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# Sweden – Administration for Allocation of Social Welfare, Gothenburg Municipality

Better Health (Bättre Hälsa)

## WHY?

The project aims to help vulnerable, unemployed and homeless women who are European nationals residing in Gothenburg, Malmö or Stockholm. Many people in this situation, and particularly women, suffer from poor health due to a **lack of knowledge about preventative healthcare**. As a result, they may only visit the doctor when their health situation has significantly deteriorated and suffer unnecessarily as a result. Even when vulnerable women are aware of the services available, they may still encounter challenges such as not knowing exactly where to find these services, what services they need and which they are entitled to.

The Gothenburg Municipality feels that every woman in Sweden should have sufficient access to medical care, particularly in relation to pregnancy and contraception. Many of these women have only had abortions as a contraceptive method, which could be bad for the health. The programme consequently strives to ensure that vulnerable women in Sweden become aware of their rights, to decide over their own body and health by talking to them and letting them know where they can access the help they require.

### WHAT?

The *Bättre Hälsa* initiative organises a range of activities to help women acquire knowledge on personal health. The women supported through the project are generally vulnerable, homeless women that make their money by begging on the streets. They face myriad issues while living on the streets, and are generally unaware of the manner in which health issues can be prevented or treated. *Bättre Hälsa* therefore provides information on looking after your teeth, contraception, pregnancy, caring for your feet, mental health and how to reduce stress.

The aim is to empower these women by increasing their knowledge of how their bodies work and how to manage their health. The project seeks to ensure that they will then be better equipped to make decisions about their health and subsequently access the right services for their needs when appropriate, as well as transfer this knowledge back to their children and communities.

I like to talk to her [the gynaecologist] because I feel that I can ask her about everything and she explains [to] me until I understand what she says. I think this project is good for us. We need this."

End recipient in Stockholm

#### WHO?

A project leader in each city that the project operates in (Gothenburg, Malmö and Stockholm) plans and arranges the activities in collaboration with the staff from participating NGOs. At each activity they make sure that the there is someone there who is fluent in the language of the women from the target group (most frequently this is Romanian) and translators are paid for their time.

To ensure that the information given is as accurate as possible, the project makes sure that a person with specific knowledge of the topic is present at all information activities. Healthcare professionals are paid for their time, although in some cases they choose to participate on a voluntary basis.

### HOW?

*Bättre Hälsa* arranges information activities in places that the target group are already used to visiting. This can include spaces provided by non-profit organisations such as shelters, day centres or information centres. In order to reach the vulnerable women and motivate them to come along to the activities, *Bättre Hälsa* staff work together with other non-profit organisations and talk with women on the street as well. Partner organisations from the non-profit sector include: *Bräcke Diakoni, Västra Götaland* - Care Centre for the Homeless. *Frälsningsarmén* in Gothenburg and Stockholm County, *Räddningsmissionen* (Rescue Mission) *i Göteborg, Stadsmissionen*/Crossroads in Stockholm and Malmö, Convictus in Stockholm, Swedish church in Stockholm, Filadelfia church in Stockholm, *Läkare I världen* (Doctors of the World) in Stockholm , RFSU (National Association for Sexual Information).

*Bättre Hälsa* also arranges special events, including celebrations for Easter and Women's Day. On these occasions, staff talk with the women about different traditions and holidays from across cultures.

The project provides advice on particular products to treat health conditions (e.g. creams for skin conditions) and lets the women know where they can buy them. It also provides information on where they can find food, shelter and clothes, as well as where they can shower and wash their clothes, where to find Swedish lessons and how to increase their chances of employment (e.g. through getting help with the job search). When doctors visit the project, they sometimes bring different contraceptives with them that the women can see first hand in order to become familiar with them. As many of the women that engage with the project are unable to read, project staff draw or show images or films on the issues they are discussing.

Importantly, project workers ensure that information is always given during discussions with the women. The project recognises the importance of listening to the women and answering any questions they may have. Through engaging directly with women, staff have been able to identify their most acute health needs, and decide upon particular activities together with the women involved.

The key success of the project has been linked to a number of factors, including its effective cooperation with non-profit organisations, the inclusion of the target group in defining the best way to provide information and involving staff that speak the women's languages and have some cultural knowledge of the target group. The project is around halfway through and has so far reached around 350 women.

> For more information regarding the project, contact Maud Wiilardsson Engstrom via: E-Mail: maud.willardsson.engstrom@socialresurs.goteborg.se