Strengthening wellbeing and equality during and after the coronavirus crisis

Group appointed by the Ministry of Social Affairs and Health and the Ministry of Economic Affairs and Employment

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Abstract

The restrictive measures and recommendations aimed at safeguarding the health of the population and the carrying capacity of the healthcare system during the COVID-19 crisis succeeded in slowing the spread of the epidemic and protecting the risk groups. On the flip side, however, we see that these exceptional measures have had serious social and economic consequences.

The high-profile group's report highlights issues critical to the welfare society during the COVID-19 crisis. The report assesses the consequences of imposing restrictions, lifting restrictions and the recovery of the economy and society as a whole in terms of human and social well-being and equality.

The Finnish welfare society provides a strong foundation for coping with the crisis, but we must make efforts to avoid long-term damaging consequences of previous recessions.

The effects of the emergency situation are not evenly shared in the population, which is why it is important to focus attention on those whose wellbeing has been most affected by the situation.

A socially, humanely and economically intact and equal society is built on human dignity and people's interdependence. The coronavirus crisis reveals the fractures of society, and addressing them is of primary importance in order to preserve the welfare society. A wellbeing impact assessment requires a well-functioning set of criteria, regular production of information and a permanent assessment structure.

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Tiivistelmä

Rajoitustoimet ja suositukset, joiden tarkoituksena oli turvata väestön terveys ja terveydenhuollon kantokyky koronakriisin aikana, onnistuivat hidastamaan epidemian leviämistä ja suojaamaan riskiryhmiä. Näiden poikkeustoimien kääntöpuolena on kuitenkin ollut vakavia sosiaalisia ja taloudellisia vaikutuksia.

Korkean profiilin ryhmän raportissa nostetaan keskusteluun hyvinvointiyhteiskunnan kannalta kriittisiä asioita koronakriisin aikana. Raportissa arvioidaan rajoitusten asettamisen, purkamisen sekä talouden ja koko yhteiskunnan toipumisen seurauksia inhimillisen ja sosiaalisen hyvinvoinnin sekä tasa-arvon kannalta.

Suomalainen hyvinvointiyhteiskunta luo vahvan pohjan kriisistä selviytymiseen, mutta on panostettava, että vältetään aiempien lamojen pitkäkantoiset vahingolliset seuraukset.

Poikkeustilanteen vaikutukset eivät ole jakautuneet väestössä tasaisesti, minkä vuoksi on tärkeää suunnata huomiota heihin, joiden hyvinvointia poikkeustilanne on koetellut eniten.

Sosiaalisesti, inhimillisesti ja taloudellisesti ehjä ja yhdenvertainen yhteiskunta rakentuu ihmisarvon ja ihmisten keskinäisen riippuvuuden varaan. Koronakriisi paljastaa yhteiskunnan murtumakohtia, joihin puuttuminen on ensisijaisen tärkeää hyvinvointiyhteiskunnan säilyttämiseksi. Hyvinvoinnin vaikutusarviointia varten tarvitaan toimiva kriteeristö, säännöllinen tiedon tuottaminen ja pysyvä arviointirakenne.

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Restriktionerna och rekommendationerna, vars syfte var att trygga befolkningens hälsa och hälso- och sjuk-vårdens bärkraft under coronakrisen lyckades bromsa spridningen av epidemin och skydda riskgrupperna. Baksidan med dessa undantagsåtgärder har dock varit de allvarliga sociala och ekonomiska konsekvenser som följt av dem.

I rapporten, som utarbetats av en grupp av opinionsbildare, lyfter man fram frågor som är kritiska med tanke på välfärdssamhället under coronakrisen. I rapporten bedöms följderna av att införa och avveckla restriktioner samt av att ekonomin och hela samhället återhämtar sig med tanke på den mänskliga och soci-ala välfärden samt jämställdheten.

Det finländska välfärdssamhället skapar en stark grund för att klara av krisen, men man måste göra en kraf-tansträngning för att undvika de långsiktiga konsekvenser som följt av tidigare recessioner.

Konsekvenserna av undantagstillståndet har inte fördelats jämnt bland befolkningen och därför är det viktigt att rikta uppmärksamheten mot dem vars välfärd prövats mest av undantagstillståndet.

Ett socialt, mänskligt och ekonomiskt sammanhängande och jämlikt samhälle byggs upp med människo-värdet och det ömsesidiga beroendet mellan människor som grund. Krisen avslöjar samhällets brytpunkter, och det är av största vikt att man ingriper i dem för att välfärdssamhället ska kunna bevaras. För konse-kvensbedömningen av välfärden behövs fungerande kriterier, regelbunden framställning av information och en permanent utvärderingsstruktur.

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TO THE READER

The coronavirus is shaking up the whole world. It is also shaking up Finnish society. We do not know how long this situation will last. It is still too early to assess all of the impacts involved. However, it is already clear that the impacts will extend from the economy to international relations and from societal structures to social relationships.

In the midst of this uncertainty, we must try to see what is happening, to understand and respond. This is a role that individual citizens, public debate, all societal actors and duty-bearers must play. For this purpose, the central government has launched several efforts, including the work carried out by this group.

The group was assigned to explore what the current situation would mean from the perspective of strengthening wellbeing and equality among all citizens – in other words, of the premises on which the Finnish welfare society has rested.

Both the group members and various other parties have generously contributed their expertise and data currently available on the human and social impacts of the coronavirus crisis. This goes to show that there is a widely shared intent in society and concern about how people are faring in the midst and as a result of this crisis.

This report aims to identify the most critical points for wellbeing and equality as well as the strengths revealed in the process.

Moving on from the crisis in a manner that is sound in human, social and economic terms calls for concerted efforts from all sectors of society. How we perform will ultimately be reflected in how those with the least resources will manage.

Helsinki, 31 May 2020, Kari Mäkinen, Group Chair

Summary

At the beginning of May, the Ministry of Social Affairs and Health and the Ministry of Economic Affairs and Employment set up a broad-based high-profile group to produce views and suggestions to strengthen wellbeing and equality. The aim was to prepare for the lifting of restrictions and the reconstruction of society in the aftermath of the coronavirus epidemic. The working group was set up for the period of 5 May to 31 May 2020.

The aim of the report produced by the working group is to highlight critical issues for the welfare society. Its key message is that human dignity and people's interdependence are set as bases for all action. Based on these two fundamental ethical pillars, a socially, humanely and economically intact and equal society is built. The Finnish welfare society provides a strong foundation for coping with the crisis, but we must make efforts to avoid long-term damaging consequences that were caused by the recession in the 1990s and the financial crisis of 2008.

Civil society has played an important role in creating and maintaining the Finnish welfare society in cooperation with the public sector. During a crisis, the role of civil society in maintaining social cohesion and wellbeing is emphasised. It is therefore essential to secure the resources of civil society in the future, too.

The corona pandemic and restrictive measures have affected all our social relations, the structures of daily life and everyday activities. Restrictions or how they were interpreted shifted a central part of public-sector welfare services to homes as unpaid work. The effects of the emergency situation are not evenly shared in the population, which is why it is important to focus attention on those whose wellbeing has been most affected. At the same time, it is necessary to assess which measures would provide the fastest way for removing restrictions to increase wellbeing without major health risks. In this assessment, the impacts on equality, equity and different age groups are central.

The crisis situation caused by the pandemic and its impact on business activities almost immediately caused income problems for those whose work was directly affected by the restrictive measures. The loss of job opportunities affected both entrepreneurs and workers who were laid off. We do not know yet the duration of the economic consequences, but a significant reduction in employment opportunities highlights the importance of economic support measures and employment policy.

In addition to financial losses, the crisis reveals the fractures of society, and addressing them is of primary importance in order to preserve the welfare society. The interruption or deterioration of available services has affected the wellbeing of many people, especially those already in a vulnerable position. We must assess this and possible economic adjustment measures and cuts equally, from the perspective of different groups of people, different age groups and different genders.

The economy needs people who experience wellbeing, and to experience wellbeing, people need a well-functioning economy; investing in people's wellbeing means investing in the economy. A wellbeing impact assessment requires a well-functioning set of criteria, regular production of information and a permanent assessment structure.

1 Background

The influenza epidemic caused by the coronavirus broke out in China early this year, or possibly as early as late last year. The Chinese city of Wuhan launched rigorous measures to restrict the epidemic in January 2020. At that point, Western countries did not yet seem to be concerned about the notion that the coronavirus could spread beyond China. The situation changed when a European coronavirus outbreak started to spread from North Italian ski resorts in March. Mortality rates increased and intensive care units became overcrowded, which is why Northern Italy was the first region to take radical restrictive measures to curb the progress of the epidemic. Restrictive measures expanded into all Western countries during March.

In mid-March, Finland introduced a range of measures that restricted citizens' fundamental rights with a view to safeguarding the population's health and the healthcare system's capacity. The restrictive measures and recommendations have successfully slowed down the spread of the epidemic while protecting high-risk groups. However, the measures to protect citizens have had serious social and economic impacts.

On 8 April 2020, the Prime Minister's Office appointed a preparatory working group to quickly develop a plan for a timely exit from restrictive measures and for post-crisis management. A scientific panel was set up to support the preparatory group, complete with a sub-working group of the social partners, which may make proposals to the preparatory group. Another working group appointed by the Ministry of Social Affairs and Health is producing epidemiological and medical situation awareness reports for the preparatory work. The Ministry of Economic Affairs and Employment and the Ministry of Finance set up a working group of rapporteurs to draw up an expert assessment of the effects of the coronavirus crisis and the measures to restrict the damage caused to the Finnish economy in support of their own analysis. The Ministry of the Interior, in turn, appointed a rapporteur to produce policy recommendations for preventing the growth of inequality and insecurity in society due to the coronavirus crisis.

In addition to the above-mentioned groups, we need a broad vision on how to prevent any adverse social and equality effects that may arise from setting and easing restrictions and from economic and broader societal recovery. In early May, the Ministry of Social Affairs and Health and the Ministry of Economic Affairs and Employment set up a high-profile group to produce proposals to strengthen wellbeing and equality as part of the preparations for lifting the restrictions set due to the coronavirus epidemic and the reconstruction of society. The mandate of the working group extended from 6 to 31 May 2020.

The group's task was to produce views and proposals on how to prevent prolonged social problems, social exclusion and growing differences in wellbeing during the exit and recovery phases. The group was chaired by Archbishop Emeritus Kari Mäkinen, chair of the Council of the Finnish Federation for Social Affairs and Health (SOSTE). The preparatory group members were Jukka Haapakoski, Executive Director, Finnish National Organisation of the Unemployed; Olli Kangas, Professor of Practice, University of Turku/Programme Director, Academy of Finland Strategic Research Council; Johanna Kantola, Professor of Gender Studies, Tampere University; Jaakko Kiander, Director, Finnish Centre for Pensions; Kristiina Kumpula, Secretary General, Finnish Red Cross; Tuire Santamäki-Vuori, Director, Finnish Institute for Health and Welfare (THL); Päivi Topo, Director, Age Institute; and Sari Kokko, Chairperson, Finnish Federation of the Visually Impaired.

2 Situation picture

Finland entered into a state of emergency in mid-March. Gatherings, travel and tourism were stopped and people were requested to work remotely whenever possible. Restrictive measures brought restaurant and hotel operations and sports and cultural events to a quick halt. Businesses and non-governmental organisations (NGOs) operating in these sectors soon faced financial difficulties as their income dried up. The borders were also closed soon after, while most of sea and air transport stopped.

