves should stay there and
not become a ‘government story’. That is why, they remain more at a distance, but they try to facilitate and think about how they can help the initiative. In the case of Gemert, a start subsidy is given and there are conversations with the municipality, but there are also some tensions. For example, the fact that two former politicians are closely involved inside the care cooperative is not helpful in the relationship with the municipality. The case of Wijzelf Zoetermeer shows another story, the municipality is also at a distance, but that is more because the need and urgency to support the care cooperative is less big.

‘We are not opposed to this initiative, but we see it mainly as a citizen-led initiative and want to leave it there. It is about own strength of citizens and if they want to do it themselves, than we believe that is positive, but they have to do it themselves’ (respondent C)

There are more facilities and initiatives in the bigger village of Zoetermeer. Hence, the necessity for the municipality to get involved and to stimulate the initiative is less than in for instance the little villages of Putte and Kadoze where there are already not many facilities left.

6.3. Conclusion
Given these points, the desired role of the municipality towards care cooperatives is clear: facilitating, connecting, more searching for cooperation and being conscious about the environment in order to get closer to the daily lives of citizens. In addition, six out of nine respondents believe that the government is adopting a facilitating role regarding their own care cooperative. The respondents in general experience a municipality that tries to connect and explore content. They experience less the strategies of arranging and creating process agreements, which implies that self-organizing initiatives need a municipality that is connecting and enabling and less arranging and creating.

However, that is not so easy in practice and as has been mentioned, there is a difference between the four cases concerning the role and attitude of the municipality. The respondents from Kadoze and Putte are very positive, because the municipality is actively applying at least three network management strategies and there is a good relationship between the initiators and the involved civil servants. By the contrary, the cases of Gemert and Wijzelf demonstrate that the municipality is not actively applying network management strategies and leaves the initiative ‘where it belongs’ according to them: by and from the citizens. This gives the initiatives the idea that the municipality wants to stay at distance, is cautious and more distrustful. As a result, the initiatives can be ranked on how actively involved the municipalities are with first Putte, closely followed by Kadoze and behind are Wijzelf Zoetermeer and Gemert.

Consequently, it is interesting to look at why the attitude and role of the municipality are experienced different. Kadoze and Putte are two little villages where the sense of urgency to set up a
care cooperative is high with the decreasing facilities. As a result, the village and the municipality are both benefitted from it. This argument is less valid in the two bigger villages of Gemert and Zoetermeer. In the latter, there are still facilities and the need for the municipality to support the initiative is less while in the former the tensions between the care cooperative and the municipality can be seen as the cause. Thus, both municipalities are adopting a wait and see attitude. Hence, this argument explains why the government is more involved in one initiative and not in the other. Besides, it also depends on the attitude of the civil servants involved, because the positive cases experienced resistance from other parts of the municipality and an ‘ambassador’ as civil servant is very important to push the right buttons at the municipality side. Additionally, the close involvement of the municipality has several advantages; the care cooperatives can use the network of the municipality, professional organizations are more inclined to cooperate when they know that the municipality is involved and finally financial support helps to establish the initiative.

In sum, the network management strategies that the government uses and the relating attitude and role can be seen as important contribution to the success of the care cooperative. Mainly because of the financial and symbolic support, a facilitating government can boost the initiative in a symbolic way to attract other organizations by giving positive references. Moreover, a supportive or facilitating role of the municipality increases the chance of success and the level of trust as can be seen in the cases of Putte and Kadoze. However, the use of network management strategies by the government is not determining the final success of the initiative. All four care cooperatives are considered as successful whereas the municipalities adopt various roles and attitudes. The active boundary spanners, the level of trust within the initiative, the informal network and cooperation with other parties are also important to get support to be able to build the initiative and to make it successful.
7. Conclusion, discussion and recommendations
This chapter answers the central research question on the basis of the empirical findings before acknowledging the limitations and discussing the implications of the research. Subsequently, presenting recommendations for future research and for care cooperatives and civil servants.

7.1. Central research question
This research was set out to explore the concept of self-organizing initiatives and specifically care cooperatives in the social domain and has identified several factors that contribute to the success of the initiatives. Besides, the research has also sought to find out which role the government takes regarding self-organizing initiatives and how their attitude influences the success. The theoretical literature on this subject proves to be scarce and based on the multiple case studies of four care cooperatives an answer can be given to the central research question:

*Which factors are of influence on the success of care cooperatives as a form of self-organizing initiatives in the social policy domain in the Netherlands?*

In order to give an answer to this research question, it is relevant to reflect first on what is seen as successful before presenting the main conclusions about the degree to which the four factors derived from theory are determining the success of the analyzed care cooperatives.

