

DEFEN-CE:

Social Dialogue in Defence of Vulnerable Groups in Post-COVID-19 Labour Markets

Report on Finland and Sweden

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Introduction

This is a comparative country report on Finland and Sweden for the DEFEN-CE project: Social Dialogue in Defence of Vulnerable Groups in Post-COVID-19 Labour Markets. DEFEN-CE is a research project funded by the Directorate-General for Employment, the European Commission (Grant number: VS/2021/0196). The project investigates the experiences of various stakeholders in the design and implementation of Covid-19-related policies relevant to work and employment in EU member states (Finland, Sweden, the Netherlands, Germany, Latvia, Lithuania, Czechia, Slovakia, Italy and Spain) and two candidate countries, Serbia and Turkey. The aim of the project is to identify the role of social dialogue in facilitating policy implementation that addresses the labour market situation of vulnerable groups in the post-Covid-19 labour markets. Based on this aim, the report seeks to answer three main research questions from a comparative perspective, emphasising similarities and differences in Finland's and Sweden's pandemic response, industrial relations (with a focus on social dialogue structures and interactions), policy design, and protection of vulnerable groups.

- 1. What public policy and social dialogue measures targeting the selected vulnerable groups were implemented for employment and social protection during the Covid-19 pandemic in 2020–2022?
- 2. To what extent and how did social dialogue play a role in the implementation of the social and employment rights of selected vulnerable groups in the Covid-19 pandemic between 2020 and 2022?
- 3. What lessons and opportunities does the Covid-19 pandemic yield for strengthening social dialogue in the studied countries?

The report combines analysis and findings based on the construction of country-specific Defence Databases (one for Finland and one for Sweden) and qualitative interviews with national stakeholders. The respective database gathers information on more than 30 country-specific Covid-19 policies that have been gathered from international databases (e.g., Eurofound, Eurostat, and OECD/AIAS ICTWSS), national and international policy documents

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¹ The Swedish research that contributed to this report was approved by the Swedish Ethical Review Authority, approval number: 2022-07123-01. The DEFEN-CE project has also been reviewed by the University of Helsinki Ethical Review Board (statement 2022/50), who found that the planned study follows the ethical principles of research in the humanities and social and behavioural sciences issued by the Finnish Advisory Board on Research Integrity.

and legislation, reports from trade unions and employers' organisations, and academic literature. The policies are systematised with information on who adopted the policy (e.g., executive branch, parliament, central bank), policy form (e.g., legislation and statutory regulations, recommendations, social partner agreements), policy area (e.g., labour market, health and safety, and social security), time period, targeted vulnerable groups (based on employment status, social risks, and health safety), and social partners' involvement.

The interviews that complement the general information provided by the databases were conducted with representatives from trade unions and union federations, employers' organisations and central organisations, government agencies and ministries, civil society organisations, and academic experts on industrial relations (see list of respondents in Tables 3 and 4 in Appendices). In total, 11 interviews were conducted in Finland with 9 stakeholders, and 12 interviews in Sweden with 10 different stakeholders. The interview data was analysed based on qualitative content analysis (Elo & Kyngäs, 2008; Mayring, 2004) in accordance with a DEFEN-CE coding scheme, using ATLAS.ti (Finland) and Taguette (Sweden).

The report is structured as follows. The next section provides contextual information on Finland's and Sweden's labour market and industrial relations to provide a general overview of the prerequisites before the Covid-19 pandemic. The section thereafter describes the impact of Covid-19 and what it implied for the protection of vulnerable groups in the labour market in particular. The third section, which is also the main section of the report, provides findings drawn from the interviews with stakeholders, highlighting policy discussions, the protection of vulnerable groups, social partners' interactions, and insights into the pandemic. The final section concludes with the comparative findings on the Finnish and Swedish cases.

The comparison between the Swedish and Finnish cases reveals notable similarities and few surprises. With the exception of the heavily impacted health care sector, the established social dialogue structures were seen to enable rapid and smooth policymaking during the exceptional Covid-19 crisis. The many policy measures and recommendations that were implemented created challenges related to access and understanding of governmental information. Yet, little competition was seen to hamper the social dialogue and the social partners were generally satisfied with the agreements made and the governmental response to the pandemic.

1. Contextual information

Finland and Sweden are recognised as members of the Nordic Model, which is characterised by a wide range of social welfare rights, benefits, and services, funded primarily through progressive income and consumption taxes, significant investment and public spending on human capital development, including childcare, higher education and research, active labour market policies, and influential labour unions and employers' organisations that have played a key role in shaping the labour market (Van Gerven 2022; Andersen et al., 2007; Palme, 2005). This model has typically resulted in high economic and social performance, as evidenced by comparative rankings. Both nations have large public sectors while simultaneously embracing competitive markets and openness, and were ranked in the top 10 (Sweden) and top 20 (Finland) in the World Bank's (2019) ease of doing business index.

The combination of a highly educated workforce and a dynamic, innovative economy has enabled the two countries to achieve a crucial aspect of the Nordic Model – the successful fusion of high employment (see Table 1, Appendices) and productivity levels, along with stable GDP per capita growth, while maintaining and improving social equality. This is reflected in their respective ranking in the European Institute for Gender Equality's (2022) gender equality index, where they are ranked in first and second place.

As for industrial relations, Finland and Sweden have achieved remarkable rates of membership in labour unions and employers' organisations, which exert substantial influence in labour market decisions, exceeding the global average. This has resulted in the establishment of comprehensive norms for collective bargaining and high coverage of collective agreements in both countries (see Table 2, Appendices).

In Sweden, the central role of social partners is partly due to the government's management of industrial relations, both currently and historically. While social dialogue typically involves tripartite negotiations among labour unions, employers' organisations, and the government, the Swedish system is self-regulated between the social partners, with the state playing a mediating role only. In contrast, Finland adopted tripartite income policy agreements in 2011, 2013, and 2016 (Kjellberg, 2021, 2023a). Sectoral-level negotiations dominate the Swedish social dialogue, with most collective agreements being agreed upon at this level. Meanwhile, national-level negotiations between central organisations are focused on broader political

decisions related to social insurance, occupational pensions, and transitions. The same central organisations are also involved in government consultation on urgent political issues such as the Covid-19 pandemic (cf. Anxo, 2021).

In Finland, the current model of collective bargaining largely resembles that of Sweden and is characterised by its stability. In 2016, the signing of the "Competitiveness Pact" (*Kilpailukykysopimus*) marked a shift in Finland's system of industrial relations towards "centralised decentralisation". Under this new model of collective bargaining, national-level bargaining has been replaced by sectoral-level bargaining, with the export-oriented manufacturing sector assuming a leading role in determining wage increases to be followed by other sectors (Jonker-Hoffrén, 2019). This approach was directly inspired by the Swedish model of industry-led pattern bargaining established in 1997 in the Industry Agreement (*Industriavtalet*). The signing of the Competitiveness Pact occurred during a time of economic turmoil, brought about by the triple effect of the euro crisis, Russian sanctions, and the collapse of Nokia. The agreement was signed with the aim of increasing the flexibility of collective bargaining and enhancing the competitiveness of Finnish companies (Jonker-Hoffrén, 2019).

Union density has declined in Sweden in recent decades, but is still among the highest in the world. Simultaneously, the organisational rate of Swedish employers' organisations has remained stable, resulting in a slow-growing but noticeable power difference, especially in the private sector, where 64% of workers are unionised compared with 83% of all employees working for an employer associated with an employers' organisation (Kjellberg, 2019). Collective agreements are broadly implemented but some gaps exist, for instance in low-skilled occupations in the beauty industry as well as the gig and platform industry, but also for high-skilled occupations in the tech industry, such as developers working with games, payment solutions, and streaming services (Mediation Office, 2022).

Trade union industrial relations have been dominated by the Swedish Trade Union Confederation (LO) since it was founded in 1898. LO and the Swedish Employers' Association (SAF) established the self-regulating practices still in use with the *Saltsjöbaden Agreement* of 1928. In recent decades, LO has lost its cross-sectoral dominance due to a shift from blue-collar to white-collar unionised workers, and the two largest blue-collar confederations, the Confederation of Professional Employees (TCO) and the Swedish Confederation of Professional Associations (SACO), now play a more significant role in industrial relations alongside LO. The Swedish Employers' Association became the Confederation of Swedish

Enterprise (*Svenskt Näringsliv*) in 2001 and is now, along with the Swedish Association of Local Authorities and Regions (SALAR), the main employer representative.