The restrictions on gatherings due to the epidemic resulted in an unprecedented situation where a considerable part of service business operations and people's normal interactions had to be suspended. The restrictive measures treated different parties in different ways. In the business world, the impact was most keenly felt in restaurants, hotels and transport services, while retail trade, with the exception of fast-moving consumer goods trade, also lost a considerable number of customers.

The operations of schools and daycare centres were limited for a period of two months, forcing many parents to perform a balancing act between working, caring for their children and dealing with their distance education. People aged over 70 were placed under quarantine-like conditions and a sense of loneliness still looms large in many people's everyday lives. Many support measures and services were suspended or their quality declined, resulting in reduced quality of life and problems with running daily errands for people in rehabilitation, those with disabilities, etc.

The restrictive measures turned out to be effective in curbing the progress of the epidemic. Finland's infection, morbidity, intensive care and mortality rates are quite low compared to many other countries. The Finnish healthcare system has worked efficiently and there have been enough intensive care beds available to accommodate everyone requiring intensive care. Nevertheless, care homes in particular have failed to prevent infections and deaths.

The restrictive measures to restrain the epidemic have had major economic impacts both in Finland and in many other countries. This aspect was assessed in a report by a working group set up to draft an economic policy crisis strategy. The group estimated that the economy will not resume its previous growth trajectory after the coronavirus crisis in Finland or abroad. The overall economic impact of the crisis will depend on how long and serious the epidemic turns out to be. The sustainability gap in general government finances may require difficult fiscal adjustments. In this case, it will be necessary to take care not to undermine the living conditions of society's vulnerable groups.

Gender, ethnic background, disability, socio-economic status and age are examples of differences due to which the crisis and related measures have different effects on different groups. These differences are also intersecting, placing many people in a particularly vulnerable and unequal situation. The effects of the epidemic on people's opportunities to protect themselves against infection are also highly unequal in regional and occupational terms. Likewise, different population and occupational groups are treated differently by the economic crisis. There are also considerable differences between regions in terms of how their economic structures can absorb the impact of the crisis. The rate of disadvantage and the social effects of the crisis are tied to each region's economic structure and situation.

We are living in a situation with plenty of uncertainties. The international system is out of balance, reverberating in Finnish society. We are working on many different levels to preserve our welfare society. As of May 2020, we still know very little about the progress of the coronavirus epidemic and its effects on the future and people's wellbeing. The real effects of the crisis will only unfold in the long term and the measures now put in place will be explored in several studies. At present, we are forced to make assessments based on deficient, incomplete and fragmented information.

Finland's major depression of the 1990s as well as the prolonged recession that followed the 2008 financial crisis have cast a long shadow. We must learn from these when making decisions on recovery. The key is the reciprocity of the economy and wellbeing. The economy needs people who experience wellbeing, and to experience wellbeing, people need a well-functioning economy; investing in people's wellbeing means investing in the economy.

3 An ethos to guide us beyond the coronavirus crisis

Difficult and uncertain times put the strength of a society's ethical foundation to the test. This is what is happening during the coronavirus crisis. It has potential for strengthening social trust and coherence – as well as for deepening existing fissures and fractures and creating new ones. Extraordinary times also open up the kinds of opportunities for renewal that would not be possible under normal conditions. The direction which will follow from the coronavirus crisis can be influenced through active and determined measures.

This will ultimately be crucial for society's economic, social and human capacity in the long term. Therefore, while efforts are made to boost the recovery of economic and other activities, it is also necessary to ensure human and social recovery in equal measure. These factors are intertwined.

The coronavirus crisis has brought us more clearly face to face with the fact that disease, weakness, death, suffering, unpredictability and uncertainty are also part of life. Rather than being limited to old age or a specific group of people, these form part of all human life. Conversely, what counts here is how we will jointly meet and live with these.

In this view, the exceptional situation caused by the coronavirus has highlighted two guiding ethical principles and values underpinning the way in which Finnish society is built.

Human dignity

The first aspect of this ethos is human dignity. All people have equal and inalienable value and the right to live a good life and share in the common good.

Individuals must not be discriminated on the basis of their age, gender, prosperity, background, or personal characteristics. Nevertheless, the crisis is treating citizens in different ways. The crisis did not chance upon a fully equal and equitable reality in all respects. Some have stronger opportunities and resources to deal with the crisis to begin with, while others are in a weaker position.

Equity calls for everyone to have chances to survive. Anyone's life can break down. Everyone must be able to trust that, if they fall ill, they will receive the best possible treatment and will not be left on their own and without support amidst life's difficulties.

This is the premise that should guide the activities of both the government and civil society.

It is crucial that the ethos of public authorities and civil society is in alignment. This has been reflected in the ways in which local authorities, NGOs, parishes and businesses have found new forms of cooperation in the exceptional situation, in order to facilitate coping with altered everyday life.

It is equally crucial that the work for the common good will not rest on the moral capacity of individual citizens, NGOs or other parties. The central government is committed to the common good in law and official duties. Ultimately, commitment to the ethical foundation of the common good is implemented in the Constitution of Finland and international human rights treaties. These contain the principles indiscriminately applicable to all people, according to which public authorities must operate. When different decisions are repeatedly assessed in relation to the Constitution during a crisis, this is not just a question of jurisprudence. Rather, it is about mirroring any action against society's shared ethical foundation.

Amidst the crisis and during recovery, we will face ethically conflicting situations and decisions. This is unavoidable. We must accept imperfection. This should not, however, blot out the ethical foundation on the basis of which decisions are made and their effects are assessed.

Anyone's life can break down. Everyone must be able to trust that, if
they fall ill, they will receive the best possible treatment and will not be
left on their own and without support amidst life's difficulties. This is the
premise that should guide the activities of both the government and civil
society.

Human interdependence

The second aspect of the guiding ethos highlighted by the coronavirus crisis is human interdependence. This applies equally to individuals, communities, governments and all of global humanity.

No person can survive on their own when left to their own devices. No person is solely the architect of their own fortunes. What happens to one concerns all. This becomes evident even as people have been forced to be separated from each other more than usual due to social distancing. The consequences may be harsh for people in isolation and for those who do not have the opportunity to self-isolate.

People's fundamental interdependency also has implications for society. By way of example, the crisis has shown the fundamental role played by care as a resource to society. Interdependence also means that a society is only as strong as its weakest link. The state of a society must therefore always be considered from the perspective of its most vulnerable members.

Consequently, special attention and investment in a crisis and in post-crisis recovery must be focused where the human, social and economic fractures caused and revealed by the exceptional situation are largest. They may either be large because they were caused by the crisis itself, or because resources to face the changing situation were already scant to begin with.

The poorer an individual's own resources to survive, the stronger the duty of public authorities is to safeguard survival. This calls for long-term and permanent solutions. Rather than concerning just a specific policy area, this is about the fundamental premise of the whole of social policy: to secure the wellbeing and good life of every citizen on an equal basis. This should also form the basis for assessing any decisions.

 Interdependence also means that a society is only as strong as its weakest link. The state of a society must therefore always be considered from the perspective of its most vulnerable members.

A shared ethos

These two ethical pillars form the foundation on which a socially, humanely and economically coherent and equitable society is built. Everyone needs to commit to these in the midst of the coronavirus crisis.

Commitment is not only limited to Finnish society's internal issues. The same ethical principles also apply to sharing in global responsibility and cooperation. Recovery from the coronavirus crisis calls for active international cooperation in research and prevention of the spread of the virus. Global interdependence requires paying special attention to the survival of developing countries and the most fragile states.

If we fail to hold on to our shared ethos firmly and purposefully, it is possible that the crisis will lead to turning inwards, safeguarding the interests of the strong at the expense of the weak, and growing socio-economic, cultural and intergenerational distances. It is likewise possible that society will divide, such that some citizens will only remain the targets of measures taken by those upholding society. There is a particular risk that the most vulnerable will be left alone and without adequate care, support and security. These consequences would be fatal in terms of social cohesion and long-term social, human and economic resilience.

It is crucial that all measures taken amidst and beyond the crisis will build up trust. Trust cannot be bought, forced or threatened into existence. Nor can trust be created by mere words. It can only be built through acts. Trust is built by a shared experience that measures taken amidst a difficult time are just and reflect a consistent ethical vision and a perception of being in the same boat.

In the best-case scenario, a shared crisis will fortify solidarity and the will to work for the common good. It may also present an opportunity to find new solutions that build equality and dismantle inequalities and to mend the existing fractures in society. The crisis may lead to assessment of the capacities of official social policy, public bodies and civil society to detect and address these fractures.

The coronavirus crisis is placing a strain on people in highly different ways – some more than others. It is also placing a strain on society as a whole. It requires exceptional measures and exceptional adjustment. It breeds uncertainty, confusion and insecurity. Intellectual resources also need recovery and active maintenance. This concerns those who bear responsibility as part of their daily work or decision-making duties. This also applies to the whole of society, where strain on the mind is gradually building up in the midst of the situation.

All parties involved – public authorities, civil society, the media and businesses alike – need calm and strong determination to address acute needs. However, it is also necessary to accept that we will have to live with uncertainty and insecurity.

We need perseverance and a sense of calm, a long view on life both backwards and forwards, and the experience that a strong shared ethos provides the foundation to build on during difficult times. It is especially important because we are facing even more difficult issues, such as climate change.

We need trust to build a shared experience that measures taken amidst
a difficult time are just and reflect a consistent ethical vision and a perception of being in the same boat.

4 The strength of the Finnish welfare model

The Finnish welfare model has created a good foundation for facing the coronavirus crisis and its consequences.

The history of the welfare society is a success story. In his book entitled 'Upheaval: How nations cope with crisis and change', Jared Diamond raises Finland as an example of a country that succeeded in post-war national reconstruction in both material and intellectual terms. Compared with many other countries, Finland was relatively late in building its social security, but it premised its efforts on the principles of universalism from the outset.

Unlike Central Europe, where the starting point was 'labour insurance' intended to guarantee income security for paid employees, or Anglo-American countries, which built means-tested security for the poor while the middle classes prepared for social risks with individual solutions, Finland's premise was the population as a whole. Universal social transfers and services covering everyone have certainly been supplemented with separate earnings-related and means-tested schemes to support people's subsistence. The Finnish model has managed to effectively prevent poverty and social exclusion.

In particular, the welfare state has enabled female employment by providing essential services (such as children's subjective right to daycare) as well as public sector jobs. This has made it possible for both parents to reconcile public and private life. Finland's poverty and material deprivation rates are among the lowest in the world, both at the level of the population as a whole and among different population groups. In terms of education, Finland lagged behind other Western countries well into post-World War II years. However, the education system it built in the 1970s has worked well and produced good outcomes. Due to the universal education system, having an education has not been an exclusive privilege for children from wealthy families. Neither high nor low parental socio-economic status is passed on from parents to children to the same extent as in most other countries. Finland has been a relatively open society of opportunities.

- Contrary to most other countries, Finland adopted the principles of universalism as its premise from the outset.
- The Finnish model has managed to effectively prevent poverty and social exclusion while promoting gender equality.

Economic crises test the welfare state's resilience

The resilience of the Finnish welfare society and its structures had already been tested before the coronavirus crisis. The country went through a deep depression in the 1990s, as domestic demand declined while the international recession in the West and the collapse of the Soviet Union in the East led to exports drying up, putting a damper on production. As a result, unemployment surged to 16% and the public sector, which had been virtually debt-free, piled on debt at a rapid rate. Following the deep shock, the economy recovered quickly. However, the rising economic tide failed to lift all boats in the same way. Income disparities and poverty rates took an upward turn. Growth in income disparities and poverty bottomed out at the turn of the millennium, but the rates settled at a level higher than before.

