

CRIPPLE WELFARE IN SWEDEN

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In Sweden, cripple welfare, like all other social welfare work, has its origin in the work of warm-hearted private members of the community. In this way the four cripple associations came about: The Eugenia Home in 1882, Gothenburg 1885, Hälsingborg 1887 and Stockholm 1891. Their activity was designed merely to give employment to cripples without private means; but by degrees they developed into cripple institutes: centres of medical-social-pedagogic activity for the whole country. The institute in Härnösand was opened in 1931.

From being secondary, the care of the sick has become the primary social work of our time. Great emphasis is laid on preventive care, and orthopaedy, with the aid of new scientific experiments, is working intensively to reduce disablement to a minimum. Nevertheless, a certain amount of invalidism often remains. It is therefore important that the patients come into contact with the social-working organizations during the period of medical care. This link is made through the institutes' Lady Almoners (Social Workers).

The country is divided into four districts, and each institute is the centre in its district for both the orthopaedic and social-pedagogic activity for the crippled. Besides the orthopaedic medical departments attached to the four cripple institutes, there are orthopaedic departments at two of the hospitals in Stockholm and at the general hospitals in Örebro, Linköping, Malmö and Lund. A certain form of orthopaedic care is employed also at the

costal sanatoria in Vejbystrand and Apelviken, and in the Styrso and Solhem Hospitals in Boräs.

When the programme for orthopaedic care is expanded, and orthopaedic department will be added to a number of county hospitals throughout the country.

It is important that the lady almoners who are attached to these hospitals should work in close collaboration with the cripple institutes and other organizations of the community, in order to obtain the best help possible for the cripples. It has therefore proved to be particularly valuable to assemble at the institutes, the social-welfare groups from the different parts of the country, for exchange of information and personal contact.

As has already been pointed out, the work in its first stage had a purely philanthropic character. As soon as the public realized that it was profitable, from a purely economic point of view, to make these people self-supporting, the financing of the undertaking was largely taken over by the State, which, since July 1st 1937, without a needs-test, has subscribed to the running expenses. Equally, since July 1st 1937, a state grant has been issued for two thirds of the cost of supports and artificial limbs necessary for the patients who are treated for disablement.

The State also contributes to the cost of journeys to and from the cripple institutes after a certain needs-test. To ensure the influence of the State over the cripple institutes and the Eugenia Home, these are, purely administratively, subject to the Royal Medical Board and the Home Office, who examine and approve the state projects and inspect the institutes, particularly where medical care is concerned. The Government also appoints half of the members of the board and the chairman.

The school homes and the elementary school's higher grade, are subject to the Royal School Supervisory Board in the usual manner, and the vocational schools are under the Royal Supervisory Board for Vocational Training.

There are altogether 480 beds in the medical ward, about 300 places for the care of the disabled at the school homes and about 550 at the Vocational Schools.

In one way, the Cripple Institute in Stockholm holds a unique position in relation to the other institutes. By arrangement between the Caroline Institute and the Cripple Institute, the holder of the Ekman professorship is senior physician at the Institute, whose medical department thereby functions as the Caroline Institute's Orthopaedic Clinic. Professor Patrick Haglund was the first to hold this professorship which was founded in 1913. He was also the great pioneer of Swedish cripple care.

As orthopaedy has enlarged its field of activity, less room has been available at the institutes for the treatment of infantile paralysis. The isolation hospitals have, therefore, to a large extent taken over the first stages of treatment, and additional places have been arranged at the coastal sanatoria and rest homes.

In order to produce the best possible support and artificial limb arrangements, the workshops make themselves au fait with foreign experiments, and the technical committee of the Swedish Cripple Welfare Central Committee, SVCK, continually make suggestions about new technical aids for the crippled.

In addition to the four school homes with guest students at the institutes in Hälsingborg, Stockholm and Härnösand, and the Eugenia Home, The Norrbacka Institute (Cripple

Institute) in Stockholm runs a lower secondary school with boarders, and a small upper secondary school.

In cripple welfare, as in all other social welfare, we have begun to understand more and more the importance of preparation for work and vocational advice, so that the cripple may find his right place, where his handicap is eliminated and where he can compete with his strong and not with his weak side. The psycho-technical experiments and tests may be a good medium for reaching the desired results, but the practical experiments are essential.