In Finland, there has been a shift in the composition of trade union membership from male blue-collar to female white-collar workers. In addition, similarly as in Sweden, the overall union density has been in decline since the 1990s. At its peak in the 1990s, about 80% of the Finnish labour force was unionised, but by 2019, the union membership rate had fallen to 58.8% (Bergholm, 2022; OECD/AIAS ICTWSS). Nevertheless, compared to other European countries, and similar to Sweden, the Finnish trade union movement has remained relatively strong, despite the gradual decline over the past 25 years (Bergholm & Sippola, 2021). The reduction in membership is associated with various factors including concession bargaining, reduced flexibility in wage increases, and the employer associations' aggressive stance towards decentralising collective bargaining and undermining the Ghent system. Additionally, the private sector has undergone structural transformations due to global pressures, leading to more assertive anti-union campaigns by employers. Consequently, this has led to a gradual decline in male blue-collar unionism and an increase in female white-collar unionism (Bergholm & Sippola, 2021).

Industrial relations in Finland are covered by three main confederations, the Central Organisation for Finnish Trade Unions (SAK), the Finnish Confederation of Professionals (STTK), and the Confederation of Unions for Professional and Managerial Staff in Finland (AKAVA), with varying levels of representation among industrial and professional workers (Jonker-Hoffrén, 2019). Union density varies by sector, with high density rates in industry and the public sector, and a lower rate in private services. The organisational field in Finland is predominantly under the control of the confederations, with independent unions outside these confederations representing a minor fraction of the total membership. Consequently, their influence in shaping collective bargaining outcomes is relatively limited (Jonker-Hoffrén, 2019).

The Confederation of Finnish Industries (EK, *Elinkeinoelämän keskusliitto*), the Local Government Employers (KT, *Kunnan työnantajat*), the Church Employers (KiT, *Kirkon työmarkkinalaitos*), and the Office for the Government as Employer (VTML, *Valtion työmarkkinalaitos*) are the main employers' organisations at the cross-sectoral level in Finland. However, the lobbying organisation, the Federation of Finnish Enterprises (SY, *Suomen Yrittäjät*), does not participate in collective bargaining. EK, which currently comprises 27

private sector member federations representing approximately 16,000 firms with almost one million employees, has historically been the key actor (Jonker-Hoffrén, 2019).

2. Covid-19 and its impact on vulnerable groups

The following section introduces the impact of the Covid-19 pandemic in Sweden and Finland, with emphasis on the labour market and industrial relations, and discusses how the two countries responded to the challenges they faced. The two final subsections address vulnerability during the pandemic and power relations between the social partners in the implementation of Covid-19-related policies.

2.1 Impact of the pandemic on the work and labour market

The economic impact of the pandemic was moderate in the Nordic countries compared to the EU average (Flam and Nordström Skans, 2022). Specifically, GDP, unemployment, and hours worked were affected less severely or similarly to the EU average. Both Finland and Sweden observed a minor decline in their GDP in 2020, but they were able to recover to their prepandemic levels by the second quarter of 2021. This has been attributed to the high level of digitalisation and the familiarity with remote work in the Nordic countries, which facilitated the transition towards remote work during the pandemic (Flam and Nordström Skans, 2022).

At the beginning of May 2020, Sweden had the world's highest Covid-19 deaths per capita. By the end of summer 2022, close to 6,000 Swedish citizens were reported to have died from Covid-19, far more than in the rest of the Nordics (Juul et al., 2021; Ludvigsson, 2020). In comparison to the explosive first wave in Sweden, with an excess mortality of 38.2% in April, 23.9% in May, and 10.7% in June, Finland had much lower figures at 8.1%, 5.6%, and 5.7%. However, after the second Swedish wave of Covid-19 cases (winter 2020–2021), Swedish excess death rates stabilised at a lower level than those in Finland, and at the end of the pandemic, the average excess death rate per month (from April 2020 to December 2022) was 9.92% in Finland and 4.86% in Sweden (Eurostat, 2023).

During the Covid-19 pandemic, similar to the financial crisis in 2008, the downward trend in Swedish union membership was temporarily interrupted. In 2020 alone, 75,100 new memberships were signed, a considerable increase compared to the 8,700 new members the

year before. Union unemployment funds saw an even more significant increase in members, in several cases three times as many new members as their corresponding unions (Kjellberg, 2022). Covid-19 also had a positive effect on the organisational membership rate of Swedish employers as the short-time work policy that was implemented during the pandemic required employers to have an employer-employee agreement on short-time schemes (in order to utilise the government transfers). The most efficient way to create such an agreement was through collective agreements provided by employers' organisations, and hence membership increased accordingly (Kjellberg 2022). In comparison to Sweden, Finland did not see a rise in trade union membership; in fact, the downward trend in the membership rate increased. There was one exception to this trend in that public service employees' membership grew during Covid-19. The overall membership rate of unemployment funds rose during the pandemic, although part of the growth was directed to an unemployment fund which is not affiliated with any trade union. (Ahtiainen 2023.)

The reversal of the trend of declining membership during the Covid-19 crisis demonstrates that Swedish trade unions and employers' organisations play a central role in the labour market in times of crisis and insecurity. This is not surprising given the strong position of unions and employers' organisations, which provide both beneficial services in times of unemployment and have a considerable influence on labour market issues. Correspondingly, a majority of the stakeholders that were interviewed in Sweden underlined that the pandemic had highlighted the relevance of the Swedish model, arguing that both the government and the partners themselves rediscovered the capability of the system.

2.2 Covid-19 measures and social policy response

When comparing the Swedish and Finnish response to the pandemic, two aspects are evident. On the one hand, the two countries' strategies in mitigating the spread of the virus differed significantly, with Finland implementing stringent mitigation strategies to protect the elderly and prevent the healthcare system from being overwhelmed, and Sweden relying on its citizens to take individual responsibility by maintaining social distance, working from home, washing their hands, and limiting travel (Irfan et al., 2022). On the other hand, in terms of economic, labour market, and social policies implemented, the strategies of the Nordic neighbours were very similar.

As for health and safety recommendations and restrictions, one major difference was the state of emergency, which both countries declared in early 2020, but applied quite differently. In the context of Sweden, the authorities faced significant limitations in their options during the state of emergency due to a lack of legal authority (Irfan et al., 2022). The Communicable Diseases Act (2004:168) states that measures should be taken in relation to the responsibility taken by the Swedish public themselves, and the country's fundamental law posed obstacles to implementing more stringent measures. After struggling with the opposition, Sweden's then Social Democratic government was able to successfully implement the Temporary Pandemic Law (2021:4) in 2021, which provided the government with increased authority to impose more stringent measures in response to the pandemic (Jonung, 2020).

In contrast, Finland implemented a "Three-Phase Hybrid Plan", which encompassed measures such as internal and external border controls, including quarantine for Finnish residents returning from abroad and the lockdown of the Uusimaa region from the rest of the country between 28 March 2020 and 15 April 2020 (Irfan et al., 2022; Safety Investigation Authority of Finland, 2021). An online application was used for contact tracing, and mobility was restricted, with a ban on gatherings of more than ten people. Restaurants were closed in April 2020, while schools switched to remote learning, except for grades 1–3, which continued with in-person learning (Irfan et al., 2022; Mesiäislehto et al., 2022). The government advised keeping kindergarten-aged children at home, and remote work and mask-wearing were recommended. Most restrictions were eased, and the state of emergency lifted by June 2020. Additional rounds of restrictions were implemented during the second and third waves of the pandemic, occurring in autumn 2020 and spring 2021, respectively (Mesiäislehto et al., 2022).

The Swedish health and safety strategy differed significantly from Finland's. The government described the approach as being based on four guiding principles: evidence-based science, proportionality, voluntariness, and perseverance (SOU 2022:10, page 450ff), which implied that the expertise of the Public Health Agency guided decisions, strict measures were carefully evaluated against their potential harm to general public health (e.g., mental distress caused by lockdowns, the negative economic impact of closing society), and citizens were recommended and urged, rather than forced, to undertake precautions and change behaviours to mitigate the spread of the disease. The approach not only contrasted with that of Finland, but the whole of the EU. For instance, Sweden was the only European country that did not implement strict

lockdown measures to fight the disease, as well as the only country where primary and lower secondary schools never closed in 2020 (OECD, 2021; Pierre, 2020; SKR, 2023).