Finland was hit hard by the global recession following the 2008 financial crisis. In 2009, exports and domestic product took an even deeper plunge than in the early 1990s. Moreover, the financial crisis was followed by the euro-area debt crisis, resulting in quite a low level of economic development for the entire 2010s. Conversely, employment rates developed more positively in the 2010s when compared with the 1990s, when Finland suffered from protracted mass unemployment. As a result of slow economic growth, however, Finland's public sector was in a significantly weaker position in 2019, i.e. prior to the outbreak of the coronavirus crisis, compared to the situation prior to the 1991 and 2009 economic crises.

With its universal and targeted benefits, the Finnish welfare state has provided a buffer that has cushioned the most drastic impacts of economic crises. However, average analyses tend to conceal groups among which the toll taken by such periods has been unreasonable. The hardest hit groups include single parents, people in the lowest income groups, people with disabilities, unemployed people, immigrants, and those with only basic schooling. When considering post-pandemic social policy, we should therefore specifically set our sights on the situation of society's most vulnerable people.

During both of the above-mentioned major economic crises, the formal social assistance system saw increasing client numbers and prolonged periods of assistance. For many people, however, formal assistance was not sufficient. The role of third-sector organisations and parish diaconal social work became more prominent.

As of writing this report, we do not know how deep and permanent the economic recession caused by the pandemic will become. The basic assumption is that any pandemic-induced recession will be different in essence than the 1990 and 2008 crises. This time round, unemployment focuses on the service sector (previously industry), women (previously men), and primarily the 25–34 age group (previously older age

groups). It has also been predicted that the profile of the recession caused by the coronavirus epidemic would differ from the two crises mentioned above and would involve more long-term consequences. There is a risk that the groups hit hardest by the previous crises will bear the brunt of the burden.

- With its universal and targeted benefits, the Finnish welfare state has provided a buffer that has cushioned the most drastic impacts of economic crises.
- When considering post-pandemic social policy, we should specifically set our sights on the situation of society's most vulnerable people.
- There is a risk that the groups hit hardest by the previous crises will again be caught in the worst of the storm and bear the brunt of the burden.

Measures to support people's wellbeing and the economy

In its final report, the working group appointed to address inequality issues divided welfare state measures into three main groups: safeguarding, restoring and saving measures. The measures included in the first group create conditions for people to lead independent lives on their own terms. Society and its policies (such as family, education, employment, social, health, equality, housing and environmental policies) provide a springboard off which to jump.

The history of the Finnish welfare society offers an example of how a poor and backward country blossomed into one of the most advanced welfare societies and pioneers on the path towards gender equality.

This evolution has been predominated by a virtuous cycle between the public sector, civil society and human wellbeing that could, in retrospect, be characterised in terms of an economy of wellbeing. This has been premised on a positive, mutually reinforcing relationship between the economy and wellbeing. Social investments in people, their wellbeing and functioning are essential and create conditions for economic investments and the functioning of the economy. Gender equality is also a key part of a sustainable economy and economic policy.

Restoring measures are related to mitigating the consequences of various social risks, including illness, unemployment, inability to work and old age. Restoring measures consist of social transfers and services. Social transfers to make up for the loss in income as well as health and rehabilitation services are available in the event of illness or accident, for example. The aim is to secure the income of individuals and their families for the period of income loss and restore their ability to work. Unemploy-

ment benefits and other forms of social insurance also work in a corresponding manner. These measures highlight the special nature of the Finnish welfare state. Firstly, we have residence-based basic social security built on national insurance, which is universal in principle and aims to guarantee a decent income for everyone. Secondly, we have earnings-related security built on the tradition of labour insurance to compensate for losses of earnings.

Saving measures are specifically targeted at vulnerable groups. Where restoring measures are distinctly related to social risks, saving measures – generally consisting of different forms of social assistance and social work – focus on clients with several intersecting risks. Providing them with support therefore requires collaboration between several different sectors. Moreover, formal social security – the welfare state – is often not enough for these people. This calls for a welfare society in which NGOs, the private sector and local communities play their own role in addition to formal assistance schemes.

International comparisons of social policies have revealed a 'paradox of redistribution'; countries that have specifically set out to help the poor, expressly directing social security at society's disadvantaged groups, have not been as successful in preventing poverty as countries providing universal benefits. Means-tested systems divide people into payers and beneficiaries, 'us' and 'them'. People in the 'us' category are not always willing to cover benefits for those seen as 'them'. This is why there are efforts to minimise benefits. On their own, poverty policies produce poor results. The universality of services and risk-based social transfers maintains citizens' willingness to pay. Furthermore, public services (especially elderly services and early childhood education and care) play a significant role in terms of gender equality. When everyone can feel that they are also beneficiaries – net payers in one and net beneficiaries in another stage of their lives – they can find the system fair and reliable.

Analysis of the Finnish welfare model and its outcomes also shows that a universal system will always need to be supplemented with targeted measures and positive action, in order to even out differences in people's circumstances and, consequently, to promote de facto equality. In order to bring about equal opportunities, equity and equality, some people require more or different services and support than others.

Reducing inequalities and preventing growth in wellbeing differences are beneficial in both ethical and economic terms. Everyone wins in an equal society. Increasing inequalities undermine social cohesion and trust in society, its institutions and fellow citizens. Inequality chips away at the foundation of the welfare society. As a challenge, inequality can be placed on a par with demographic change, global economic and technological transformation, or a change in values that overemphasises individualism and marketisation.

A welfare state is built on trust. Institutions – whether the justice system, police, social security or political system – must operate such that people can trust them. Today's young people need to be able to trust in the intergenerational contract that future generations will also finance elderly services and pensions when their own generation needs them. Deterioration of this trust is conducive to switching the focus from shared safety nets to individual contingency plans. International comparisons show that Finland is a high-trust country. Similar to other Nordic people, Finns trust each other and societal institutions and their fair and just operation to a larger extent than those living elsewhere within the European Union. The Nordic system works very well on this dimension as well.

However, the situation is sensitive to change. Social systems need to renew and earn their legitimacy through their daily operations. Changes in conditions also require changes in societal institutions. The current pandemic represents a change in conditions of the highest order. The history of Finland demonstrates that Finnish society has been capable of adapting to and overcoming exceptional circumstances. In the recovery from the current pandemic, the universal benefits of the welfare state, enhanced with targeted and means-tested benefits, will provide a basis for supporting individuals and families to overcome the crisis. Effective public services play a significant role. A successful crisis policy calls for collaboration between the public and private sectors, NGOs and civil society.

Only a society with sufficient social coherence can be economically sustainable. Coherence lays the groundwork for brisk economic activity. At the same time, a strong economy creates the conditions for financing welfare policies and improving the quality of life.

- There has been a virtuous cycle between the public sector, civil society and human wellbeing that can be characterised in terms of an economy of wellbeing. This has been premised on a positive, mutually reinforcing relationship between the economy and wellbeing. Social investments in people, their wellbeing and functioning are essential and create conditions for economic investments and the functioning of the economy. Gender equality is also a key part of a sustainable economy and economic policy.
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Social investments

The European Union's social policy programmes make frequent references to social investments. Social investments refer to the need to shift from compensatory allowances for harm caused by risks such as unemployment or disability to a policy that predicts and prevents social risks. This is accomplished by investing in people; investing in early childhood education and care, education and training, and various health, social and employment services, which support people's capabilities and independent living. The EU approach is premised on the idea of shifting from the Central European model of a transfer-oriented welfare state towards a Nordic social services model. In other words, the programme focus has been on various services. Social transfers naturally play their own important role.

We need adequate social transfers and various preventive, wellbeing-promoting and restorative services. All of the above are critical in a crisis. While most of those requiring assistance can be helped with money, some cannot. In many cases, the most vulnerable people will also require a great deal of services on top of money.

Some temporary changes and flexibilities have already been introduced into income security, in order to secure people's income in a new kind of crisis situation. The ability of the social security system to respond to the circumstances of both vulnerable people and those requiring temporary income security is a key instrument in managing the social impacts of the crisis. The Government has appointed a parliamentary committee to prepare a reform of social security with a view to creating a more effective social security system that is clearer for people. The goal of the reform is that future social security will offer a timely, adequate and comprehensible range of social transfers and services.

The social policy programmes of all political parties refer to simplifying social security and combining the fragmented basic social security benefits. There seems to be a broad political consensus on this point. There is also considerable unanimity on better integration of basic social security benefits and services. Indeed, one of the key objectives of the reform is improved and timely integration of cash benefits and services. Vulnerable people tend to have several intersecting challenges, which require an integrated approach. Solving a single challenge will not necessarily bring great relief if the rest of the challenges remain unchanged. Simply becoming sober will not help a

homeless alcoholic with mental health issues if no housing and health services are available at the same time. Challenges feed and reinforce each other. This is why they need to be solved simultaneously.

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Intergenerational justice

A sustainable welfare policy is built on a reliable intergenerational contract. Reliability means that people from different generations must feel that there is a fair relationship between contributions and benefits covered by these. Ideally, the contributions and benefits included in a universal social policy model are in balance. Everyone contributes and everyone can also count on receiving something in return for their contributions. In principle, this is how a social insurance system works. We pay social insurance contributions to have financial security in the event that a risk becomes reality and our earnings dry up for one reason or another. This is known as 'horizontal income distribution', where resources are transferred within an individual's life cycle.

Social policy is not just about shifting money from an individual's pocket to another. All societies also implement vertical income distribution: from the strong to the weak, from the healthy to the sick, from the wealthy to the poor, from the economically active age groups to children and the elderly. Without such vertical equalisation, no society could function or survive, regardless of the type of system in place. While vertical redistribution is universal, its form and extent vary by time and place.

Demographic changes challenge the old intergenerational contract. A similar trend can be found in all countries: large age groups are succeeded by smaller ones. These shrinking age groups must look after their own social security through horizontal distribution, on the one hand, while also ensuring society's continuity by providing for the next generation, on the other.

Finland's demographic makeup is increasingly skewed towards the elderly, which is why it is essential to promote older people's health and functioning. This allows us to curb the growth in health and care costs in an ethically and socially sustainable manner. This is all the more vital due to the coronavirus crisis. Special attention must be paid to regions with the highest relative proportions of older people.

In order to overcome the coronavirus crisis, the distribution of costs arising from crisis management will need to be just and fair. Accordingly, upholding the fair intergenerational contract entails ensuring that no generation is saddled with an unreasonable burden.

- In the spirit of vertical distribution of income and costs, we must see to it
 that costs are not unreasonably imposed on those whose capacity to
 bear them is poor to begin with.
- In order to overcome the crisis, the distribution of costs arising from crisis management will need to be just and fair. Accordingly, upholding the fair intergenerational contract entails ensuring that no generation is saddled with an unreasonable burden.

5 The key role of civil society

A vibrant and diverse civil society has played an influential role in the creation of the Finnish welfare society, while also being the result of the welfare society. Civil society is made up of a variety of parties, including NGOs, other non-profit associations and religious communities, as well as spontaneous local or thematic short-term groups of civil society activists, which are largely self-directed.

NGOs and parishes complement welfare services and fill the gaps in welfare services that public services do not reach. A welfare society is a trust-based society, where active citizens play an important role in strengthening opportunities to influence through democratic participation and involvement in decision-making processes.

