Institutionen för Folkhälsosvetenskap

Managing adversity
Qualitative studies of long-term social assistance recipiency in Sweden in a resilience perspective

AKADEMISK AVHANDLING
som för avläggande av medicine doktorsexamen
vid Karolinska Institutet offentligen försvaras i
Sal 2, plan 3, Norrbacka, KS-området

Fredagen den 5 oktober 2012, kl 9.00

av
Anneli Marttila

Huvudhandledare: Professor Bo Burström
Karolinska Institutet
Institutionen för folkhälsosvetenskap
Avdelning för socialmedicin

Fakultetsoppponent: Professor Emeritus Lars Dahlgren
Umeå Universitet

Betygsnämnd: Professor Gunnel Hensing
Göteborgs Universitet
Institutionen för medicin

Docent Magnus Karlsson
Ersta Sköndal högskola

Professor Yvonne Forsell
Karolinska Institutet
Institutionen för folkhälsosvetenskap

Stockholm 2012
Abstract

This thesis is based on four qualitative studies and aimed to explore the experiences of living long term on social assistance, and to increase knowledge on how social workers providing social assistance perceive their possibilities to support their clients. The findings were reflected from a resilience perspective, focusing on processes and features that help (or hinder), the positive functioning of individuals and families in adverse situations. Data consisted of interviews with 33 social assistance recipients (Study I-III), interviews with 23 social workers and observations in one of the study sites (Study IV). Interviews were carried out in Stockholm County during 2005-2006.

Four research questions were explored. The first concerned consequences for well-being of living long term on social assistance (Study I-III). It was described as possible to manage to live on social assistance for a short time, but it allowed for nothing extra. In the long run, difficulties with money were unavoidable, resulting in financial stress. Psychosocial consequences of living on social assistance included feelings of powerlessness, exclusion, shame, stigma and dependency on authorities which adversely affected their perceived well-being. Among those with chronic illness (Study II) and those who had long lasting difficulties (Study III), the consequences for well-being were modified by their interaction with health and social services and how they as clients and patients were treated, in combination with the support available through the welfare system. The negative consequences of long lasting adversity included limited possibilities to make choices in their lives, increased isolation, feelings of hopelessness and not finding a way out.

The second research question concerned the responses and strategies of social assistance recipients (Study II and III) to maintain or improve their well-being, including living one day at a time, taking steps forwards and backwards and making attempts to find ways out of the situation (Study II). Benefit levels, access to and quality of services as well as the overall construct of the welfare system, the quality of the neighbourhood and social networks all influenced the level of well-being. Strategies to manage long lasting adversity (Study III) included to focus on the well-being of the children and the family and to put one’s own needs behind, searching for balance in life, especially among those who reported mental ill-health. Those who reported addiction and struggled to “start a new life” focused day by day on staying away from drugs/alcohol, to find and keep a flat and try to create a new social life.

The third research question was about ways out of social assistance (Study I-III), which required help from the society and professionals. Employment and education were common aspirations, but often beyond reach. Getting other benefits like unemployment benefit or sickness benefit was seen as “a better alternative” to enable improved access to rehabilitation and labour market activities. To be recognised as individuals, getting help and continuous support based on their individual needs were key aspects. The fourth research question concerned dilemmas in providing social services to long-term recipients (Study IV). Dilemmas related to the interaction between social workers and their clients, and to the societal context in which they operated. Benefit levels and cooperation between different public agencies further influenced the daily practice of social workers. Social workers balanced in a dual role between supporting clients and making demands on them as an authority. The importance of treating clients as individuals instead of seeing them as “categories” was highlighted.

Resilience in the conducted studies, was about keeping going, managing adversity and resisting difficulties, and facilitated by supportive social contacts, access to adequate interventions with good quality and professionals who recognised them as individuals. As emphasised by social workers, structural measures such as improvements in co-operation between public agencies and in the overall construction of the benefit system combined with increase in labour market opportunities for different groups, would facilitate resilience among the clients. The thesis underlines the importance of developing strategies that prevent social exclusion and poverty in the society, combined with long-term targeted, individually tailored interventions.

ISBN 978-91-7457-825-6