Along similar lines, the first health and safety recommendations that were issued by the Swedish authorities between 14 and 16 March 2020 consisted of voluntary quarantine if one had symptoms of disease, avoiding non-essential travel to other countries, avoiding unnecessary visits to hospitals and care homes for the elderly, and maintaining good hand hygiene by washing one's hands frequently with hot water and soap. By the end of March, it was also decided that gyms, swimming pools, sport halls, and restaurants should remain open – although public gatherings were limited to 50 people – as long as they facilitated social distancing and similar precautions.

The Swedish health and safety measures became more comprehensive during the second and third waves of the Covid-19 pandemic. Public gatherings were limited to eight people, stricter methods to facilitate social distancing were implemented (e.g., only seated guests at restaurants, use of face masks, avoidance of unnecessary travel on public transport), and when the vaccine appeared, use of a vaccination certificate for travel, social events, and public gatherings was required (for a timeline of the Swedish response, see Olofsson & Vilhelmsson, 2022).

During the crisis, the Finnish government provided a range of support measures related to the labour market and social security to mitigate the economic impact, including a furlough scheme and increased access to unemployment benefits, which allowed furloughed workers to claim income-linked benefits immediately (OECD/Statistics Finland, 2021). Self-employed individuals, freelancers, small and medium-sized enterprises, and service industries were also provided with legal instruments and monetary and fiscal tools. These measures included temporary adjustments to pension contributions, flexible labour legislation to expedite negotiations on temporary layoffs, and amendments to bankruptcy laws. Additionally, the government allocated billions of euros in grants and guarantees to assist struggling businesses (OECD/Statistics Finland, 2021).

Unlike the health and safety strategy, Sweden's labour market and social policy response resembled that of Finland. The government was quick to implement concrete economic measures to ease the financial burden on companies and citizens. Similar to Finland, unemployment benefit was made more accessible and generous; short-time work schemes,

where the government stepped in to cover a significant part of companies' salary costs, were implemented; sickness insurance was reformed by abolishing the qualifying period, removing medical certificate requirements and implementing a carer's allowance; the income ceiling for receiving student aid was temporarily abolished; companies were given direct financial support based on revenue loss, rent support, tax reductions on investments, reduced social security contributions, and special support for certain sectors (e.g., events, maritime, and trade), among other measures. However, the administrative complexity of the various types of support placed heavy demands on small-scale companies and businesses, occasionally resulting in them receiving no support at all (SKR, 2023).

2.3 Labour market and social vulnerabilities

Two broad forms of vulnerability can be distinguished in Finland and Sweden during the Covid-19 pandemic: 1) social vulnerability, both generally and because of the pandemic, and 2) economic or labour market vulnerability due to the global economic impact of Covid-19, specific restrictions in the two countries, and the spread of the virus. Medical vulnerability is related to both as social vulnerability creates health risks and Covid-19, as a virus, impacted workers in the care sector more than anywhere else.

Like other crises, the Covid-19 pandemic uncovered social vulnerabilities related to socioeconomic status. Generally, low-income households suffered more from the economic impact and health-related risks as they could not make use of social distancing to the same extent (e.g., due to having a small residence, being unable to avoid public transport). Many of the first confirmed cases of Covid-19 in Sweden involved ethnic minorities (Ludvigsson, 2020). In general, however, vulnerability during the pandemic had an intersectional element. For example, having a middle or low income, being unmarried, male, immigrant, and having a low educational level were associated with a higher risk of death from Covid-19 during the first wave in Sweden (Drefahl et al., 2020). In Finland, migrant and immigrant background workers identified as being particularly vulnerable due to a higher chance of living with other workers or extended family members, which increased the likelihood of close contact and potential infection. Furthermore, migrant labourers and immigrants in a broader sense have been acknowledged as being less knowledgeable about their rights concerning working conditions and having limited access to official health-related information presented in their native language. Lastly, as in other countries during the Covid-19 pandemic, the elderly was

particularly vulnerable because they were at increased risk of death when affected. The Swedish strategy was explicitly based on this notion, urging people to think about their elderly, take responsibility accordingly, and hence to follow the recommendations.

This sharp rise in the number of infections and deaths during the first wave in Sweden had a considerable impact on the already shorthanded care sector, where doctors, nurses and other medical personnel had to do overtime and double work shifts, be relocated to new wards or hospitals, cancel their annual summer leave, and put together their own protective gear (Kommunal, 2021). The impact was due in part to the suddenness of the pandemic combined with weak crisis preparedness and the complexity of the decentralised Swedish care system, with 21 regions being responsible for hospitals, 290 municipalities responsible for elderly care, one central administrative authority coordinating disease prevention, several other administrative agencies having a central responsibility for work, care, and social insurance, and many private care providers (SOU 2022:10, p. 23; SKR, 2023).

Outside the care sector, similar patterns of vulnerability in the labour market were exposed in the two neighbouring countries. The implementation of restrictive measures in Finland as well as Sweden left certain segments of the workforce more susceptible to economic and labour market vulnerability, especially those with a lower socio-economic status, temporary contracts, and those employed in the private service sector. This was particularly true for workers in catering, hospitality, tourism, and the events industry, as restrictions on mobility and public gatherings led to reduced customer flows, and unprecedented levels of unemployment and furloughs as a consequence. Additionally, platform and self-employed workers were exposed to economic risks as they were not covered by the social security system prior to the pandemic. Furthermore, low-income workers who did not have adequate social security were at risk of depleting personal funds during the prolonged crisis.

The pandemic resulted in heightened economic vulnerability for working women, particularly in Finland, where women dominate industries that have been disproportionately affected by the crisis. This is in contrast to male-dominated sectors, such as construction and manufacturing, which have not suffered significant setbacks in comparison to other European nations. The primary reason for this phenomenon can be attributed to Finland's labour market, which is characterised by a significant degree of segregation, leading to women's over-representation in the service sector (such as bars, restaurants, and shops) and the tourism industry (Mesiäislehto et al., 2022).

In both countries, certain labour market groups were identified as being at greater risk of exposure to Covid-19 and the associated health risks. This was particularly the case for blue-collar workers and essential workers required to work on-site. The largest trade union confederation in Finland, SAK, and its Swedish counterpart LO, which represents a significant proportion of blue-collar worker unions, reported that 90% of blue-collar workers continued to work on-site during the pandemic in both Finland and Sweden. In the Finnish case, it was highlighted that some blue-collar industries, such as meat packing, also worked in close proximity and in poorly ventilated environments, putting workers at greater risk of infection.

2.4 Power relations among the social partners

In Sweden and Finland, national labour unions and employers' organisations are primarily positioned (with some exceptions) at two main levels. Firstly, at the sectoral level, where most of the traditional industrial relations and bipartite negotiations take place. These negotiations cover labour market areas such as collective agreements, wages, workplace issues, and labour security. In Sweden, the Covid-19 pandemic did not pose an obstacle, as negotiations at the sectoral level were crucial for the implementation of policies like short-time work schemes, as these policies required renegotiations of collective agreements. Secondly, at the peak level, where negotiations are conducted between central organisations on broader national issues such as pensions, social insurance, and labour transitions. Particularly during the Covid-19 pandemic, the peak-level organisations were more involved in general political issues compared to sectoral-level labour unions and employers' organisations, apart from when specific political issues are related to a limited set of sectors. However, the larger the organisations are, the more involved in general political questions they tend to be.

Undoubtedly, the main idea behind centralisation is that broader political matters involving multiple unions or employers' organisations can be collectively negotiated with governmental authorities. In the context of Sweden, this became evident during the Covid-19 pandemic, as representatives from sectoral-level actors increased their bipartite consultations with each other to collaborate and address new challenges, while central organisations were increasingly engaged in discussions with the government and governmental authorities. This trend mirrored the typical functioning of the system during non-crisis periods. In Sweden, both central

organisations and sectoral-level organisations serve as referral bodies depending on the specific political issue at hand. However, given that central organisations represent the broader labour market, they tend to be more politically involved. For instance, few policies were implemented during the pandemic without consulting the prominent employers' organisation, *Svenskt Näringsliv*. In other words, the power relations among actors related to Swedish industrial relations did not change during the pandemic, they were only intensified.

During the pandemic, the power structure of industrial relations in Finland remained unchanged, similar to Sweden's situation. The 2019–2020 collective bargaining round began in November 2020, before and during the Covid-19 pandemic. Despite economic uncertainty, negotiations were successful in most sectors, with the technology industry (ICT) sector agreement serving as a framework. According to Kinnunen (2021), the Finnish collective bargaining system, which relies on sector-specific agreements, adapted well to the ICT-based negotiations and implemented measures to protect both employees and enterprises. Social partners, representing employers and trade unions, swiftly worked together and put forward a joint proposal to the government in March 2020 calling for the amendment of labour laws.