Finland has a rich civil society. The Register of Associations contains 120,000 organisations, 70,000 of which are active. There are also 30,000 unregistered organisations. NGO-driven assistance includes guidance, counselling and debriefing provided by NGO employees for their respective target groups and members. Most of these organisations provide voluntary and peer support for various needs, which is given by voluntary workers with support from professionals. Many organisations also provide services and activities for areas or people not covered by any other party.

The activities and services provided by spontaneous community help groups have increased significantly during the coronavirus crisis, especially strengthening community spirit.

During restrictive measures, the role of civil society actors is to offer a platform for meaningful activities for all interested individuals as well as peer support and activities. This helps in practical situations, maintains social relationships and strengthens people's faith in the future and their involvement in making decisions concerning them.

While NGOs have also quickly moved their services to the digital world, they have sought ways of reaching individuals outside digital services as well. Food aid and errand-running services have become particularly important ways to help and meet those in need of help. Organisations have also seen an increase in contacts with their guidance and counselling services. At the same time, these are among the activities where the private sector has pitched in to support civil society actors at both national and local levels.

As the epidemic goes on, civil society actors play an increasingly significant role in collecting and communicating information. The local and direct nature of their activities produces information from people and on issues that official data collection efforts fail to reach. NGOs seek out and represent individuals at risk of slipping through the cracks of the formal service system and give voice to those who often remain voiceless.

Services and activities have moved online and are being organised on various digital platforms. Since these are not accessible to everyone, some are excluded from them, including some older people and individuals with disabilities, for example. This creates a longing for face-to-face interactions and traditional phone services or activities (such as the 'phone circle' of the Finnish Federation of the Visually Impaired). As a result, organisations have introduced the concept of 'social debt' arising from the fact that some of those in need of help are excluded from all forms of support. Once restrictions are dismantled, it will be necessary to strengthen the forms of cooperation created during the crisis in order to also reach previously overlooked individuals in need of help.

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Cooperation between local authorities and NGOs

The operating models created by NGOs and other civil society actors are also being adopted as part of municipal operations. This shows the ability of civil society actors to listen to their membership's needs and work with them to develop effective solutions. This has also been highlighted during the coronavirus crisis, intensifying cooperation between NGOs and local authorities in different parts of Finland. If a municipality already had effective structures in place for cooperation with organisations, this has been an evident advantage in the rapidly progressing coronavirus epidemic.

NGOs and parishes have also offered numerous structures for voluntary activities, which have allowed people to find the ways to help that suit them best. These voluntary networks, in turn, have provided support for local authorities when they have decided to increase personal contacts with municipal residents to find out about their situations and support needs.

It is important to listen to the views and experiences of civil society actors at the earliest possible stage of planning and preparing decisions for the recovery phase. In terms of recovery from the coronavirus crisis, it is important to agree on the forms and structures of cooperation between public bodies and organisations representing different groups.

Cooperation methods can be established as permanent operating models, which may ideally have a positive influence on the operations of all the parties involved. Now would also be a good time to take stock of the most effective ways of cooperation between different municipal sectors and NGOs.

In addition to health and social sector organisations, numerous cultural and sports organisations and other NGOs offer activities that shore up the capacity of individuals and communities to survive during and after the crisis. Organisations create diverse social community engagement, allowing many people to forge contacts with other people, especially during life's crises. As public authorities have concentrated on organising and coordinating their own operations during the coronavirus crisis, they may have failed to draw on the support provided by active citizens.

In the post-crisis recovery phase, it will be important to include the expertise, networks and services offered by civil society actors to complement official operations, especially at municipal and regional levels, without neglecting the national level.

NGOs play an important role in prevention, communications, alleviation of loneliness, guidance and counselling, as well as referral to professional services. Civic activities provide opportunities to engage those in need of help in planning, implementing and evaluating activities. While this is sensible use of resources, organisations and local actors also help reach individuals in need of help who would otherwise be left in the margins. Civic activities bring to the fore the needs of people who are overlooked by or excluded from public services.

In order to ensure access to services and support, it is particularly important for local authorities to recognise third-sector activities that complement public services. Restoring the operating conditions of organisations functioning as service providers requires

supporting their operations in the same way as those of private enterprises, in order to cover the financial losses arising from the coronavirus crisis.

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Enabling activities

The coronavirus epidemic has made life more difficult for many groups. NGOs and other civil society actors are in a position to help people overcome their difficulties and provide opportunities to engage in meaningful activities.

Ensuring the vitality and operating conditions of civil society requires securing the financial conditions for NGOs as part of society's coronavirus exit strategy.

NGO activities have been affected by the strict interpretation of the European Union's competition rules, particularly in terms of services intended for people with disabilities and older people. Decisions have led to deteriorating services, as the lowest cost has been considered decisive in competitive tendering procedures. Strict interpretations have resulted in a situation where NGO services disappear because they lose competitive tendering procedures or incorporate their services. NGOs cannot provide services without public funding. They also lack the resources to participate in laborious competitive tendering procedures. Direct-award procedures could be applied to NGO services in areas lacking genuine markets. It would be important to take services provided by NGOs into account in competitive tendering procedures and place special emphasis on consulting service recipients as one of the quality criteria used to assess tenders.

 Ensuring the vitality and operating conditions of civil society requires securing the financial conditions for NGOs as part of society's coronavirus exit strategy.

6 Local social environments and people's everyday lives thrown into turmoil

The coronavirus pandemic and restrictive measures have affected everyone's social relationships, daily routines and the fabric of everyday life. One of the visible changes is the disintegration of working and academic communities into more socially detached groups of remote workspaces. As a result of daycare centres and schools closing down, a key share of public welfare services have been passed on to homes as unpaid work. The private and public spheres of life have converged in new ways.

The most dramatic effects of workplace closures have been borne by those who have lost their jobs and incomes. Several interactions disappeared as travel bans and recommendations to avoid public transport entered into force at the same time as public, private and third-sector cultural and sports services were suspended and restaurants and cafés closed down. These effects have upset the lives of those outside employment and education the most. The bans, recommendations and guidelines to contain the pandemic have aimed at physical distancing, which has led to a virtual collapse of the amount of time that people are spending together.

Restrictive measures have changed the social customs at the beginning and end of life. The partner's presence during delivery has not been as self-evident as before; children's christening and naming ceremonies as well as birthdays have been celebrated in very limited family gatherings; and grandparents have not been able to meet their newborn or even older grandchildren. Spring graduation ceremonies have been postponed. Hospices have allowed close family and friends to spend time with their dying loved ones, whereas care home residents may have passed away without their loved ones being able to say goodbye and see them through their final moments. Bans on visiting care homes were in place for two months. Memorial gatherings have been postponed and only a handful of loved ones have been allowed to attend funeral services. The sudden disruption of these transitional life events deeply ingrained in our culture will probably linger on as one of the most enduring memories of the coronavirus epidemic.

The changes have put people in a variety of tight spots in terms of coping with work and daily routines, which will resonate well into the future. The rapid increase in care work in families has intensified the uneven distribution of care and housework such that mothers, who tend to be more 'flexible' and earn less, have been saddled with

more responsibility for taking care of their children's daily routines – on top of their own work.

Coping with both work and care duties without support from schools, daycare centres or loved ones has been particularly trying for single parents. The situation has also been difficult for the children of single parents who have spent a lot of time on their own at home because their parents have been working. Besides putting a strain on individuals and intimate relationships, the increasingly uneven distribution of care duties should be analysed in light of its effects on women's employment and career advancement. The effects can also be positive in families where fathers have taken on more responsibility due to the mother's essential work, for example.

Restrictive measures changed the lives of informal carers of family members, as many support services were suspended without any transition period. Most informal carers are women and more than half are aged over 65. They have now been on hand to assist and care for their loved ones 24 hours a day for almost two months. Many informal carers had been short of support services to begin with and had not been able to take days off due to this situation. Likewise, many informal carers experienced social isolation and financial difficulties. The majority of those regularly caring for loved ones living in another household are also women. Limited services have considerably increased their workloads in a situation where restrictions concerning over 70-year-olds are also in place. In families with children with disabilities, some parents have been forced to take time off work because of the need to deal with their children's distance education and other daily routines.

Young people have also experienced special worry and anxiety in their everyday lives, while dwindling friendships and difficulties maintaining contacts with friends have affected their ability to cope and deal with daily life. The number of young unemployed people has increased from 30,000 to 40,000 as a result of the coronavirus crisis. Due to the situation, young people have especially poor employment opportunities, including summer jobs. Family problems also reflect in young people. Mental health problems have increased. Youth work has moved online via remote connections and some municipal employees have been temporarily laid off, even as demand for support has increased. At the same time, reduced stress and bullying at school have had positive effects on some young people's everyday lives.

Many students living on a very limited budget lost access to subsidised meals. At the same time, many other affordable and subsidised lunch places were closed and access to school meals was restricted. Free meal delivery services were also suspended across Finland. Those on the lowest incomes may have seen increasing food costs during the coronavirus pandemic. Consumption statistics have shown a substantial increase in sales of affordable foods, such as flour and pasta, while sales of

sweets and soft drinks have also tripled. The daily number of eating times has grown. It is fair to assume that the coronavirus restrictions have indirectly increased the risk of poor nutrition and dental issues among low-income groups.

The spread of coronavirus infections in communities of people from immigrant backgrounds, for example, is driven by pre-crisis inequalities: overcrowded living conditions, inadequate access to information and low labour-market status may have exposed people to the virus. The increase in racism and prejudices in society resulting from exposure has a deep impact on racialised people's everyday lives. By way of example, fear of discrimination may raise the threshold to access services among long-term low-income people and those from minority groups. Various financial, physical, social or knowledge- or skills-based barriers may create de facto thresholds for access to services.

Domestic and intimate partner violence was already relatively common in Finland before the crisis. Financial distress, stress and increasing substance use, combined with social isolation and quarantine measures, may further increase the risk for domestic violence. Police have seen an increase in domestic calls, even as violence against both children and women can easily remain hidden, and it is unclear as to the extent to which the assistance system has been able to meet the needs in situations where leaving home is difficult and the perpetrator of violence is constantly present. Home is not a safe place for everyone and this is why it is particularly important to ensure that help and support services are also available for victims of domestic violence under emergency conditions. In relative terms, women with disabilities experience higher rates of both physical and emotional abuse at the same time as accessibility in shelters is still poor and services are not available via multiple channels. Victims of human trafficking are in a particularly vulnerable situation.

The crisis has increased people's willingness to help in everyday life. Civil society and NGOs, parishes and local authorities have assumed an active role in relation to older people, in particular; many local authorities have gauged their situations while maintaining active contact with and organising help for them. These efforts are no longer just about providing services but also about supporting social relationships, which may effectively prevent social support networks from crumbling due to isolation.

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Impact assessment and measures

Because spending time with other people and a sense of togetherness are vital for health and wellbeing, the measures taken during and after the coronavirus crisis must be assessed in relation to both individuals and social and societal structures.

The impacts of the exceptional situation have not been evenly distributed among the population, which is why it is important to focus attention on those whose wellbeing the pandemic has affected the most. At the same time, it is necessary to assess which measures would provide the fastest way for removing restrictions to increase wellbeing without major health risks. Impacts on equality, equity and different age groups play a key role in this assessment.

The coronavirus is most dangerous to older people and the frailest of them face the highest risk of death. They have therefore faced more restrictions on their everyday and social lives than others, while their dependence on help from other people has increased and their means to keep functioning through to an old age have decreased. The exceptionally high proportion of older people in the population will further underline the importance of their functioning and participation opportunities to the functioning of society at large. Older adults also contribute significantly to voluntary activities and helping both older and younger family members. The variety of human and societal impacts of the changes experienced by older people must be taken into account when making decisions on measures to remove restrictions at national and regional levels.