According to the empirical research, the success of care cooperatives is mainly seen as the improvement of social cohesion, since more social contacts between local residents are realized and the initiatives are still growing in number of members. Furthermore, the care cooperatives are seen as a satisfying innovate enrichment, because different societal functions are connected and it is seen as an effective and durable solution. Additionally, care cooperatives as a form of self-organizing initiatives are viewed by the respondents and in the literature as a promising concept for dealing with the changes and developments in the social policy domain.

As a result, the initiatives can be cautiously ranked regarding the degree to which they display the indicators of success (appendix C). The most successful care cooperative is Putte, closely followed by Wijzelf, Gemert and eventually Kadoze, which still demonstrates a positive image, but strongly agrees the least with the statements of the closed questionnaire. Yet, the differences are small and all see their initiative as successful. The index below in table 7 shows the ranking of the four care cooperatives concerning the extent to which the four success factors are visible within the initiative, which is used to derive conclusions about the importance of each factor deduced from theory.
The empirical results showed that care cooperative Putte is the most successful initiative regarding the usage of the four factors. This care cooperative is characterized by a strong trigger, a clear and shared focus, considerable usage of informal networks, resulting in the most complete application of focus in informal networks. As well as, the highest ranking in boundary spanning with an enthusiastic experienced boundary spanner which has a ‘do’ mentality and is able to switch between roles, and network management of the government with a very active municipality as a partner in a pilot. Conversely, they show the lowest level of trust between board members, because they are considered to use the contributions of others to their own advantage. Yet, the general level of trust is still high, because there are minor differences between the cases.

The care cooperatives Kadoze Kattendijke, Gemert and Wijzelf Zoetermeer are closely following Putte and are all seen as successful initiatives with different specific characteristics. The active municipality is important in the case of Kadoze, where engaged boundary spanners managed to create public support by conducting a survey in the little village and listen carefully to the local residents. Care cooperative Gemert is primarily successful due to the experienced and known boundary spanners, which have big networks and able to create a high level of trust among them and towards the environment. Additionally, Wijzelf care cooperative Zoetermeer owns its success to the innovative and entrepreneurial capacity of the initiators, which started with the social innovation concept of an online platform that is transferable and can be used in the whole Netherlands.

The main findings of each care cooperative indicate that the factors focus in informal networks, boundary spanning and trust are all crucial factors that contribute to the final success of self-organizing initiatives. There are no significant differences between the cases on these subjects in contrast to the factor network management by government. A clear division is visible between Kadoze and Putte, which experience an active, facilitating municipality and Gemert and Wijzelf with a municipality that is open for conversations, but adopts a wait and see attitude. Moreover, the respondents of the most successful care cooperatives Putte and Kadoze argue that the scale of the initiative and the public support they gained by conducting a survey in the village are also success
factors. Hence, answering the main research question by concluding that focus in informal networks, boundary spanning and trust are of influence on the success of care cooperatives as a form of self-organizing initiatives. Accompanied by the scale and the public support that an initiative gets and network management by the government that can also contribute to the success, but is not considered as determining.

7.2. Discussion
The main conclusions above indicate that focus in informal networks, boundary spanning and trust are vital factors for the success of care cooperatives as self-organizing initiatives. Network management by government can also contribute to the success, but is not seen as a determining factor. Furthermore, the scale and the public support are also important factors according to the respondents of the four care cooperatives although not derived from theory. This section discusses the implications of the main findings and comments on the formed expectations in chapter two.

The first expectation entails ‘a strong focus in informal networks enhances trust within the self-organizing initiative and positively influences the success of the initiative’, which can be confirmed. Especially strong informal networks and a shared goal can increase trust, since they strengthen the connections within the board and towards the environment. Furthermore, this has a positive influence on the success of the initiative according to the respondents, because when local residents are involved and asked to think along; a shared goal can be created more easily and the right people can be gathered. In addition, all initiatives show a significant high degree of focus in informal networks and the four care cooperatives are all seen as successful.