3. Social partners and social dialogue in defence of vulnerable groups

The following section highlights findings from the 11 interviews conducted in Finland and the 10 interviews in Sweden. The aim is to emphasise elements of social dialogue in defence of vulnerable groups by addressing policies that were discussed, how vulnerable groups were identified and represented, and the mechanisms of these social partner interactions. In the last subsection, lessons pointed out by the social partners themselves are briefly discussed.

3.1 Which policies were discussed by the social partners?

At a general level, the Swedish and Finnish social partners emphasised the policies that they considered most important for the protection of vulnerable groups, in line with what could be expected from the membership of the respective social partner. Labour and trade unions leaned more towards pushing for and emphasising welfare, workplace issues, and social insurance, whereas employers' organisations underlined safety and maintaining high employment through short-time work schemes and telework. Taking the Finnish case as an example, ensuring safe working conditions in the workplace and when working from home was particularly important

to the trade unions and the representative from the Ministry of Social Affairs and Health. On the other hand, support for businesses and entrepreneurs was on the agenda of the employers' organisations and the Federation of Finnish Enterprises, with vocal argumentation for temporary entitlement to unemployment benefits for entrepreneurs, without the condition of terminating business activities and other business support.

More specifically, when it came to labour market and job retention policies, the Swedish interviewees repeatedly highlighted the short-time work policy as a crucial measure that they had actively initiated and implemented. In part, the short-time work schemes demonstrate the specificities of the Swedish model at work: A law on short-time work schemes has existed as a governmental Act (2013:948) since 2013 and was implemented based on temporary short-time work policies that were initiated during the financial crisis of 2008. Although governmentally determined, the policy relies heavily on the active participation of the social partners as use of the policy (during crisis periods) requires new short-time collective agreements to be negotiated at the sectoral level. A representative from *Unionen*, Sweden's largest trade union, explained that they had signed 60 new agreements in a couple of days during the Covid-19 pandemic. Moreover, in response to the effects of the pandemic and under pressure from the social partners, the Swedish government extended the duration of the short-time work schemes and assumed a larger share of the costs of the schemes.

As mentioned earlier, in the case of Finland, the social partners emphasised the importance of the Covid-19 package they had negotiated at the beginning of the crisis. The package included measures concerning both labour legislation and social insurance, namely unemployment benefits. As expected, there were differences between unions and employers' organisations on what were considered to be the most important elements of the package. Concerned about preventing companies from going bankrupt and protecting employment, employers' organisations highlighted the modifications made to the terms of temporary layoffs by shortening the duration of employer-employee negotiation processes when implementing the schemes. From the perspective of the Finnish unions, the social insurance side was more essential. The key measures concerning unemployment benefits were the temporary removal of the five-day waiting period, and the temporary suspension of counting the maximum payment period, which meant extending the duration of the earnings-related and basic unemployment allowance.

Consequently, and similar to the Swedish short-time work policy, the Finnish temporary layoff system was considered by both the trade unions and the employers' organisations as a strength of the Finnish labour market structure, as a trade union confederation representative stated:

As far as I know, this kind of arrangement is uncommon at the EU level. It's really good in the sense that when we have temporary layoffs in an exceptional situation, we don't have to terminate [employment contracts] ... the temporary layoff option provides a cushioning effect and some consideration of the time factor.

The measures included in the social partners' Covid-19 package were designed to support both companies and employment, as well as the unemployed, in a situation where finding a new job was challenging due to the prevalent economic uncertainties. The Finnish example demonstrates how a joint package from the social partners can simultaneously address the different types of vulnerability emphasised by trade unions and employers' organisations.

In contrast to the joint Finnish package and the Swedish labour market policies that were broadly suggested by the social partners, the initiative and impetus for social security measures came mainly from the trade union side in Sweden. For instance, the two largest Swedish union confederations, TCO and LO, initiated and strengthened unemployment insurance, improvements in sickness insurance, and more effective and accessible vocational education and training, to name a few. One exception to this trend was the Swedish Association of Local Authorities and Regions (SALAR) employers' organisation, which was deeply involved in negotiating and facilitating how to get the right Covid-19 social assistance (e.g., temporary sick pay for risk groups) to the right persons, without putting anyone at risk.

Disagreements and conflict were apparent when it came to policies regarding health-related aspects of the labour market and the heavily exposed care sector. Insufficient protective gear, dangerous work environments, and questions related to security in general made the Swedish Municipal Workers' Union enforce many "six six As" (6:6A²) to ensure that employers took care of the issues. This process did not always run smoothly, as discussed in further detail below.

² 6:6A (chapter 6, paragraph 6a) is a part of the Swedish Work Environment Act, which states that employees or safety officers, who are commonly union representatives, are allowed to demand interventions from the Swedish Work Environment Authority if there are risks involved in the work environment.

Additionally, the Swedish social partners were crucial for promoting and supporting the governmental safety recommendations on working from home, and other precautions. As the Covid-19 pandemic raised concerns regarding workplace security and employment legislation when working from home, employers' organisations played a pivotal role in facilitating these recommendations by providing relevant information, guidance, and coordinated efforts. According to the Swedish employers' organisations themselves, this role was complicated due to mixed messages from the government. Informational issues were also highlighted as a health and safety issue by the Swedish Disability Rights Federation – as some of the members they represent have communicative and cognitive challenges or were part of a specific risk group – and by the Swedish Municipal Workers' Union, representing many frontline occupations. In such cases, accurate information about the disease and protective measures was literally a matter of life and death. In other words, rather than introducing new initiatives or making demands about health and safety recommendations, the Swedish social partners and employers' organisations in particular became crucial in providing access to information in a transparent and clear way. Similar experiences were described in Finland whereby the social partners actively participated in applying the instructions given by the government and public officials, especially health and safety measures such as physical distancing and using masks in the workplace, as well as the national remote work recommendation.

Due to the more restrictive safety measures in Finland, the employers' organisations expressed more critical views, namely on the closing of primary schools as the closure was seen to cause increasing inequality. Similarly, the restrictions imposed on restaurants and cultural establishments were questioned on the basis of how effective they really were at protecting public health. A representative of an expert organisation regarded the closing of the Uusimaa region as an excessive measure and noted that some of the safety measures had become politicised, meaning that Finland could have returned to normal sooner when a sufficient level of vaccine coverage had been reached. It must be noted, however, that the respondents themselves emphasised that these evaluations were made in hindsight, respectively.

Lastly, regarding policies discussed by the Swedish social partners, all the above-mentioned policies are measures that the social partners who were interviewed explicitly stated that they had either initiated, designed or participated in implementing. However, these are by no means all of the policies that were implemented – the government poured money into the system,

implementing policies on a broad scale. In this vein, one of the interviewees stated the following:

The government decision-makers were under tremendous pressure, yet our experience is that they were highly responsive. They listened and sought concrete solutions, which were later implemented or included in long-term plans that were put into action.

In line with this quote, interviewees generally indicated that the policies that they had called for were implemented in one way or another, which underlines the extensiveness of the policymaking process during Covid-19. This is not to say, however, that policy design and implementation proceeded smoothly at all times. For example, SALAR, the Swedish Association of Local Authorities and Regions, described how the prioritisation of health and safety measures often led to the implementation of protective social benefits, such as the pregnancy allowance due to the increased risks posed by Covid-19, without adequate social security legislation having been put in place beforehand.

Similar notions were expressed in Finland, with trade unions and employers' organisations noting that the established legislative structures can be too rigid in a time of a crisis when new laws are needed in no time. In other words, a crisis exposes the weaknesses in the legislation and collective agreements. Still, it was possible to use the existing legislation and to amend clauses, a process which proved to be swift as well. For example, amendments were made to the infectious disease allowance, which was already part of the Finnish social insurance legislation. Easing access to and the payment procedure for the infectious disease allowance was negotiated by the social partners and Kela (The Social Insurance Institution), and the Ministry of Social Affairs and Health drafted the new clauses in a couple of weeks, which several trade union confederation representatives remarked was exceptionally fast.