There are established practices for assessing gender impacts, which should be put into full use. During the previous financial crisis, the gender impact assessment of stimulus and austerity measures was omitted at both national and European levels, resulting in far-reaching consequences.

In addition to assessing the gender impacts of general societal and political measures, the above-mentioned gender inequalities can be addressed by placing promotion of gender equality front and centre in legislative and programming work. Gender equality will increase social cohesion and togetherness. Aspects important in terms of fulfilment of fundamental rights include effective prohibitions on pay, pregnancy and family-leave discrimination, narrowing the gender pay gap and increasing pay openness and awareness. Efforts should be made to dismantle the gender-based division of work in education and employment, as well as to reconcile work and family life. Dismantling the traditional division of work will also have employment effects.

In recent years, Finland has increased resources for shelters, for example, but the level of service provision is still inadequate. It is necessary to considerably increase resources available to local authorities and NGOs to make it possible to meet the growth in demand due to coronavirus crisis. During the crisis, it is imperative to consider how to reach victims of violence and to ensure that they receive services in a situation where it is difficult to contact services and leave home. Services should also be arranged so as to ensure their coverage and reach of all victims of violence, including people with disabilities and those from immigrant backgrounds.

The coronavirus crisis should not halt social reforms aiming at de facto fulfilment of equality and equity. Quite the contrary, strengthening gender equality and human rights is particularly important in this situation. It is imperative to take forward the reforms concerning gender equality, such as reforms of family leave and the Transgender Act (Act 563/2002 on legal recognition of the gender of transsexuals).

Immigrants with disabilities are in a vulnerable situation as a double minority. Close cooperation between immigrant and disability services and with NGOs will help them overcome the coronavirus crisis. Access to communications in foreign languages spoken in Finland is essential in terms of immigrants with disabilities. Communications should also take into account the fact that some immigrants with disabilities are illiterate.

From the perspective of equity, key aspects include the situations of people with disabilities and services provided for them, as well as due consideration for the special status of ethnic minorities and their service needs and access. Achieving equity in services calls for competence in designing services, communicating about them and operating at the client interface. It is also important that people from different population groups (such as immigrants) are not only referred to special services intended for them, but that they also receive all the support and services available for everyone. Particularly vulnerable groups, such as undocumented people and victims of human trafficking, must be taken into account.

Children with disabilities and their families had trouble coping even before the coronavirus crisis. The situation has now come to a head, which means that support and services provided for families with children with disabilities will require special attention. The key aspects include education and health and social services and looking at the family situation as a whole.

Strengthening young people's wellbeing must be placed front and centre in post-crisis measures. Young people and the parties representing them must be consulted in preparatory work and civil society and experts must be engaged in the preparation of measures. In order to overcome the coronavirus crisis, it is necessary to create measures for young adults aged 18 to 28, who are at a stage of life that, according to many wellbeing indicators, involves special financial, mental and social uncertainties. Preventing young adults' social exclusion is essential in both economic and human terms.

Based on previous crises, we know that they have a special impact on young age groups whose income level, social wellbeing and, consequently, social inclusion may remain permanently below those of others. Support for young people does not only cover income, learning pathways equally open (free of charge) to everyone, and providing employers with special support for employing young people starting out on their own, but also psychosocial support and networks that promote everyday life skills and inclusion in both local communities and society at large.

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7 Mental wellbeing put to the test

Despite welfare policies that have been successful in many respects, there are major differences in Finland between population groups in terms of health and wellbeing. These differences are related to people's backgrounds, financial status, social contacts, living conditions and lifestyles and, to some extent, problem areas in the service system. A perceived poor quality of life goes hand in hand with psychological strain. Particularly high levels of psychological strain can be found among young women, people aged over 80 and less well-educated people. They also experience the most loneliness. Various forms of disadvantage tend to accumulate for the same individuals. In many cases, unemployed people's financial problems are linked to issues with health and wellbeing.

While the coronavirus epidemic has put a strain on all Finns, its effects are falling on mental landscapes shaded in different hues to begin with.

The epidemic itself has had highly uneven effects on people's everyday lives, work and income, depending on age, family circumstances, occupation or region. Finns are being strained by restrictions on movement, losses of jobs and livelihoods, increasing care duties and concerns about falling ill, for their loved ones, for professionals working on the frontlines of crisis management and about their own financial security. Uncertainty about the severity of the epidemic and the duration of the resulting economic crisis, evidence of the capacity of systems to function under abnormal conditions and help provided by the local community have a bearing on people's perceived security and ability to withstand psychological pressures arising from the crisis situation.

Good psychological resilience will promote recovery from the crisis itself. Continuous monitoring of the population's moods, concerns and behaviours will therefore play a role. Very little information is as yet available on special groups, such as informal carers and their patients, homeless people and particularly low-income people, clients of child welfare and disability services, as well as clients of home care and 24-hour care services. A survey conducted by the Finnish Federation of the Visually Impaired on the effects of the coronavirus crisis on life showed that the crisis had stirred a large number of emotions, such as loneliness, insecurity, fear, confusion, uncertainty, despair and a general sense of futility. Respondents also described being cooped up indoors as oppressive.

The Church Research Institute and the Finnish Institute for Health and Welfare (THL) have carried out surveys to explore the mental and wellbeing-related effects of the coronavirus crisis. They show that respondents' most pressing concerns in the situation in early April were related to their own or a loved one's health and income. In late

April and early May, people were still concerned about and afraid of the coronavirus situation, but to a lesser extent than before, while its effects on their psychological wellbeing were not as severe as feared. The most pressing concerns involved the social impact of the coronavirus situation, such as economic recession, the situation of small enterprises, and increasing social and mental health issues. These and corresponding issues were now of higher concern for people than the chance of themselves or their loved ones being infected, although the weight given to different concerns varied by age group.

The Church Research Institute's survey indicated that women were more strained than men. The number of concerns was highest among single parents and people aged under 30 and lowest among those aged over 70. The THL survey did not include over 70-year-olds at all.

People aged over 70 have been affected the most by social restrictions. It is likely that the surveys do not capture the full picture of the situation among older people. Isolation and unfamiliar practices have taken a heavy toll on those receiving home care or living in care homes, who often have severe memory disorders. Based on assessments provided by local authorities and parishes, older people living at home were troubled by daily life management and lack of social contacts, while also being deeply concerned about the situation of family members living in care homes. Restrictive measures will also likely apply to older people for a longer period of time than to others, while the baseline situation was already poor for many to begin with. Demand pressure for rehabilitation, support for functioning, home and informal care as well as 24-hour care will grow and we need to be prepared for this.

It is advisable to pay special attention to the strain experienced by people aged under 30 due to loneliness and dropping out of education and employment, to avoid issues coinciding with life transition points coming to a head during the crisis. Even under normal circumstances, girls experience higher levels of anxiety than boys. At the same time, girls have more resources to promote mental health – i.e. they have better positive mental health. Events during adolescence become key experiences that shape the course of life. Ensuring a smooth transition into adulthood and independent living and strengthening mental health skills are therefore important for the future.

The exceptional nature of the epidemic and the resulting economic effects will also shake up the sense of security among those who previously trusted their ability to manage. Massive temporary lay-offs, debt, risk of bankruptcy and business closures create fears of failure when compared with people's own reference group or what they are accustomed to. Many older people are troubled by physical separation from family

members, change in daily routines as guided exercise and hobby groups are suspended, or the idea of loved ones living in care homes passing away without the presence of family members.

Single parents are weighed down by responsibility for their children and concerns about their health and income, now that even normal support networks are fraying at the edges. Experiences of concerns are gendered to some extent. The higher levels of concerns among women can probably be attributed to facts such as feeling more responsibility for family and relatives and working in services that are being heavily hit by the coronavirus. There is a more long-term underlying trend in increasing problems with coping among women. Work is especially perceived to be busier and harder in the female-dominated municipal sector. The Quality of Work Life Survey suggests that psychological symptoms have increased among women aged under 45. It is important to invest in support for wellbeing at work, working conditions and work arrangements in these occupational sectors. Beyond other types of work-related strain, professionals working in care homes and home care services for elderly people also recognise anxiety and loneliness in elderly people living in isolation, which is why many experience ethical strain and a sense of inadequacy in their work.

The picture about the population's moderate levels of psychological wellbeing is overshadowed by professional assessments about the situations of many vulnerable groups. There seems to be some pent-up demand for both child welfare services and mental health and substance abuse services. It is advisable to pay urgent attention to ensuring sufficient help and bringing the volumes of basic services to pre-crisis levels, even despite the fact that local authorities responsible for organising the services are in a weak financial position.

Once restrictive measures are lifted, service demand will grow and services may be overwhelmed. The closure of low-threshold places during the crisis has obscured some of those in need of help. Reaching these people to bring them to services will require special outreach work. Filling in the gap in healthcare and social welfare services due to the coronavirus crisis runs the risk of people with disabilities and other smaller groups being sidelined in the process and deprived of the services that they require. It is advisable to devise a strategy to manage this service deficit created during the emergency situation.

Good psychological resilience will promote recovery from the crisis itself.
 Continuous monitoring of the population's moods, concerns and behaviours will therefore play a role. Very little information is as yet available on special groups, such as informal carers and their patients, homeless people and particularly low-income people, clients of child welfare and

- disability services, as well as clients of home care and 24-hour care services.
- It is advisable to pay urgent attention to ensuring sufficient help and bringing the volumes of basic services to pre-crisis levels, even despite the fact that local authorities responsible for organising the services are in a weak financial position.

Measures and procedures

The Ministry of Social Affairs and Health has opened several funding application procedures aimed at anti-coronavirus measures and ensuring the psychosocial wellbeing of particularly vulnerable groups, including purposes such as implementing the National Mental Health Strategy and Suicide Prevention Programme and for the Funding Centre for Social Welfare and Health Organisations (STEA) and the European Social Fund. Alongside mental health services, it is important to promote all forms of non-discrimination and right to self-determination, as well as proactive efforts to build up mental health skills throughout the course of people's lives.

The time of crisis has also brought to the surface plenty of positive experiences of readiness to help, not only by loved ones, but also in the form of errand-running services, conversational help or food aid organised by various NGOs and parishes. NGOs and parishes are key partners for local authorities, providing peer support and organising voluntary activities for people recovering from mental health problems. A strong civil society is a source and guarantee of wellbeing for many.

Trust in other people, people's willingness to help and getting help when required builds up psychological resilience to crisis. At the same time, a coherent, high-trust society is a key prerequisite for socially and economically sustainable growth. The extent to which a new kind of collaborative engagement takes root, and the way in which it will provide people with experiences of building the common good and having a chance to make themselves useful – to be needed – will play a significant role moving forward.

The new kinds of procedures created in times of crisis teach people to question conventional wisdom and identify solutions to promote wellbeing based on peer groups and co-creation. It would be astute to invest in research-based evaluation of new operating models to ensure future opportunities to disseminate the most effective ones for more widespread use. The operating models already considered effective should be put to use more systematically.

Active provision of timely and correct information for citizens plays an essential role under crisis conditions. Open, clear and accessible communications will create faith in

our ability to overcome this too. Guidelines for dealing with concerns and using digital self-help services are conducive to promoting perceived wellbeing. Our debate needs the voices of those most heavily burdened by the crisis, but it also requires reinforcing messages. Examples of successful solutions and individual experiences can be encouraging. There is strength in stories.