The second expectation, which suggest that more boundary spanning activities will increase trust between actors, which leads to a more successful self-organizing initiative can also be met. The four care cooperatives are all considered to be successful and they demonstrate a high degree of boundary spanning activities. Moreover, a boundary spanner is seen as one of the crucial factors for the success of care cooperatives as respondents mentioned in the interviews. More boundary spanning activities, especially building sustainable relationships can increase trust between actors and is seen as in line with network management strategies, such as connecting. Both factors imply an exploring, aligning and connecting attitude of actors, which results in joint fact finding and coming up with shared solutions as is considered as the meaning of success of self-organizing initiatives.

Expectation three: ‘trust within the self-organizing initiative has a determining impact on the successful outcomes and is influenced by focus in informal networks, boundary spanning and network management by government’ cannot be fully confirmed. Trust is a vital factor for the success of care cooperatives, although the most successful initiative Putte shows the lowest level of trust between board members. However, the differences between the cases are small and all display
a high level of trust among board members and try to be seen as trustworthy by the environment. Furthermore, trust is positively influenced by strong informal networks, shared goals and increasing boundary spanning activities. Yet, trust as an intention or rather as a sensation about the intentions of other board members is not influenced by network management by government. There is no connection found between a facilitating government and more trust between board members.

The last expectation implies if government employs more network management strategies towards the self-organizing initiative, the initiative will be more successful in terms of content outcomes. This expectation can be met by looking at the outcomes of the closed questionnaire regarding content outcomes (figure 2). The cases of Putte and Kadoze where the government is connecting and enabling show higher scores on content outcomes than Wijzelf and Gemert. The trigger and reasons to start with the initiative might explain why the government is more involved in the cases of Putte and Kadoze, because they are both dealing with decreasing facilities in their village and the municipality that encouraged local residents to think about their future. On the contrary, Gemert and Wijzelf refer to personal experiences with the health care system as main reason to establish the care cooperative. Their municipalities have no stake in that, because there are other possibilities for people to arrange their care and assistance. While the municipalities of Putte and Kadoze benefit from a care cooperative that meets the demands of the local residents.

Additionally, there are two factors that also contribute to the success of the self-organizing initiative according to the empirical research, where the final success is is mainly seen as an improvement of the social cohesion with new connections made and the increasing amount of local residents, which join and support the initiative. Firstly, the scale of the initiative is seen as important, because a small and locally organized initiative in a village can build up connections easily as well as create a shared goal and a sense of urgency. People are dependent on each other in smaller villages and less in bigger cities with more facilities and possibilities for people to get care and assistance. Secondly, public support is vital for a care cooperative to work, because without local residents that support and become a member of the initiative, it is destined to fail. Hence, public support can be gained more easily a place where there is a strong community feeling, where people trust and know each other. A shared feeling that something needs to be done and that the care cooperative is the solution is indispensable. However, a boundary spanner is needed to really undertake action, to gather the right people to build the care cooperative, while in some places there are problems and people try to find solutions, but no one is taking action.

Therefore, the theoretical findings about which factors influence the final success of care cooperatives are confirmed by empirical research. Yet, it becomes clear that there might be many factors that can influence the final success; respondents see the scale and public support also as important factors. However, the mentioned factors above are seen as the most important for care
cooperatives to find the road to success. Eventually, this research contributes to establishing an image of the development of care cooperatives and mainly their success.

7.3. Research limitations
This research has encountered several limitations and it is relevant to reflect and to take them into consideration for further research. Firstly, regarding the research design a limitation can be found in the choice to focus on the success and the factors that influence the success of self-organizing initiatives, because that is not an easy or straightforward task. Every person interprets success differently and generalization of the concept proves to be difficult.

The second limitation deals with the data collection process, since this research is unable to encompass all relevant actors involved in the care cooperative. The focus is on civil servants and board members or initiators within the initiatives even though care recipients and volunteers are also very important to give a complete image of the success of care cooperatives. However, due to a lack of time, this was not feasible. Therefore, it is difficult to review for instance the trust within the whole network, because this research only included the board members of the initiatives and the civil servants involved. The same holds for the multiple case study of the four care cooperatives, which provides a snapshot of their success and cannot explain the development over a longer period of time. Additionally, the closed questionnaire conducted among nine out of twelve respondents of the four care cooperatives implies a small scope and results in a narrow view on the success factors.