3.2 Which vulnerable groups were represented by the social partners?

Labour and trade unions, employers' organisations, and civil society organisations are predominantly member organisations. Since they represent their members and their existence depends on the collective organisation of their members' interests, the social partners' perception of vulnerability aligns with whom they represent. Taking Finland as an example, with an emphasis on their respective members, both trade unions and employers' organisations

indicated that there was a clear divide between those who were able to do remote work and those who were not. In Sweden, when asked which groups were the most vulnerable during the Covid-19 pandemic, most Swedish organisations typically identified groups related to or affiliated with them. As shown in Tables 3 and 4 in the Appendices, employers' organisations tended to highlight vulnerability caused by working from home, heavily disadvantaged sectors, and specific close-contact occupations. White-collar unions and confederations emphasised the self-employed, temporary employment, and disadvantaged or close-contact sectors. Blue-collar unions and confederations pointed out different forms of employment vulnerability (e.g., long-term unemployment, insecure employment, temporary employment, and frontline employment). In Finland, Finnish employers' organisations highlighted the vulnerability of certain businesses, which became more pronounced in view of the uneven impact on various sectors. Notably, certain segments, such as the event, restaurant, and hospitality industries, which normally constitute robust parts of the labour market, were now among the vulnerable groups. These sectors were stable prior to the onset of the Covid-19 pandemic, but the crisis came as an unwelcome surprise, severely affecting job security and employment arrangements.

Consequently, while there was some overlap, employers' organisations naturally identified vulnerability related to business, white-collar unions spoke about more resourceful (yet vulnerable) workers, and blue-collar unions referred to workers with weak labour market attachment.

In relation to what was noted above about the socio-demographic characteristics of vulnerability during the pandemic, many of the social partners in both countries described forms of labour market vulnerability linked to other social issues. For instance, low-wage blue-collar workers in the private service sector and migrant workers were identified as vulnerable because they were over-represented in the hospitality, events, and transport sectors.

The vulnerability in low-wage sectors is accentuated by insecure employment contracts, such as part-time or temporary contracts. In Finland, interviewees noted that essential workers, such as cleaners and hospital staff, were in a rather difficult position in terms of income compared to white-collar workers since temporary lay-off periods could cause financial hardship for people who were already in weak positions, particularly since layoffs tended to be long. A Finnish employers' organisation representative captured the complexity of this structural vulnerability:

So they suffered in the same way as businesses – we were in the same boat. And of course the employees in our line of business were not the only ones suffering. It was the same for housing services or cleaning services, for example, because when everyone is working remotely, who needs office cleaners anymore?

Furthermore, the vulnerability of migrant workers in the labour market was connected to general social vulnerabilities in the context of migration. In the case of migrant workers, potential problems and specific vulnerabilities were seen to stem from a lack of awareness about their rights, the terms of collective agreements or labour laws, due to poor language skills and difficulties in accessing information about Covid-19 in their own language. This was also seen to affect their access to social security, and to be part of a wider issue concerning their socio-economic and labour market situation.

Another key point that emerged in both Finland and Sweden was that the social security system assumes that workers are employees, not self-employed or freelancers. As mentioned in the earlier subsection, creating new legislation was seen as expensive and time-consuming, and most new "Covid-19 laws" were amendments to previous laws. In the case of social security systems, a Finnish trade union representative pointed out that it needs to be in place when the crisis hits in order to work properly, and according to the representative, they have had conversations before and after Covid-19 about the social security system of freelancers and entrepreneurs, but without success. The representative highlighted the urgency in resolving such issues "before the next crisis hits – whatever it is".

Accordingly, the social partners predominantly underlined economic and labour market vulnerability, but it was repeatedly linked to forms of social vulnerability. Similarly, although few traditional social partners highlighted the health-related vulnerability of the Swedish elderly, this was tied to the vulnerability in the care sector and the associated insecure employment contracts. As one union representative put it:

They [care sector employees] have insecure employment, which causes other issues. They were exposed to the disease without having sufficient protection, they could not work from home, and they were not allowed to be sick as employers were crying out for more personnel. Our view is that the spread of the disease in elderly care homes and similar places for the elderly became needlessly high because of these precarious employment relationships and extremely high staff turnover.

Consequently, as the quoted representative was well aware, different types and groups of vulnerabilities are interrelated and the prevalence of one can potentially exacerbate another.

In contrast to the above, the most immediate form of health-related vulnerability outside the care sector and the elderly was that of risk groups. Within the Finnish context, the Ministry of Social Affairs and Health and the Finnish Institute for Health and Welfare (THL) were tasked with delineating the criteria for identifying vulnerable individuals and groups. The representative from the ministry, who was interviewed for this study, posited that individuals with underlying health conditions, elderly persons, and those with disabilities or incapacities in their workplaces were particularly susceptible or at risk of becoming vulnerable. These classifications were mutually agreed upon by the trade unions and employers' organisations. However, the latter groups also identified additional vulnerable groups, including workers in the health and social services sectors and individuals who had to consider the health status of a family member in addition to their own.

Although many people in Sweden belong to the risk groups identified by government agencies, the issue was seldom mentioned during the interviews. SALAR and the Swedish Disability Rights Federation stood out clearly from other organisations in this respect, with a representative from the latter organisation noting that the issue was ignored at the beginning of the pandemic:

Questions like who belongs to a risk group? What does it mean to be a risk group? How transparent are evaluations of who belongs to a risk group? It wasn't transparent at all because we weren't asked about it at all, and nor were any of our associations!

Based on this quote, it is once again evident that the identification of vulnerability depended on the 'typical' members of the organisation. People with neurological disorders, one of several risk groups in Sweden, are a primary part of a disability rights organisation, but not a primary part of a labour union or an employers' organisation, even though they appear in all three types of organisations. Knowing this representation dilemma, a Swedish union representative, as well as the national expert that was interviewed, recognised that the truly vulnerable groups are those that are not represented by any organisation, namely those without a voice, such as certain groups of workers who are not in traditional salaried employment. This category included platform workers, such as food delivery drivers, and workers engaged in bogus forms of employment, under conditions that are exploitative or not in compliance with labour laws and regulations. They remained unrepresented by trade unions during the pandemic due to their unorganised status. However, representatives from blue-collar worker trade union

confederations in Finland and Sweden acknowledged in their respective interviews that the social security status of these workers was occasionally discussed within the confederation.

3.3 Mechanisms of social dialogue

In the Swedish case, the involvement of social partners in the initiation, discussion, and implementation of Covid-19 policies, the prevalence of social dialogue, and decisions on which vulnerable groups were defended and which not, depend on the historical position and power of the social partners. Their previous central position gave them a prominent role during Covid-19; their pre-existing institutional strength and labour market attachment gave them a toolkit for managing the crisis; the characteristics of their membership base explain their focus on vulnerability; and their pre-established industrial relations facilitated interaction, mutual bargaining and collaboration, with few conflicts. Put differently, based on how the interviewed representatives described their regular work and labour market interactions and how Covid-19 affected this, institutional path dependency was widespread. As a representative of a union confederation expressed it:

We have established structures going back 100 years. Due to the existence of these, it's easy for us [the social partners] to just continue – cultivated structures and communication are already there. We even have co-partnerships in companies, we're in joint committees and working groups. Therefore, few things appear new and everything is already in place, which is absolutely crucial in times of crisis.

Thus, the existing industrial relations formed a foundation for Sweden's fast, agile, and collaborative labour market response. As one interviewee explained, the Covid-19 pandemic became more of a "trial" of the model's durability. Correspondingly, the social dialogue and the Covid-19 policies were not marked by innovation but by continuity and consensus (albeit with some exceptions, described below). Similarly, years of collaboration and negotiation provided fertile ground for a mutual response to the crisis, resulting in few labour market conflicts and a united front towards resolving urgent issues. As evidence of this, several social partners and government agencies stated that the number of informal contacts and day-to-day interactions had increased during the pandemic.

The aforementioned Covid-19 package in Finland represents the strength and quality of the collaboration between the Finnish social partners, confirming the historical position of the Nordic model there as well. A representative of one employers' organisation underlined the mutual cooperation and how the bipartite negotiations behind the package were completed in

two days, which is exceptionally fast. Yet another success for the Finnish social partners was the negotiation behind the Covid-19 tests and vaccines for occupational healthcare. One trade union representative described how the collaboration with employers' organisations led to a positive reception and being taken more seriously by public officials, resulting in swifter progress. As proof of the prevalence of the Finnish social dialogue structures, the social partners displayed a high level of trust in public officials, as an employers' organisation representative stated:

Especially in the beginning – when we didn't know what to do – when public officials gave us recommendations, we just adopted them without really thinking about whether it was the right or wrong thing to do, if this was the measure that was recommended to us.

Consequently, the social dialogue functioned well in Finland when it came to essential questions concerning the labour market, social insurance legislation, and occupational healthcare. However, public officials held most of the institutionalised power. In other words, similar to the dialogue structures in Sweden, the Covid-19 era in Finland was also defined by continued social dialogue between trade unions, employers' organisations, the government, and public officials. The negotiations were conducted at union and confederation levels, depending on the issue, and relations were considered to be good and effective. Direct conversations with government and public officials were also used to influence regulations and the implementation thereof. Issues concerning occupational safety, and health and social insurance are typically negotiated in tripartite advisory boards in Finland, and this was also the case during the Covid-19 pandemic.