- Investments must be made in research-based evaluation of new operating models for promoting wellbeing to ensure future opportunities to disseminate the most effective ones for more widespread use. The operating models already considered effective should be put to use more systematically.
- Active provision of timely and correct information for citizens plays an essential role under crisis conditions.

8 Division on the labour market

In Finland, the coronavirus crisis was preceded by a positive trend in employment sustained over several years. The crisis caused by the pandemic and its effects on business operations, however, brought employment growth to a halt as the number of temporarily laid off people surged in March and April this year. As employment opportunities deteriorated, securing household incomes and business continuity became the number one priority. In the longer term, it will be essential to ensure employment recovery and prevent growth in long-term unemployment. This calls for extensive investment in employment policy.

The coronavirus crisis should not halt social reforms aiming at de facto fulfilment of employment, wellbeing, equality and equity. It is important to continue the ongoing measures under the Government Programme. These include a working capacity programme, municipal employment experiments and a development programme for future health and social services centres, as well as related trials and projects. The need for these measures has increased as a result of the coronavirus crisis.

The coronavirus crisis and the subsequent economic recession that it will likely cause run the risk of polarising the labour market, further exacerbating the situation of people in a difficult labour market position. Moreover, many people see their personal social support structures shrinking or even disappearing as social interactions are limited.

On average, unemployed people have more health problems than those in employment. As the service system has been forced to limit face-to-face services and citizens are underusing services that are still open due to fear of infection, many will go without sufficient immediate support for their unemployment problems or health and wellbeing issues. The shift to digital services has failed to meet the demand. Digital services remain inaccessible to many people due to a lack of digital devices or gaps in skills required to use these. This may lead to a situation where an increasing proportion of working-age people become excluded from the labour market for long periods, or even permanently.

- The crisis will potentially increase polarisation on the labour market.
 Health and wellbeing issues will become concrete due to the inadequate level of services relative to demand. Digital services do not reach everyone.
- It is also imperative to identify unemployed individuals whose health status means that they can no longer be rehabilitated to join the open labour market. This need is more and more pressing because demand for

employment services has also increased in other respects during the coronavirus crisis, overwhelming the services.

Impact on different groups

In economic recessions, particularly high-risk groups have traditionally included young people, older workers, immigrants, people with disabilities and those with partial work ability. The current coronavirus pandemic does not change the state of affairs in this respect. The coronavirus crisis has significantly reduced the net turnover of many businesses, consequently limiting their ability to employ people and maintain employment relationships. Many businesses have seen their traditional customers disappear while some of their supply and production chains have broken down.

Unlike previous economic crises and recessions, this crisis has especially affected female-dominated service sectors. In particular, its impact on female-dominated tourism and restaurant sectors was immediate and near total. As the crisis persists, there is a risk of its effects spilling over to other sectors as well. The service sector is a significant employer for special groups. The collapse in demand experienced in several sectors especially affects self-employed people as well. In addition to those who have lost their jobs, the crisis will badly hamper new graduates' access to the labour market and young people's opportunities to build up their working life skills as the numbers of traineeships and summer jobs decline.

 In the coronavirus pandemic, high-risk groups also include women and self-employed people alongside young and older people, immigrants, long-term unemployed people, and those with disabilities and partial work ability.

The effects of the coronavirus pandemic have increased strain at work in some sectors. This has been the case in elderly services and other health and care services, for example. We must urgently identify solutions to the additional strain on employees to retain the quality of services and prevent labour shortages from increasing even higher than today in these critical sectors of society.

The employment rate of people with disabilities has been rising, but the coronavirus crisis has resulted in a downward turn. Attitudes towards people with disabilities have also shown signs of hardening. The coronavirus crisis has exacerbated workplace discrimination, discriminatory practices and inappropriate treatment that people with disabilities were already experiencing before in the world of work.

It is possible to increase inclusion on the labour market through stimulus measures. A recession may have far-reaching effects on the employment rate of people with disabilities. Stimulus measures must therefore focus on raising their employment rate and improving the status of entrepreneurs with disabilities.

As a result of the coronavirus crisis, young people are having difficulty finding summer jobs and landing the first job after graduation. This is especially difficult for young people with disabilities. For them, service needs assessment and coordination play a particularly important role. This calls for cooperation between disability organisations and One-Stop Guidance Centres. The key to successful measures targeting people with disabilities is cooperation with disability organisations at all levels.

 Stimulus measures must focus on raising the employment rate of people with disabilities and improving the status of entrepreneurs with disabilities in cooperation with disability organisations.

During the coronavirus crisis, unemployment and temporary lay-offs have affected young women to an exceptional extent. The Social Insurance Institution of Finland (Kela) has especially received unemployment benefits applications from young, less well-educated women aged 20 to 24. Young women's weaker status during the coronavirus crisis can be attributed to the fact that restrictions focused on female-dominated service sectors.

Consequently, the coronavirus crisis highlights many problem areas of gender equality: the gendered labour market, where women's work is concentrated in the lower-paid public sector and in the private service sector, which also have less favourable terms and conditions of employment and working conditions. Care is divided according to gender: mothers use most of the family and childcare leave periods not specifically earmarked for fathers. Long stretches at home affect young women's employment, career development and pay and pension levels. Discrimination on grounds of pregnancy and family leave is still common.

- It is crucial to safeguard care services and early childhood education and care, which play a significant role in terms of gender equality.
- Stimulus measures must be directed at female-dominated sectors and social infrastructure. It is crucial to avoid focusing austerity measures on female-dominated and stimulus measures on male-dominated sectors.
 The business subsidies granted during the coronavirus crisis should be evenly distributed across female- and male-dominated sectors.

The short-term objectives in the crisis response must be to keep temporary lay-off periods as short as possible and avoid unnecessary redundancies. However, the employment, economic and industrial policy measures designed to address the acute stage of the crisis must not jeopardise long-term objectives. As the crisis may undermine Finland's fiscal balance for quite some time, ensuring the sustainability of general government finances will continue to necessitate the highest possible rate of employment. This will require improving employment rates among the above-mentioned special groups. Short-term crisis and stimulus measures and more long-term measures to support growth and employment should therefore be in alignment.

As part of acute crisis measures and more long-term measures to support growth and employment, it is necessary to ensure the right of special groups to work by fortifying active labour market policies and by securing adequate and timely employment and rehabilitation services and processes that meet the demand.

Digitalisation and continuous learning

Stimulus measures do not only allow boosting growth but also inclusive labour markets. Economic recovery and changes in consumer behaviour due to the epidemic require businesses to find new products and customers. Businesses are increasingly generating their value added through digital services in particular. The exceptional circumstances have already strengthened the digital leap forward in many sectors. The platform economy provides several applications that open up employment opportunities for many special groups. A springboard for making use of the platform economy promoted by the public sector is the Job Market Finland service provided by employment and economic development administration at Työmarkkinatori.fi, which helps match jobseekers with open job opportunities in the private and public sectors.

 Measures to strengthen the digitalisation of service provision should take into account the opportunities to find employment for jobseekers from special groups in particular.

The crisis will change the skills profiles required on the labour market, as businesses develop new kinds of operations to respond to the situation during and after the crisis. Skills will therefore become obsolete at a significantly faster rate when compared with the pre-crisis situation. In Finland, a significant part of the labour force have only completed compulsory schooling. This is especially common among certain special groups. Skills acquisition can be simplified from the client perspective by means such as education vouchers. This would also be likely to increase educational provision.

- Measures to consolidate new skills required in the world of work must ensure access for special groups and accommodate their special needs.
- Employment-promoting education and training solutions are also required for those with a low level of educational attainment.

Efforts must be made to improve the labour-market position of special groups through measures organised in multi-sectoral cooperation. Other essential measures include those aiming to prevent unemployment as well as transitions away from the labour market. The key is to provide people with the right kinds of support and services at the right time.

Unemployed people's working and functional capacity

Employment may also require measures to improve people's working and functional capacity. These measures may be related to temporary lay-offs or periods of notice, highlighting the role of occupational health services. Those unemployed people whose working and functional capacity requires support should be identified as quickly as possible. Local authorities should also organise health checks for unemployed people for this purpose and guarantee the relief on charges under section 11 of the Act on Client Charges in Healthcare and Social Welfare (734/1992) to ensure that a client's inability to pay will not form an obstacle. Employment and Economic Development Offices (TE Offices) are required by law to refer unemployed people to municipal health checks. Moving forward, more determined efforts should be made to support such measures, with due account of the questions of coordinating both the service system and the social benefit system. It is of particular importance that TE Offices do not make job offers or referrals to employment support services that may involve serious health risks during the coronavirus epidemic.

- Once normal services resume after the crisis, local authorities should start health checks for unemployed people as soon as possible.
- Employment and economic development services must actively disseminate information on unemployed people's health checks.

Resources for TE Offices must be secured

The sharp upswing in the numbers of unemployed and temporarily laid off people challenges the adequacy of resources in employment and economic development services. There is a risk that many people's service needs assessments will remain deficient. While the risk for long-term unemployment can be identified on the basis of individuals' background details, the lack of services to meet the needs becomes a problem in many cases.

 In a crisis, it is absolutely vital for employment and economic development services to identify the risk for long-term unemployment and target services for those at the highest risk.

Assessment of service needs, referral to services and counselling and guidance play a key role in ensuring adequate services for the most vulnerable groups. Development of digital tools will not resolve this in the near term. It is unclear whether TE Offices have enough resources to perform this task in a crisis. Private and third-sector parties have resources to provide these services.

It is necessary to estimate the resources available to TE Offices to perform adequate service needs assessments. Where necessary, it would be advisable to make it possible to purchase these services from external providers.

When digital services have been developed, these have not met everyone's service needs and supply has not matched demand. The service needs of special groups might be better met by hybrid services, combining personal and digital services. Cooperation with NGOs in developing, implementing and deploying digital services is also essential in this respect. Special attention must be paid to the accessibility of digital services.

Needs-driven forms of support

It is necessary to expand the provision of services that will genuinely meet people's needs and to make more effective use of employment-promotion services, such as pay subsidies. The sooner that people receive support tailored to meet their specific circumstances, the shorter their periods of unemployment will remain. It is particularly necessary to support newly graduated people's employment by means of pay subsidies. Moving forward, it will be even more important to be able to disseminate tried and tested operating models and service packages into new areas.

It is advisable to renew the criteria for and different implementation methods of pay subsidies to better support employment among the most vulnerable groups.

The resources relating to employment promotion available to TE Offices, local authorities, educational institutions, NGOs and businesses should be considered as a whole while maintaining, reforming and developing networks. Regular interactions make it possible to identify shared regional and local opportunities, developing client referral to services that best fit their needs. This requires information systems that enable data transfers.

The coronavirus crisis has led to increasing service needs among many special groups, which public or private service provision has not as yet been able to meet. At the same time, a large number of service sector employees have become unemployed or been laid off on a temporary basis. It is possible to create operating models that allow increasing support for people and communities through cooperation between local or regional parties, various public authorities and NGOs by orienting well-being promotion and preventive action. It is necessary to step up efforts to collect and draw on the experience and knowledge of NGOs and to steer public resources for this purpose. Several projects have significantly added to awareness of the opportunities provided by the social economy, for example. This will call for stronger coordination of activities.

9 Fault lines highlighted by the crisis

The coronavirus crisis exposes society's fault lines, which it is of the utmost importance to address in order to preserve the welfare society. Emergency conditions represent both challenges and opportunities. The weak links of societal security systems – the fault lines that remain hidden under normal conditions – become evident under emergency conditions. At the same time, this provides opportunities to break away from institutional inflexibilities, to repair the old or choose completely new ways of operating.

