Vården av de arbetsoförmögna
Reumatikervårdens framväxt i den tidiga välfärdsstaten
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Abstract


This dissertation is about the development of care for the chronically ill, particularly rheumatics, from 1900 to 1960. Two aspects, economic support and medical care, are discussed regarding the efforts made by society to improve the situation for the chronically ill. The aim is to investigate the underlying motives for the care, and the interests of the state and the medical profession in the matter. The development of the care takes place in a historical context in which the state increased its responsibility for the social security of the citizens. Primarily this was seen in the creation of a social insurance system. There is a focus on the introduction of a national basic pensions scheme in 1913, which apart from giving old age pension would also give economic security to those who were struck with disablement. To reduce the costs for early retirement disability pensions, where rheumatics were the largest group, economic resources were set aside for the purpose of combating and curing disablement. As a consequence of this initiative, specialist care for rheumatics was built up within the framework of the basic pensions scheme. At the same time, doctors were arguing that the care for rheumatics should have been organised in the public health service.

The dissertation follows the institutional development of specialist care for rheumatics up to the 1960s, when the National Social Insurance Board took over the pension board’s duties and powers, and the decision was taken to transfer the specialist care for rheumatics to the county councils. In the organisational development, the influence of the medical profession and medical science in the shaping of the work is discussed. In addition, other factors such as changes in the labour market, where the motive was to rehabilitate the sick so that they could work and be self-supporting, are put forward as an important explanation for the organisational structuring that the care of rheumatics underwent during the twentieth century. This meant that social work became an important complement to the medical care itself.

Keywords: medical history, rehabilitation, professionalisation, welfare state, chronically ill, care of rheumatics, social insurance.

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