Furthermore, although there was an obvious struggle in Finland over information and levels of authority, as exemplified in section 3.1, the social partners were involved in resolving such issues. One ministry representative noted that when workplaces faced problems implementing official guidelines, the social partners raised the matter with public officials and they worked together to solve the problems. The Ministry of Economic Affairs and Employment also had an advisory board on vulnerable groups and labour market measures. These were interconnected, even though they were situated in different ministries.

As exemplified above in the section on policy discussions, the interaction between the social partners and the Swedish government was, as in Finland, primarily driven by shared values and common goals, with the exception of information challenges. Yet the latter did not resemble a

conflict between two fronts, but rather an element that the government agencies constantly tried to mitigate in concert with the social partners. An agency representative stated the following about the time during the pandemic:

A constant flow of meetings with employers' organisations and others, as well as internally between managers. It was a period that required an exceptional amount of communication and information. I have never experienced such a tempo or anything similar during my 30 years at [the agency].

Similarly, although there were potential conflicts between Swedish labour unions and employers' organisations, such as safety regulations and work preferences clashing with efficiency and management in relation to working from home, or blue-collar unions representing workers unable to work from home versus white-collar unions representing highly educated professionals with telework possibilities, these conflicts did not become major topics of discussion. They were effectively put on hold. As another example, even the Swedish labour market's leading wage negotiations (*Avtalsrörelsen*), which were due to take place at the beginning of 2020, were postponed for seven months, as were any potential disagreements. When wages were subsequently negotiated amid the pandemic, it "became harder for us [the unions] to take into account what we would normally have done for specific groups, because now larger groups were suddenly vulnerable," as one union interviewee explained. In other words, less conflict and more agreement on a common goal can potentially harm specific or smaller, vulnerable groups. Broader aims and widespread vulnerability cloak more particular demands. Moreover, as many social partners in Sweden pointed out, everything happened extremely fast, which further constrains the time and space for political disagreement.

The Finnish social partners also evaluated the problems posed by the fast response. They noted that the process of drafting new Covid-19 legislation differed from established policymaking. Standard procedures and the principles of good administration should have been adhered to when the processes became rushed. Many decisions had to be made, which was perceived as a problem. They argued that public officials could have taken better account of the social partners and social dialogue. An element that the partners saw as key in mitigating several of the issues they faced was the establishment of formal dialogue structures that need to be applied in practice, and when confronted with difficulties in obtaining timely information concerning new restrictions. Yet the political direction shown by the government was also accepted, as one trade union representative pointed out:

Yes, the process itself, like what was going to be done, came from the government, and of course the situation was new to everyone, so maybe it was difficult to suggest "Let's do it this way" since there was no experience of a pandemic.

In sum, it is evident that the Nordic model of industrial relations held strong in both Sweden and Finland, although some power struggles and social dialogue issues were visible, the most significant of which are highlighted below.

Civil society organisations in Sweden expressed concern about an insider-outsider dynamic. Due to the broad impact of the Covid-19 pandemic, they suddenly became important negotiating partners for the Swedish government. However, despite their central involvement, one interviewee said that they were treated in a somewhat "step-motherly" way and received little credibility for their efforts. As the quote below clarifies, their workload and collaboration increased substantially:

When I looked back at the first four weeks of the pandemic, I found that we had written three opinion pieces, issued four press releases, written four letters to government officials, and held two meetings with central government. [...] Suddenly, we had more intensive and regular contact. There was a pressing need on the government's side to establish contact with civil society organisations that represented many people.

Despite the intensification of collaboration and interactive bargaining, the representative explained that the state subsidy, on which the organisation (and other civil society organisations) depend, had not been sufficiently increased in the last 15 years, nor after Covid-19. Similar trends also emerged in Finland, and it became apparent during the interviews that the further an organisation is from the centre, the less likely it is to be heard. This indicates a form of power-based mandate, where power comes from the number of members and the specific industry represented. One trade union representative brought up the notion that they have a strong mandate because they negotiate the collective agreements and because a majority of the employees in the industry are members of their union and not of other smaller ones. The same representative stated that this was related to the perception that other associations felt that their voices were less heard during the crisis.

As a consequence, the social dialogue mechanism showed that the traditional social partners in Sweden (i.e., labour unions and employers' organisations) continued to engage in interactive bargaining with each other and the government. In contrast, other organisations were only invited to the negotiating table when there were urgent issues at hand. Put differently, there is a considerable difference in policy access and political influence between being an established

social partner (insider) and a civil society organisation fighting for particular issues and groups (outsider), as indicated by one employers' organisation representative in Sweden:

The Swedish model that I've just mentioned is fundamental to how we worked during the pandemic. We have considerable influence as employers' organisations and trade unions because of the way our industrial and social system is structured.

The high trade union density and high density rates of employers' organisations in Sweden naturally contribute to the social partners' resourcefulness compared to civil society organisations, which depend on state support, further widening the gap.

As mentioned in relation to the polices emphasised by the Swedish social partners, the Swedish Municipal Workers' Union put forward a more competitive view in contrast to the collaboration, value sharing, and mutual responsiveness discussed above. For example, they had to fight with government agencies to get adequate protective gear, which was unavailable for a long time as it was kept out of reach when the hospital management locked up the gear to prevent theft. Consequently, in the care sector, which was heavily affected by the pandemic regarding workload, health security, and emergencies, things did not run as smoothly as in other labour market sectors during the Covid-19 pandemic.

Conflicts over healthcare in Finland were also linked to the division of labour and responsibilities between the public and private sectors. Struggles were visible, for example, in the case of vaccines. The employers' organisation argued vehemently against the adopted strategy whereby public primary healthcare was given responsibility for the vaccinations, and directed their criticism towards the Finnish Institute for Health and Welfare (THL), which the employers' organisation saw as working against the interests of both private healthcare providers and the public by prolonging the process of granting vaccinations to occupational healthcare as well. The employers' organisation argued that such a measure would have facilitated broader vaccine coverage much more quickly. On the contrary, the Ministry of Social Affairs and Health representative stated that, in the case of vaccines, they wanted to prioritise the Finnish population as a whole, not just working people.

3.4 How do the social partners evaluate their role during the Covid-19 pandemic?

As mentioned above, the majority of Swedish social partners found that the Swedish model coped well with the pressures of the Covid-19 pandemic. Due to their management of "the

trial", both employers' organisations and labour unions said that they felt that their legitimacy had been strengthened, both in relation to themselves and the government. Moreover, the increase in union density and the employers' organisational rate point in the same direction. As one representative enthusiastically explained:

It [the efforts made by the social partners] demonstrates that the social partners can be extremely agile and that the Swedish model delivers. It also shows that we are not necessarily dependent upon the government, nor the colour of the government. The new main agreement clearly shows that when there is an obvious issue that the government or the parliament cannot fix, we can do it ourselves. That's the Nordic model, and it's completely unique!

In a similar vein, the efficacy of social dialogue in addressing the Covid-19 pandemic in Finland was widely deemed a triumph by the stakeholders involved. This sentiment was evident in both the collaborative efforts between employers' associations and labour unions, and in the negotiations with state officials. Acting with alacrity and the skill to mediate between employers and employees were considered pivotal factors in this success. Certain restrictions imposed in Finland were comparatively less onerous or persistent than those observed in other European nations, which was partly attributed to the success discourse between government agents and social partners. In the quote below, a representative from a trade union confederation highlights the importance of the pre-established dialogue structures:

Well, at least the social dialogue works. And we have to maintain the structures where we can have social dialogue. It's not something that you can take out of the closet during a crisis – it has to be sort of alive and kicking all the time! And if you don't have it, you can't create it just for a crisis [...]. So I think this is actually one of the lessons; at least we have a social dialogue in place all the time, as we can't just pull it out of the closet whenever and start negotiating.

The legitimacy of social dialogue was shown to be an integral part of Finnish labour market relations. However, although the overall process of social dialogue was seen as vital and relations as functional, the longer the distance to the heart of the dialogue, the less the social partners felt they had the power to influence policies, as mentioned earlier. The impact of Covid-19 on segments of society and the labour market differed. Based on the interviews, the more Covid-19 affected the industry of the social partner in question, the less satisfied they were with the measures taken. In other words, it was noted that if you are engaged in peak-level negotiations, you have more say in policy matters than the smaller trade unions or employers' organisations.