The previous chapters have dealt broadly with the impact of the coronavirus crisis on different groups of society. The concrete measures outlined below are primarily intended to illustrate the crucial action to take at the fault lines by way of example.

The silos and blind spots of services

Society's most vulnerable people are placed in the most intractable position, standing at the fault lines of social security and services. A crisis reinforces the process: it will cause even greater harm to people who are already in the most vulnerable situations. The most vulnerable groups always include individuals who are the most vulnerable of all and service systems are not always capable of helping them in the ways in which they would require.

A specific challenge is the siloed nature of services. Services are always intended for a certain group and those who do not meet the characteristics and criteria for that group will fall outside the service in question. These individuals' problems are not necessarily recognised by any other silo either. Many people have fallen between the silos and outside services. This can be seen in child welfare services and in services intended for immigrants, older people and young people at risk of social exclusion.

Coordination works poorly in child welfare services: the health, social and education sectors are not aware of the type of service needs identified in other sectors. In many cases, support and guidance available at the transition from child welfare services to adulthood have not worked. Since the maximum age for child welfare after-care services was raised to 25, the need for services has become pronounced. As they approach adulthood, young child welfare clients are too often left to struggle with their life choices on their own. Child welfare needs are expected to increase as a result of the coronavirus crisis.

During the coronavirus crisis, the number of older people who have functional and memory problems affecting everyday life but whose situation does not yet make them eligible for services is estimated to have increased by around 48,000 to 80,000 individuals. As they do not fall within the responsibility of any service, they do not receive any support to strengthen their independent functioning.

Services intended for immigrants do not support early integration into society: due to long times required to process applications, clients are stuck in reception centres and, at worst, locked out of the Finnish society and world of work. Immigrants' employment rate and income levels can be significantly raised by means of successful integration policy and integration plans.

- The focus should shift from corrective measures for socially excluded young people to general guidance and support systems, bridging and supporting young people's education and career paths, such as the One-Stop Guidance Centres. Online and mobile forms of contact should be developed for outreach youth work.
- Support for young people's coping calls for low-threshold services with extended opening hours, combining face-to-face and digital support with everyday life for young individuals as well as their local communities.
 This will also require civil society actors to play a role.
- Services in support of housing, independent living, life management, and education and training will be required at the transition point from child welfare services to adulthood.
- Investments must be made in providing immigrants with early health, education and employment services while they are still living at reception centres. All these parallel and consecutive measures will have a bearing on the employment rate, sufficient supply of labour as well as the sustainability gap caused by economic and demographic pressures.
- We must ensure that older people with impaired functioning will have opportunities to carry on leading independent lives.

Interrupted services and diminished service quality

While Finns have gained more healthy life years, there are exceptionally high differences between population groups in terms such as socio-economic status, gender, origin and residential area. Although narrowing the gaps between population groups has been placed front and centre in health policies, success has so far been elusive. During the coronavirus crisis, fewer people have been seeking treatment and planned procedures have been postponed. Cancellations of appointments and delays in diagnosing and monitoring diseases and providing treatment may result in complicating problems and overloading the service system.

Breaks in therapeutic relationships, the transition to remote services and interruptions in rehabilitative activities have reduced many people's quality of life, highlighting the importance of low-threshold services, various forms of group-based work and open meeting places as services are reopened.

The problems for people with disabilities have become concrete in terms of provision and effectiveness of disability services, access to and servicing of assistive devices, interruptions in rehabilitation processes, visiting and other bans concerning those living in housing service units, access to personal protective equipment, as well as issues relating to studying and employment.

Problems paying rent due to the coronavirus crisis may increase the number of homeless people, who currently number just over 4,000, over half of whom live in the Helsinki Metropolitan Area. Homeless people's support centres (food aid, NGO services) and public facilities (libraries) are closed and the need for help has increased.

The majority of the total of about 70,000 home care clients have a progressive memory disorder co-occurring with other conditions and/or functional impairments. They have also received less help from loved ones during the coronavirus crisis because central and local government authorities have strongly recommended them to avoid physical contacts. Likewise, short-term rehabilitation and many rehabilitation services provided at home have been reduced or put completely on hold. Access to rehabilitation services and support for functioning have become all the more important.

Some of the people who had been in contact with substance abuse welfare and rehabilitation services have disappeared from the services during the coronavirus crisis. The need for service coordination and treatment may also increase during the crisis as a result of unemployment and remote work.

- Once the conditions become normal, we must ensure access and referral to primary healthcare, social services, as well as multi-sectoral services promoting health and wellbeing.
- Access to disability services, assistive device services and other services required by people with disabilities for daily life must be ensured in accordance with each individual's personal needs and circumstances.
 These services focus on the smooth running of daily routines.
- Cities and civil society actors (incl. No Fixed Abode NGO) must develop fast new measures to help homeless people. Homelessness is a problem that calls for seamless coordination between several policy measures.

- It is imperative to ensure access to rehabilitation services for home care clients and take care of their functioning.
- As substance abuse welfare and rehabilitation services begin to open up again, it is necessary to increase face-to-face meetings with individuals and families as well as group-based services. Besides active efforts to reach out to those who had previously contacted the services, it is also imperative to attend to their mental health disorders, physical diseases and social problems.
- It is imperative to ensure operating conditions for parties providing rehabilitative work experience and social rehabilitation. Prompt decisions and client plans require adequate resourcing of TE Offices.

Increasing loneliness

Isolation and limited social contacts have affected the quality of life in all population groups. Experiences of loneliness and being left alone have increased. Even before the coronavirus crisis, loneliness was perhaps the single most central factor to cause mental suffering. This becomes more pronounced as the exceptional situation persists. Preventing loneliness calls for an effective civil society and cooperation between different parties.

The circumstances caused by the coronavirus crisis have limited the opportunities to maintain social relationships for many people aged over 70, people living alone and special groups. Likewise, many families with children, especially single-parent families, have seen their support networks fray, while concerns about children's important relationships breaking up has increased.

The majority of about 50,000 older people living in care homes have advanced memory disorders, making them completely dependent on other people's assistance. The coronavirus crisis has limited their ability to meet loved ones normally, while the support offered by close family and friends with their daily living, such as outdoor recreation, has disappeared and rehabilitative activities have stopped or clearly decreased.

As many low-threshold services have been reduced or closed down, this has further intensified loneliness among many special groups. In particular, loneliness among some immigrant and linguistic groups and the dearth of their contacts with the main-stream population are alarming.

The central government guidelines for meeting loved ones must be observed with regard to people with disabilities living in service housing units and no unjustified visiting bans should be set.

- It is imperative to ensure that close family and friends have various opportunities to safely visit care home residents, arranging for visits to take place outdoors during the warm season as required. The average time spent in a care home is two years, which means that this coming summer is the last for many residents. During hospice care, close family members must be provided with safe opportunities to say their final goodbyes to their loved one.
- Active effort must be taken to support cooperation between NGOs and other parties, such as religious communities, working with various immigrant and linguistic groups, while ensuring their operating conditions.
- Open meeting places with professional guidance and peer networks for families play a significant role in preventing loneliness and social risks.
 Their operating conditions must be ensured both during and after the crisis.

Exacerbating discriminatory attitudes

Prejudices and negative attitudes towards minorities have gained ground during the coronavirus crisis. The crisis has also revealed new kinds of attitudes that violate social cohesion and human dignity. These have been caused by conflicts arising from different interpretations of restrictions both regionally and between age groups.

In particular, groups from immigrant backgrounds have reported increasing discriminatory attitudes and hate speech. This is why it is especially important to prevent discrimination and promote the fulfilment of human rights. Debates on limitations of treatment with regard to people with disabilities during the coronavirus crisis have shown that everyone's equal human dignity and right to treatment require active advocacy.

- Serious attention must be paid to exacerbating attitudes while contributing to the preservation of social cohesion by means such as diverse communications. There is an acute need to strengthen anti-hate speech action.
- Providing support for immigrant integration calls for public authorities, NGOs, religious communities and other parties to work together with immigrant groups, as well as influencing attitudes among the mainstream population.
- One means of alleviating age discrimination is to include age impact assessments in decision-making processes.

Strain on mental health

The coronavirus epidemic and restrictive measures will have diverse and far-reaching impacts on mental strain and demand for measures aiming to maintain mental health among all population groups. Reductions in low-threshold meeting places, support and service coordination during the crisis will increase demand for mental health services in the long term. Even during the crisis, social isolation and reduced activities to maintain functioning are causing anxiety and depression.

The number of contacts with the national Crisis Helpline has increased by about 40% on last year and almost an equivalent upsurge has occurred in the Sekasin chat service for young people. The Crisis Helpline has especially seen growth in contacts from the oldest age groups.

Contacts with the Crisis Helpline focus on issues such as financial insecurity, concerns about health and for loved ones, and conflicts in the family. During the course of the spring, there has been an increase in the number and suicidal tendencies of callers requiring mental health services.

- There is a need for general and targeted communications about how to maintain and strengthen mental health and psychological resilience under emergency conditions.
- Access to low-threshold crisis help should be secured (incl. the national Crisis Helpline, Tukinet web crisis centre, group activities). Likewise, it is imperative to secure the operating conditions for organisations providing low-threshold meeting places, support, material assistance and service coordination.
- Psychosocial support and after-care must be ensured for COVID-19 survivors, people who have lost loved ones and for medical staff, including crisis services and guided peer support groups (crisis centres, parishes, Finnish Red Cross).
- It is crucial to secure the continuity of therapeutic relationships and services even during the outbreak. Not everyone can be provided with sufficient support remotely. The operating conditions of NGOs and businesses providing rehabilitative work experience and social rehabilitation services should be secured in order to maintain clients' functioning and everyday structures.

Access to communications and digitalisation

Access to communications already involved inequalities before the coronavirus crisis and the epidemic has amplified the challenges of access to information. Likewise, the crisis highlights the opportunity to make use of digitalisation as a fault line in society.

It is essential to provide correct information in each individual's native language. This is especially important for immigrant communities. The information concerns the restrictions imposed in order to prevent the escalation of the coronavirus epidemic, cultural practices, hygiene provisions and potential support services.

There are several groups in society which require guidance for using digital and other such services. Not everyone has access to the equipment required for this purpose. By way of example, library closures revealed that libraries were the only places for many people to access online services.

- All communications about the coronavirus should be accessible and provided via multiple channels. Likewise, everyone should have access to any communications even indirectly related to this exceptional situation.
 This requires communicating in each individual's native language.
- In terms of communications that can reach immigrants, it is essential to build up dialogue, discussions and trust-based relations with immigrant communities and to seek solutions together with them. Contacts with community representatives, associations and religious leaders are of the utmost importance.
- Alongside accessible digital communications, several other options must also be available, such as communications in sign language and easyto-understand language. Material must be available in Braille and audio formats for people with visual impairments.
- The accessibility of various digital services must be ensured by means
 of access points and user support provided free of charge.

Over-indebtedness

Abrupt and unforeseen changes caused by exceptional circumstances, such as the coronavirus pandemic, will lead to breaks in people's income. The sudden imbalance between income and expenses will, in turn, create a risk of becoming over-indebted. The debt problems caused by the 1990s depression cast a long shadow, which is still hanging over many people's lives. Many people resort to quickly available consumer loans. Unsecured consumer loans are too expensive for low-income people and the new interest cap provisions will not ease this customer group's situation.