The lady almoners, in close collaboration with the doctors, are in charge of preparation for work and vocational advice, together with the placing of the cripples in the labour market. The report is drawn up jointly by the lady almoners and doctors and is then referred to The Royal Ministry of Pensions for their consideration. If the training is to take place outside an institute, this is arranged and supervised entirely by Ministry of Pensions and its organizations.

Direct placing in employment is arranged where there are no qualifications for training or where the age of the cripple is too high to make training remunerative.

Training is arranged outside the institutes for a very great number of cripples. This arrangement has been made in order to give the cripples the greatest scope in the choice of a trade. The conditions here, as with all choice of profession, are personal inclination, psychic and physical constitution, and the state of the particular trade in the labour market.

Places at the Cripple Institute's boarding school are reserved primarily for those who are in most need of tuition and the treatment which the cripple institutes are

able to give. Even handicaps other than crippledom can be accepted.

Handicrafts are given priority at the vocational schools of the cripple institutes. Training is given in thirty different trades. This is both practical and theoretical and lasts from one to four years, depending on the trade. It is of very great importance that the quality of the training should be the best possible so that the cripple may thereby obtain some compensation for the handicap which his disablement entails. In conjunction with the trade union, apprenticeship trails are arranged for last-year students who have acquired the necessary knowledge. Where, by reason of disablement or other obstacles such as old age, full training cannot be carried out, part-training is arranged; that is to say, special training in a particular branch of a trade, or just work training. It is particularly desirable that better chances are created for such special training, than can be afforded by the institutes at present. When the institutes are rebuilt, as planned, it is intended to meet these needs by means of greater space and better mechanized equipment. It is also important to get experienced and interested teachers and social workers who are able to see the problems practically as well as psychologically, and understand how to create self-confidence in the students. Training in companionship with other cripples, helps, in general, to strengthen self-confidence.

As the social welfare systems are developed in the community, the various working groups of cripple welfare are attached to them. This applies to the medical as well as the pedagogic and social sections.

The lady almoners have also to see to the buying of tools and machines, invalid chairs etc. This is mostly made possible through the contributions from The Ministry of

Pensions, The Swedish Cripple Welfare Central Committee and the municipalities.

Through their journeys of inspection, the lady almoners are in touch both with the cripples, the industries, local authorities and labour exchanges in their district. The knowledge of the subject gained by these journeys is of great value to the efficiency of the work.

It is imperative to take advantage of the excellent labour possibilities in the good times now prevailing, so that by correct and sound placing, we can convince the respective employers and workers that the cripples can do what is expected of them and are fully competent to compete in the labour market, when correctly placed. Therefore several industries in the country are carrying out work analyses, and it is then a question of having the right work reserved for the specially handicapped, by moving the worker in the industry.

A corresponding analysis of human power will be carried out at the Research Department of the Caroline Hospital in Stockholm in collaboration with the Norrbacka Institute. Everything possible should be done to look after the manpower of our time.

For the cripples who still cannot be placed in the open market, work in the home is arranged through the cripples institutes' sales centre. As great care is taken to maintain a high standard in this, as in all other work done by cripples, the products are easily sold. *De fyra bod*, a shop in Stockholm, sells this work. Industrially, however, work done at home often brings in a higher return, but it is difficult to provide to the extent necessary. The Institutes in Hälsingborg and Stockholm, and The Eugenia Home, run a work-home for the cripples who are unable to have care and work in their own home.

The Swedish Cripple Welfare Central Committee (SVCK) was established in 1911, and is an entirely private institution. The Committee is the centre for the cripple welfare in the country, and has charge of the money collected by a widespread national appeal for the benefit of the crippled, especially infantile paralysis patients. The institutes are represented in SVCK, as in The National Cripple Organization (DVR) and the Eugenia Home.

The Central Committee takes charge of matters of common interest to the cripples, conducts extensive instruction and lecture work appertaining to disablement, and arranges central assemblies and congresses. SVCK also distributes travel-scholarships and subscribes to the acquisition of machines and tools, etc. SVCKs office in Stockholm deals with the routine work.

The Royal Labour Market Board, which is the central control for the public labour exchanges in the country, also has charge of the welfare-work for the partially disabled through the district labour committees in each province. Cripple Welfare and the Royal Labour Board's organizations work in close co-operation.

With all the good forces now working together to solve the problem of the partially disabled, we can hope for an excellent result.