Going back to the Swedish case, and the care sector more specifically, the social partners' perspective on their relevance and effort was rather different. Instead of highlighting their central involvement during the Covid-19 pandemic as a success of the Swedish model, the Swedish Municipal Workers' Union problematised all the efforts they had to make:

Successful... I don't even want to use that word because it's so terribly tragic that we had to stand at the barricades with these issues. I see it more like this – I don't want to frame it as a success, but let's hope it leads to better conditions and preparedness. Because the lives of our members were at stake to a large degree.

Other legitimacy concerns were also raised. Due to restrictions during the pandemic, the unions were prevented from being present in the workplace for two years. Two interviewees representing different trade unions in Sweden were concerned that this might result in distrust between workers and union members, as the relevance of unions was not visible when they were not interacted with or talked to (at least not face to face). As a direct consequence of this, one of the two representatives in question explained that their organisation struggled with finding willing union representatives in many workplaces, a development that risks undermining the Swedish model as a whole.

In Finland, concerns were raised in connection with the social partners' role in legislative measures. During the pandemic, the government was inclined to impose new legislation at a faster pace, which raises the question of whether this will somehow become the new normal. According to employers' organisation representatives, this could in turn lead to a deterioration in the quality of statutes.

It should also be acknowledged that the role of the social partners depends on how they were portrayed by the media. In Sweden, for example, attention from and framing by the media differed significantly between different organisations. One representative commented on the attention and space they had received:

Yes, even the international media were interested. When our chairperson wasn't available, I took part in a lot of interviews with many foreign newspapers such as *Le Monde*, *Le Figaro*, and others. We received an unbelievable amount of attention.

Others struggled with negative framing:

The media were quite tough on many organisations during the pandemic. Of course, we also got our share of that. It was mainly about us being an employers' organisation and how we were able to push what we were doing when workers and individuals were suffering at home. That was the media angle. [The organisation]

had probably never dealt with as many questions and opinions from the media as it did during the pandemic – for better and for worse

4. Conclusions

The final section answers the three research questions posed at the beginning of the report and synthesises the comparative findings from the Finnish and Swedish cases. It concludes with what the researchers found to be the most relevant lessons drawn from the Covid-19 crisis in terms of understanding the role of social dialogue and vulnerabilities in the Finnish and Swedish labour markets. Somewhat surprisingly, the two Nordic countries tended to react in very similar ways in the area of social protection for the vulnerable, despite the very different health and safety approaches to the pandemic in the respective countries. The following three questions were posed at the beginning of the report:

- 1. What public policy and social dialogue measures targeting the selected vulnerable groups were implemented for employment and social protection during the Covid-19 pandemic in 2020–2022?
- 2. To what extent and how did social dialogue play a role in the implementation of the social and employment rights of selected vulnerable groups in the Covid-19 pandemic between 2020 and 2022?
- 3. What lessons and opportunities does the Covid-19 pandemic yield for strengthening social dialogue in the studied countries?

When it comes to the first question, one of the key findings in this report is how predictable the actions taken by social partners were – in one sense. The employment and social protection measures formulated and implemented in Finland and Sweden were unsurprising given the extensive unemployment and social protection historically provided under the Nordic Model. As a consequence of this, most of the implemented social policies were amendments to pre-existing social protection in one way or another. Continuity and (temporary) expansion, rather than innovation, duly characterises the Nordic experience. This finding is for instance consistent with recent insights on how the Nordic welfare states responded to the unexpected exogenous shock of increasing inflation (Greve et al, 2023), and demonstrates a strong degree of institutional path dependency and requires recognition of the importance of historical institutionalism.

Yet, the eleven Finnish and ten Swedish social partner representatives that were interviewed for the basis of this report emphasised that some measures were of greater importance than others for the protection of vulnerable groups. In the case of Sweden, the short-time work schemes, and the agile implementation thereof, were highlighted as a pivotal measure that mitigated a rise in unemployment, contributed to the financial stability of businesses, and helped citizens avoid economic hardship. In addition, changes in sickness and unemployment insurance were also important. In Finland, the early implementation of the Covid-19 package (including policies related to unemployment benefits, layoff schemes, support for businesses, and more) played a significant role in mitigating similar forms of vulnerability, as in Sweden.

Something that also stood out in both neighbouring countries was the social partners' work with information and communication. In the absence of formal policies, providing accurate and accessible information on health risks, job security, social security entitlement, and how to apply for social security allowances is essential for protecting the health of at-risk groups and people who are unable to work from home, facilitating economic stability for businesses and households, and supporting the rights of workers in close-contact occupations.

Concerning question two, as described earlier in the report, employment and social rights are seldom (if ever) discussed and implemented in the Finnish and Swedish contexts without consulting the social partners. Covid-19 was no exception. Once again, this can be explained by the institutional path dependency and the historical prevalence of social partners under the Nordic Model of industrial relations. Despite a decline in union density in both countries in recent decades, well-established, pre-defined structures for industrial relations and social dialogue provided a (naturally) central role for social partners during the crisis.

Although it was undoubtedly a public health crisis, most of the social partners in the Finnish and Swedish labour market considered that most things had worked as they always had — Covid-19 just made the mode of operation more intensified. The most distinct change compared to normal social dialogue structures was the increase in formal and informal structures between trade unions, employers' organisations, and the government.

However, the strong role of social dialogue also revealed the other side of the coin: the insideroutsider dilemma. The predominance of an institutional structure that gives the traditional social partners and the groups they represent a central role obscures the political accessibility and recognition of other groups and organisations, such as civil society. The decline in union membership rates in Finland and Sweden, is alarming in this regard since increasingly less workers are represented in bipartite and tripartite negotiations. Union membership rates are especially low among blue collar and foreign-born workers, who at the same time were overrepresented in precarious work situations and front-line occupations during the pandemic. Consequently, they face increased risks compared to the general population simultaneously as their political representation was weaker (cf. Kjellberg, 2023b).

According to the social partners in most sectors, most of the Finnish and Swedish social dialogue was characterised by shared values and collaboration during the pandemic. However, there were conflicts in the care sector, where pressure and emergencies were most prevalent. The Nordic social dialogue model tended to operate well under exceptional external pressure. Yet conflicts in the care sector in both countries reflected the differences in power resources within the national systems. This may be connected to issues between the public and private sectors and shifts in the dynamics in industrial relations and power resources (cf. Korpi, 1983: 168).

As for the third and final question, since the social dialogue structures are already strong in Sweden and Finland, the lessons that can be drawn on how to strengthen them further mainly have to do with facilitating their continued existence. More than two decades of decline in union density pose a threat to such a continuation. By highlighting the central role of the social partners and social dialogue during the Covid-19 pandemic, this report underlines that the union density decline deserves attention from social researchers and policymakers, especially when it comes to questions about employment and social vulnerability.

Trade unions are particularly important in these matters, based on the interviewers' experiences when talking with unions and employers' organisations, respectively. Many employers' organisations were hesitant to speak about vulnerability, and often asked what we meant by the term. Unions, on the other hand, naturally spoke about the subject. It was evident that working with vulnerability is a natural part of how and why labour unions work and exist at all (the collective organisation in a union per se depends on labour market exploitation, at least historically). Employers' organisations, in contrast, have a different raison d'être.

Hence, if social dialogue structures are undermined, this will affect the resilience of society and the protection of vulnerable groups, and the outcome may not be visible until the next crisis

when the flexibility and resources of social partners are needed. A welfare state looking to support social rights across the board should avoid ending up in such a position.

Membership in trade unions and employers' organisations, as well as the support for their work, depends on the public's knowledge about what the social partners do, represent, and contribute to. Here, the social partners themselves have a responsibility to support knowledge and understanding of the Nordic Model, rather than working behind closed doors. The above example of two Swedish representatives highlighting the difficulties trade unions face in finding new workplace representatives shows that being visible is not always as easy as it seems, especially during a pandemic that hinders social interactions.

For these reasons, it is crucial not to take the Nordic Model of industrial relations and social dialogue for granted as citizens, social partner representatives, government officials, or social researchers. The state duly has a responsibility to allow the social partners to remain relevant and not to undermine their political decisions by stepping in and resolving issues in political arenas that are traditionally the social partners' preserve. In a similar vein, the state also has a responsibility to invite the social partners to the negotiating table even when there is no crisis at hand.

