

Editorial

Welfare in future Sweden – on vulnerable children and adults

Four decades ago, in 1967, one of the grand old men of Swedish Social Medicine, professor Gunnar Inghe together with his wife Maj-Britt published a book about the unfinished welfare of Sweden. They especially pointed at the deficiencies for the most vulnerable groups of the society e.g. elderly with several diseases, homeless people, mentally ill, and drug users.

Population health has since in general developed positively in Sweden, but also today there is a health divide with social and health inequalities. In order to gain health for the population it is important to tackle those inequalities with policies and other actions towards the most vulnerable groups.

In the Stockholm area there is a network of people engaged in such activities with representatives from the academy with researchers, health care and voluntary organisations. This network is administered by the division of social medicine, department of public health sciences, Karolinska Institutet. Within the framework of this network a conference was organised September 13th 2007 with the theme Welfare in future Sweden – on vulnerable children and adults. Foci were vulnerable children and home-

lessness. The aim of the seminar was also to provide possibilities for young researchers to present their findings for a broader audience.

This conference was planned also in the memory of another grand old man of Social Medicine, Stig Åhs, who deceased winter 2006. Stig Åhs was a social-democracy politician, but known for being a politician that wanted achievements in consensus and especially concerned with support for vulnerable groups in the society, development of social medicine and health promotion.

This theme issue presents some of the contributions from the conference. There are two parts. The first mirrors the ongoing debate on the unfinished welfare of today. Questions raised are: What is ongoing in research and what is needed research to better understand the situation for vulnerable groups. The second deals with possibilities to tackle inequalities and support vulnerable groups.

In the **first part** there are nine articles describing vulnerable groups and homelessness. *Bo Burström* et al (Dept. of Public Health Sciences, Karolinska Institutet) present in three articles the results from a study in Stockholm county on health, living conditions and health care use among social

and economic vulnerable groups. In order to study this three different approaches were used. A survey to the adult population, an in depth interview with receivers of economic support (*Anneli Martilla*) and interviews with homeless people (*Robert Irestig*). An index was calculated for defining the vulnerable groups. Perceived health among vulnerable groups and homeless people was less than half the mean level of the adult population. This also stands for an under consumption of health care among these groups. One of the factors behind this is that the vulnerable persons in the interviews claimed that they were received with arrogance by the health care personal. One implication of this finding is a suggestion to create a new kind of health care organisation for vulnerable and homeless groups in the big cities.

Patricia de Palma, Institute of Odontology, Karolinska Institutet, presents results from her doctoral thesis on Oral health among a group of homeless individuals from dental professional's and patient's perspective. This is about how the social class indicator of bad teeth are experienced by homeless people physically and mentally, as deep shame of showing the mouth, fear of dentists and difficulties with eating. *Ulla Beijer*, in her thesis work at the department of public health sciences has studied the health care consumption during 18 years for homeless people.

Three other contributions have used narrative research methods in order to provide a more in depth understanding of the living conditions

for vulnerable and homeless groups. *Anneli Martilla*, also a doctoral student at the above department has implemented interviews with families with scarce economic resources. *Annette Rosengren*, ethnologist, has followed homeless women for almost 10 years. Of those women about 20 % has died and about 35% have a similar situation ten years later. For the rest life has been better. Often including an own apartment. The third narrative contribution by *Gunvor Anderson* and *Hans Swärd* (Department of Social Work, Lund University) is a narrative on homeless children. Based on a single case social conditions and mechanisms for the development of homelessness is illustrated.

The **second part** includes seven articles providing initiatives on different layers of influence in the society to support vulnerable groups and homeless people. One point of discussion is the question of responsibility. What is the role of public society versus the civil society?

Maria Larsson current minister of social affairs presents some new governmental initiatives on vulnerable children and homelessness. Parental support is underlined by the minister. *Gunnar Ågren*, the National Institute of Public Health claims that a perspective of social psychiatry is a prerequisite for effective initiatives towards vulnerability. *Cecilia Hansen Ljöfstrand*, Department of Sociology, Göteborg University, take as her point of departure the doctoral thesis on the Politics of Homelessness – Local Policy and practice. She argues that the drastically changing housing policy and trans-

tema

fer of responsibility, from the central state and the municipal housing companies to the local social authorities has created more homelessness, a "special-housing-sphere" organized as a "housing staircase" and "homelessness careers". Within this sphere mechanisms of exclusion continuously produce "residual groups". She studies more in depth the process by which assistance-seeking citizens become homeless clients, a prerequisite for access to special housing, and analyses the institutional discourses that influence this process, as well as client resistance. *Lars – Erik Olsson* from the Ersta Sköndal University College presents the role of the civil society for support to vulnerable groups. He argues that the public societal institutions are supplement to the work of churches, with their several hundred years old tradition of support for vulnerable and homeless people. *Amina Jama Mahmud*, doctoral student at the department of public health science, Karolinska Institutet and researcher at the Blekinge institute of technology presents health promotion in a local community. The field of research for the studies is the adaptation of modern technology for Health Communication with vulnerable groups in the Swedish society. This is implemented within the framework of the so-called Health Squares (HS). HS is a new Health Promotion setting within Primary Health Care in Sweden. *Birgitta Kimber* and *Therése Skoog* doctoral students at Karolinska Institutet, department of public health sciences and Örebro University present new method for parental support. Finally, *Jan*

Halldin reflects on research, education and praxis development of value to meet the needs of vulnerable people in future.

Bo J A Haglund

Bo J A Haglund professor in Social Medicine Department of Public Health Sciences, Karolinska Institutet. bo.haglund@ki.se