Furthermore, it proves difficult to find care cooperatives that want to participate. Four care cooperatives joined of which three were just established more than a year ago, which implies that it is hard to conclude if they are really successful and what is necessary for success. Yet, in this manner the development of the initiatives could be examined more in depth.

7.4. Further research
The aim of this research was to add to existing theory on which factors influence the success of care cooperatives as a form of self-organizing initiatives by conducting a multiple case study of four care cooperatives. During this research various ideas for new research have come up and the main ones are enunciated below.

A logical recommendation for further research is to follow the development of these four care cooperatives for a longer period in order to see whether they remain successful and which factors are determining. In this way, it becomes clear which obstacles and steps they have to take and why certain factors appear to work better in one place and not in another. In addition, the growth and continuity can be measured and compared to examine which care cooperative with certain characteristics and factors is seen as more successful.

Another recommendation is to study how different actors perceive the initiative and what
kind of consequences the establishment has for the community, on for example care recipients, volunteers and other care or support organizations. A network or environment analysis can be a suitable way to research how the network around the care cooperative is built and what is vital for an initiative to work.

Lastly, it is advisable to focus on what this trend of establishing more and more care cooperatives means for the local community and the social policy domain. Is the landscape for instance getting too fragmented with the rise of care cooperatives all over the Netherlands that each have their own characteristics and has this rise downsides? Moreover, how determining is the factor scale and should every village with decreasing facilities start a care cooperative? These research questions are indications for further research building upon this research.

7.5. Recommendations
This last chapter will conclude the research by providing several recommendations for (starting) care cooperatives first and second for civil servants regarding success factors of self-organizing initiatives.

First of all, it is very important for local residents, which have the idea of starting a care cooperative to look inside the local community, what are the main problems and what is needed to solve them? Conducting a survey or hosting several information meetings for the local village can help to get a clear image of the problems and solutions. Furthermore, use the networks available, involve organizations or services that are already there and review if an improvement of those organizations is sufficient or if there is a need to establish a care cooperative. When it turns out that a care cooperative is needed, then there is more public support and a sense of urgency for starting the care cooperative. Searching for cooperation is also recommended in order to get public support.

Secondly, a committed and experienced boundary spanner is vital in the establishment and development of the self-organizing initiative. This person or these persons are seen as the face of the care cooperative and without an engaged boundary spanner that ‘pulls the wagon’ the initiative cannot exist. Hence, novice care cooperatives need a motivated and driven boundary spanner, which has a ‘do’ mentality and is able to build sustainable relationships leading to an increase of trust.

Finally, the municipality or more specifically the civil servants involved in the development of the care cooperative should adopt a stimulating and facilitating attitude towards the self-organizing initiative. However, the initiative has to stay from and by the citizens of the village and it is important for civil servants to find a balance between helping, being open to questions, giving support and not taking over the initiative or being too cautious. Eventually, a facilitating municipality that is connecting and can contribute to the progress of the care cooperative will make the road to success for self-organizing initiatives easier.
References


DOI: 10.1111/j.1467-9299.2010.01826.x


## Appendix A: list of interviewed persons

<table>
<thead>
<tr>
<th>Name</th>
<th>Function</th>
<th>Code</th>
<th>Date</th>
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<td><strong>Kees van der Riet</strong></td>
<td>Board member Wijzelf care cooperative Zoetermeer</td>
<td>Respondent A</td>
<td>15-04-2016</td>
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<tr>
<td><strong>Maurice Smit</strong></td>
<td>Initiator Wijzelf care cooperative Zoetermeer</td>
<td>Respondent B</td>
<td>20-04-2016</td>
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<tr>
<td><strong>Lieke Schouwenaars</strong></td>
<td>Civil servant municipality Zoetermeer</td>
<td>Respondent C</td>
<td>18-05-2016</td>
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<td><strong>Erik de Laet</strong></td>
<td>Board member care cooperative Putte</td>
<td>Respondent D</td>
<td>22-04-2016</td>
</tr>
<tr>
<td><strong>Peter Nuijten</strong></td>
<td>Board member care cooperative Putte</td>
<td>Respondent E</td>
<td>11-05-2016</td>
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<td><strong>Bram Boluijt</strong></td>
<td>Civil servant municipality Woensdrecht</td>
<td>Respondent F</td>
<td>11-05-2016</td>
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<tr>
<td><strong>Jan Wagemakers</strong></td>
<td>Initiator and chairman care cooperative Gemert</td>
<td>Respondent G</td>
<td>21-04-2016</td>
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<tr>
<td><strong>Yvonne Heynen</strong></td>
<td>Initiator and board member care cooperative Gemert</td>
<td>Respondent H</td>
<td>28-04-2016</td>
</tr>
<tr>
<td><strong>Jan Bevers</strong></td>
<td>Alderman municipality Gemert-Bakel</td>
<td>Respondent I</td>
<td>03-05-2016</td>
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<tr>
<td><strong>Margreet Visser</strong></td>
<td>Initiator and board member care cooperative Kadoze</td>
<td>Respondent J</td>
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<tr>
<td><strong>Hellen Slager</strong></td>
<td>Board member care cooperative Kadoze</td>
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<tr>
<td><strong>Pieter Paardekooper</strong></td>
<td>Civil servant municipality Goes</td>
<td>Respondent L</td>
<td>29-04-2016</td>
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</table>
Appendix B: interview guide and topic list