Lastly, the impact of the Covid-19 pandemic, as well as the conclusions we can draw from it as social researchers, will take time to become apparent, and it will be possible to assess the consequences only after a considerable period of time. It should be considered that the interviews were conducted retrospectively, rather than when the negotiations with and among social partners took place. Further, the interviews were predominantly with representatives of organisations representing employers and employees, and to a much lesser extent with government agencies. And finally, this research can only address the measures at the onset and in the midst of the crisis and not their fundamental impact from the medium- or long-term perspective. One major consideration here is the extent to which Covid-19 policies will remain temporary or become a part of social protection in the future, or whether they will change the way policies are made. In the two cases analysed, most modifications (e.g., to eligibility criteria) were only temporary, and the modus operandi did not seem to be changing considerably. Another consideration is to what extent the current cost-of-living crisis should be included in an evaluation of the impact of the Covid-19 pandemic. Is so, the economic impact – which was moderate in the Nordic compared to the EU average during the pandemic – needs to be revaluated.

Finally, the findings also present a puzzle that needs to be addressed in future research. Despite the fact that Sweden's and Finland's health protection strategies were so different, the experiences of the social partners seem to be rather similar. Given the strong impact that lockdowns and similar measures can have on the socio-economic position of the vulnerable in particular, it is to be expected that trade unions will have strong views either on these public health measures, or on how to compensate for their consequences. Future research could explore the hypothesis that, due to the historically strong institutional structures of representation in both Finland and Sweden, both approaches to public health measures were complemented (in the view of the social partners) with appropriate measures to protect the income position of the most vulnerable groups.

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Appendices

Table 1. Labour Market Indicators

Sweden	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Labour force partici- pation rate (15-64)	79.3	78.9	79.1	79.9	80.3	81.1	81.5	81.7	82.1	82.5	82.7	82.9	82.5	-	-
Unemploy- ment rate (15-74)	-	8.5	8.8	8.0	8.1	8.2	8.1	7.7	7.1	6.8	6.5	7.0	8.5	8.8	7.5
Part-time employment rate (15-64)	-	23.8	23.6	23.1	22.9	22.6	22.5	22.2	21.8	21.3	20.6	20.5	20.3	20.3	20.3
Involuntary part-time (15-64)	26.1	27.4	28.1	27.8	28.8	29.7	29.8	29.4	28.3	27.0	24.2	22.9	23.0	25.1	-
Finland	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Labour force partici- pation rate (15-64)	76.0	75.0	74.5	74.9	75.2	75.2	75.4	75.8	75.9	76.7	77.9	78.3	78.3	-	-
Unemploy- ment rate (15-74)	-	8.3	8.6	8.0	7.9	8.3	8.7	9.4	8.9	8.7	7.5	6.8	7.7	7.7	6.8
Part-time employment rate (15-64)	-	14.1	14.6	14.8	14.9	14.8	14.9	14.9	15.8	15.9	16.0	16.4	15.6	16.9	16.9
Involuntary part-time (15-64)	27.5	28.3	27.9	28.8	25.7	26.1	29.0	31.4	34.2	31.7	32.1	30.9	32.1	31.6	-

Source: EUROSTAT

Table 2. Industrial Relations Indicators

Sweden	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Union Density	64.6	64.2	63.5	62.3	62.4	62	61.8	62.2	61.7	60.8	60.1	59.6	-	-	-
Employer Organisation Density	87	88	87	86	87	87	88	88	88	88	88	88	-	-	-
Adjusted Bargaining Coverage	88.9	89.6	88.7	88.3	88.8	88.4	88.6	88.7	88.6	87.7	88	-	-	-	-
Finland	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Union Density	69.9	72.5	71.4	69.6	69.2	67.5	67.8	67.5	65.7	62.9	60	58.8	-	-	-
Employer Organisation Density	72.6	-	-	-	70.4	-	74.6	-	-	70.4	69	-	-	-	-
Adjusted Bargaining Coverage	87.5	-	-	-	-	-	91.9	-	-	88.8	-	-	-	-	-

Source: ICTWSS. Data from ICTWSS has been used for comparative reasons as data is available for a majority of the countries included in the DEFEN-CE project

Table 3. Interviewed Organisations and their Identification of Vulnerability – Sweden

Name of Organisation	Type of Organisation	Identification of Vulnerability			
The Union (Unionen)	Trade union representing white-collar workers in private sector	People in temporary employmentSelf-employedCertain sectors (restaurants & hotels)			
Confederation of Swedish Enterprise (Svenskt Näringsliv)	Employers' organisation at the central level representing private companies and businesses	 Vulnerability due to working from home Small businesses Certain sectors (trade & restaurants) Unemployed 			
The Swedish Disability Rights Federation (Funktionsrätt Sverige)	Civil society organisation representing organisations for people with disabilities	People with reduced working abilityPeople with cognitive disabilitiesRisk groups			
The Swedish Trade Union Confederation – LO (Landsorganisationen)	Union confederation gathering unions representing blue-collar workers in private and public sector	- Unemployed - Long-term unemployed - Insecure employment - Temporary employment - Workers not able to work from home			
The Swedish Social Insurance Agency (Försäkringskassan)	Government agency administering areas of the social insurance	- Close-contact occupations - Risk groups			
The Swedish Confederation of Professional Employees – TCO (Tjänstemännens centralorganisation)	Union confederation for unions representing white-collar workers in private and public sector	Self-employed (voluntary and non-voluntary) Close-contact occupations Long-term unemployed			
Swedish Agency for Government Employers (Arbetsgivarverket)	Government agency/Employers' organisation representing governmental agencies as employers	 Vulnerability due to home work Front-line occupations (e.g., police force, employees at prison institutions) Pregnant women 			
The Swedish Municipal Workers' Union (Kommunal)	Labour union representing workers in the public sector	 Workers in the care sector Frontline occupations Insecure employment Temporary employment 			
The Swedish Association of Local Authorities and Regions – SALAR (Sveriges Kommuner & Regioner)	Employers' organisation that represents and advocates for local government in Sweden	- Risk groups - Many different groups depending on the situation (which was accelerated by Covid-19)			
National Expert	Lund University	- Care sector employees - Insecure employment			

Table 4. Interviewed Organisations and their Identification of Vulnerability – Finland

Name of Organisation	Type of Organisation	Identification of Vulnerability			
Service Union United (Palvelualojen ammattiliitto PAM)	Trade union representing workers in the private service sector	- Workers temporarily laid-off			
The Finnish Hospitality Association (Matkailu ja Ravintolapalvelut MaRa)	Employers' organisation at the national level representing companies and employers in the hospitality sector	 Low-wage workers Workers and businesses in certain sectors (e.g. hospitality, property- and cleaning services) 			
Finnish Commerce Federation (Kaupan liitto)	Employers' organisation at the national level representing commerce companies	 Definition of vulnerability is based on the evaluation of public health officials People with underlying diseases The elderly 			
Central Organisation for Finnish Trade Unions (Suomen Ammattiliittojen Keskusjärjestö SAK)	Union confederation representing mostly blue-collar workers in industry, the public sector, transport, private services and culture	 Private service workers Part-time or temporary employment Platform work Bogus employment Workers not organised Workers in certain sectors. Self-employed Entrepreneurs 			
Central Organisation for Finnish Trade Unions (Suomen Ammattiliittojen Keskusjärjestö SAK)	Union confederation representing mostly blue-collar workers in industry, the public sector, transport, private services and culture	 Low wage workers Insecure employment Part-time or temporary employment Workers in certain sectors Migrants 			
Central Organisation for Finnish Culture and Arts Associations (Kulttuuri- ja taidealan keskusjärjestö KULTA ry)	Central organisation representing support and producer organisations operating in the arts and culture industry	 Workers or producer organisations in certain sectors (e.g. culture and event) Self-employed Workers in sectors where collective bargaining is nonexistent 			
Confederation of Finnish Industries (Elinkeinoelämän keskusliitto EK)	Employer confederation representing companies in private sector at the national, EU and international level	 Businesses in certain sectors Workers in certain sectors People with underlying diseases or whose family members have an underlying disease 			
Ministry	Ministry of Social Affairs and Health (Sosiaali- ja terveysministeriö STM)	 Close-contact occupations Vulnerable groups (people with underlying diseases and the elderly) Disabled or partially disabled in the workplace Migrants Foreign workers 			
National expert	Finnish Institute of Occupational Health (Työterveyslaitos TTL)	 Definition of vulnerability is based on evaluation of public health officials People not able to work from home (e.g. factories, hospitals, schools) 			
National expert	Tampere University	 Essential workers in frontline, e.g. cleaners, hospital staff, garbage collectors Platform workers 			







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