**Introduction:** introduce myself, goal of this research and ask for cooperation (recording)

**Focus in informal networks**
- Is there a trigger?
- Is there a focus; a clear and shared goal?
- Are informal networks used?
- Is there public support?

**Success initiative**
- Meaning concept of success?
- Degree of success of the initiative?
- What are essential factors (do they say some from theory)?

**Boundary spanning**
- Is there a boundary spanner?
- Which characteristics does that person have?
- What if they are gone? How still succeed?

**Trust**
- Is it there? What does trust mean within the initiative?
- How is trust experienced in initiative?

**Network management by government**
- Role of government in initiative; means-based?
- How is relationship between initiative-municipality?
- What role should the government take according to the initiative?

**Interesting for the recommendations / degree of success**
- What is your image of the future?
- Which lessons did you learn?

**Conclusion:** Are there questions or remarks? Issues not addressed? Stay anonymous and copy of the research? Explain what happens with the data from the interview and thank for cooperation.
Appendix C: closed questionnaire

*For each statement, please fill in if you strongly disagree, disagree, neither agree nor disagree, agree or strongly agree?*

**Topic: Success of the self-organizing initiative (content outcomes):  Do you think that ...**

<table>
<thead>
<tr>
<th>Statements:</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
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<tbody>
<tr>
<td>Innovative ideas are developed in the initiative?</td>
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<td>Different societal functions have been connected sufficiently?</td>
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<td>In general the involved actors have delivered a recognizable contribution to the development of the results?</td>
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<td>The solutions that have been developed really deal with the problem at hand?</td>
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<td>Do you think that the developed solutions are durable solutions for the future?</td>
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<tr>
<td>The benefits exceed the costs of the cooperation process in general?</td>
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**Topic: Trust  Do you think that the actors in this initiative ...**

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<tr>
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<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
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<tbody>
<tr>
<td>Generally live up to the agreements made with each other?</td>
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<td>Give one another the benefit of the doubt?</td>
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<td>Keep in mind the intentions of other actors?</td>
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<tr>
<td>Do not use the contributions of other actors for their own advantage?</td>
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<tr>
<td>Can assume that the intentions of the other actors are good in principle?</td>
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</table>

**Topic: Network management by government  Do you think that the government ...**

<table>
<thead>
<tr>
<th>Statements:</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
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</tr>
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<tr>
<td>Activates actors or resources and mediates interactions?</td>
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<tr>
<td>Explores content by clarifying goals and views of actors and searches for goal congruency?</td>
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<td></td>
</tr>
<tr>
<td>Creates structures of consultation and deliberation?</td>
<td></td>
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<tr>
<td>Creates rules for interaction between actors (entrance or exit, conflict regulation, veto possibilities)?</td>
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</tr>
</tbody>
</table>
**Topic: Boundary spanning**

_Do you think that there is a boundary spanner active which …_

<table>
<thead>
<tr>
<th>Statements:</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is able to build sustainable and trustworthy relationships?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Selects relevant information or signals on both sides of the boundaries (initiative /government)?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Translates the information across boundaries?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Mobilizes the home organization to consolidate network activities and decisions?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Aligns between intra-organizational processes/ developments and those in the environment/ network?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Innovates?</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>