The process of solving the problems through existing debt restructuring arrangements takes too long. A reform of debt restructuring legislation was initiated in the spring of 2020 in keeping with the Government Programme. The coronavirus crisis requires urgent action to accomplish the reform and develop new kinds of debt restructuring arrangements.

- It is now important to develop social lending as an option for low-income people.
- The most urgent tasks include influencing the policies of local authorities and hospital districts on client charges in health and social services, identifying means to buffer rental debt for families facing unemployment, and making widely known the financial and debt counselling services provided by legal aid offices.
- The ongoing reform of debt restructuring legislation should be rushed to meet the needs of both businesses and households.

Scarce income

As a general rule, people in a disadvantaged labour-market position are the first ones to lose their jobs. Unemployment leads to income problems. In the post-2008 financial crisis, for example, unemployed people were precisely the ones to see their incomes in jeopardy. Other people living on social transfers will also fall below the poverty line. Attention has been drawn to the low level of basic social security benefits on many occasions.

The most vulnerable groups include people who have been living exclusively on one type of basic social security benefit and those who live all their lives on national pension, for example. Besides the inadequate level of benefits, their lives are burdened by the bureaucracy of application processes. The income package of those living on basic social security consists of several overlapping and intersecting benefits that require obscure benefits bureaucracy to coordinate.

As of the beginning of 2017, basic social assistance was transferred from local authorities to be paid by the Social Insurance Institution of Finland (Kela). The reform revealed several problem areas. Data transfers from local authorities to Kela and vice versa required to grant supplementary social assistance do not work in an appropriate manner. This results in breaks and excessive delays in benefit payments.

The transition period due to unemployment can be addressed by means
of social transfers. Adequate levels of pensions and other social transfers provide a remedy for persistent poverty among older people. Besides social transfers, alleviating persistent poverty among the active

- population calls for integrated health, social, education and training services that help people escape poverty and prevent them from relapsing into poverty.
- In order to accelerate the benefit application process and improve its
 flexibility, Kela claims processors should have more decision-making
 powers in minor support requests relating to supplementary social assistance, which are currently transferred to local authorities for decision.
 Services must be organised so as to ensure that clients will receive the
 right type of help at the right time, regardless of the service provider (the
 'one-stop-shop' model).

10 Welfare policy up for evaluation

People's wellbeing is the prerequisite for a well-functioning economy, while the economy promotes people's wellbeing. Based on the reciprocity between wellbeing and the economy, the wellbeing economy pursues sustainability and social stability in the long term.

Human and environmental wellbeing enables economic sustainability and growth; investing in the former means investing in the latter. The goal of Prime Minister Sanna Marin's Government Programme is a socially, economically and ecologically sustainable society. The wellbeing economy approach integrates social, economic and ecological sustainability in a mutually reinforcing manner, while also strengthening cooperation between administrative branches. In practical terms, this means that, whenever possible, decisions are made on the basis of preliminary impact assessments and so as to ensure that the measures to be taken and their impacts will enhance human and environmental wellbeing and, consequently, sustainable economic recovery. A long-term objective is a population capable of working and functioning, with fewer diseases and problems resulting in major fiscal expenditures. As an approach, the wellbeing economy also contributes to stepping up the achievement of the UN Sustainable Development Goals (incl. Goals 1, 3, 5, 8, and 10).

After the crisis, we will not necessarily revert to the previous 'normal' state. We will have to face economic and health crises in the future as well. Preparing for future crises calls for building up wellbeing and improving our society's ability to adapt, in order to overcome them faster and with less damage. The wellbeing economy places people and their wellbeing front and centre of policies and decision-making processes. This directly involves budgeting central government resources as well as assessing and prioritising different measures and their impacts.

A policy that promotes wellbeing will also support sustainable economic development. Investment in education and training will produce skilled labour for our labour market and contribute to longer working careers. Productivity and employment are higher in countries where the workforce have higher levels of education. When we improve working conditions and invest in occupational health, we will reduce the costs of lost labour input. Finland still has plenty of room for improvement in this respect, considering the relatively large number of people who have become unable to work or excluded from the labour market. Through multi-sectoral municipal activities to promote health and wellbeing and comprehensive access to health services, we can improve people's wellbeing and functioning in all of their roles, including their working lives.

Increasing wellbeing is of particular importance in an ageing society like Finland. We know that demand for services increases as the population ages. At the same time, however, it is possible to influence the demand by promoting people's functioning at all ages. Prudent development of services, especially making use of digitalisation and preventing age-related health issues, will reduce public healthcare expenditure while also creating new markets.

Gender equality should be taken into account as part of a sustainable economic policy, which promotes social and economic justice and making the most of the entire population's full potential as drivers of economic growth. International research indicates that gender equality and female employment will promote equitable economic growth.

A steering model for the wellbeing economy

It is possible to steer society onto a course where decisions are made with their impacts on the wellbeing economy very strongly in mind. Moving forward, we need to decide what kinds of instruments should be used to steer society towards this goal. A steering model explains what to steer in order to promote the goal and agenda of the wellbeing economy in society. When developing the steering model, different stakeholders will first need to come to an understanding of what the key objectives of the wellbeing economy will be and create a framework for modelling and monitoring the wellbeing economy.

Over the last few decades, the operating environment of public administration has become increasingly complex, which is perhaps most clearly exemplified by the coronavirus crisis. Problem-solving efforts are distributed across different administrative branches and, in many cases, no single correct solution exists or there is no solution at all. As the public administration cannot respond to all problems on its own, it needs other social actors to get involved in building and maintaining the welfare state. Various networks that are key to the functioning of society are also being created on a self-directed basis, without any support from the public sector. It is essential for the steering model for the wellbeing economy to create conditions for interaction between various parties and networks. Consequently, individual citizens, civil society as well as the private sector must be engaged in developing and maintaining the model at relevant points by means such as various dialogues. However, the challenge is to get all parties to work in alignment towards common goals. This requires good coordination and leadership, close dialogue and assignment of clear-cut responsibilities.

The OECD has worked long to build a framework for wellbeing. The underlying rationale for the model is that, in order to understand the development of population and

household wellbeing, we must also analyse factors other than developments in the economic system. The OECD Wellbeing Framework divides the factors of wellbeing into current and future dimensions. This model has provided the basis for the wellbeing frameworks of many other countries and parties.

Iceland, New Zealand, Scotland and Wales, which have joined the global Wellbeing Economy Governments (WEGo) network, have their own models of the wellbeing framework. They have based their models on the OECD framework or developed these in close cooperation with the OECD. Many of the WEGo countries have already made good progress in developing and introducing wellbeing indicators; indeed, they have been developing a wellbeing framework ever since the 2008 financial crisis and are now also using it to respond to and recover from the coronavirus crisis. The crisis is expected to have far-reaching impacts, which could nevertheless be addressed by means of various wellbeing economy frameworks. Finland can learn from and draw on these different frameworks and indicators when developing its national model, which would encourage people to consider policy measures from the perspective of different dimensions of wellbeing and take the impacts of the measures into account in a longer term.

 Finland must develop a national model for comprehensive assessment of wellbeing.

A method for monitoring wellbeing

Once the objectives to be set for the wellbeing economy have been defined, it is necessary to decide how the model should gauge the wellbeing impacts of policy measures in practical terms both in advance and in retrospect. Finland should develop a permanent method for monitoring the level and development of wellbeing in both the short and long term. Up-to-date data on wellbeing is required in support of decision-making. It is possible to build a knowledge base drawing on both existing and new, digital data collection methods. The aim is to ensure that the data can also be analysed by gender and age and from the perspectives of equality impacts and reducing inequalities. When analysing inequalities, attention must be paid to regional differences in wellbeing and on cumulative disadvantages resulting from the interplay between different underlying factors. The Finnish Institute for Health and Welfare (THL) produces regional data on health and wellbeing trends, while local authorities have a statutory obligation to carry out preliminary assessments of decisions. The knowledge base should be systematically taken into account and used in the context of decisions that have effects on wellbeing and environmental status.

By way of example, Iceland has adopted a similar set of indicators, known as the Nordic Welfare Indicator System (NOVI). In the context of the 2009 financial crisis, Iceland developed a 'Welfare Watch' (välfärdsvakt) to collect data about the effects of the crisis on individuals and, in particular, on vulnerable groups. Special attention was paid to the social impacts of the crisis. Information and views about the state of society were collected from different social actors, such as the school world, labour unions, researchers and NGOs. The Welfare Watch also helps understand how to prepare for future crises, especially from the perspective of society's most vulnerable people.

Gender and equality impact assessments must be mainstreamed into all social policies. The crisis caused by the coronavirus pandemic underlines the significance of developing gender budgeting.

- Finland should develop a permanent method for monitoring the level and development of wellbeing in both the short and long term by 2022. This calls for concrete action.
- It is proposed that Statistics Finland be appointed as the organisation responsible for building a set of indicators to produce wellbeing data in support of decision-making on a systematic, regular and timely basis.

An evaluation council for wellbeing policy

A draft resolution on promoting wellbeing, health and safety 2030, prepared for the Finnish government during the spring of 2020, sends an important signal about its political commitment to reducing inequalities in health and wellbeing and promoting the wellbeing economy approach through cooperation between different administrative branches. As measures to implement the resolution are launched, it is necessary to ensure that, besides monitoring the wellbeing indicators, more in-depth, research-based analysis on welfare policy objectives and instruments and its impact on different population groups will also be produced in support of decision-making.

Operating since 2014, the Economic Policy Council consisting of members appointed on proposal by the scientific community has raised useful perspectives for economic policy debate and preparation in its annual reports. Welfare policy is as equally deserving of an independent evaluation body as economic policy. Its role could consist of compiling and analysing information produced by the THL and other relevant research institutes, anticipating emerging trends of change in society that have a bearing on wellbeing, catalysing debate about these and evaluating social policy measures from a broad wellbeing perspective, based on a set of criteria created for

this purpose. It would also be an excellent way of contributing to embedding the well-being economy approach introduced by Finland during its Presidency of the Council of the European Union. The council should also have a permanent preparatory body.

An independent evaluation council for wellbeing policy should be established and provided with adequate resources for preparatory work.

11 Conclusion

The coronavirus pandemic has highlighted the strengths of the Finnish welfare society, its guiding ethos, universal welfare policy tradition, strong structures and institutions, as well as an active and effective civil society.

At the same time, the pandemic has exposed the social and other fault lines as well as fractures in wellbeing and equality hiding below the surface of welfare society. The pandemic itself and the action required to tackle it have widely affected people's health, income and other areas of wellbeing, as well as on the effectiveness of society's structures and service systems. Some of these effects will take longer to become manifest. The effects will hit hardest those who were already in a vulnerable situation to begin with.

The situation requires both immediate and long-term measures to preserve the prerequisites for wellbeing and equality. Comprehensive wellbeing among all population groups is crucial from the perspective of society's social and economic sustainability. Preserving equality, wellbeing and trust will benefit everyone.

We are now in the midst of a social situation that is new. It is still unclear how the pandemic will change society, what sort of global impacts it will have and how permanent the changes will be. This is why this is an opportune moment to create an effective set of criteria for assessing the wellbeing and equality impacts of policy measures, complete with regular data production and a permanent assessment mechanism.

Recovery from the pandemic and the measures taken to fight it will call for plenty of economic, social and human resources in society. The level of strain will increase as the situation persists. It is necessary to take the limited nature of resources into account when estimating recovery and its duration.

The most crucial point is to ensure that the burdens are distributed fairly and justly and are also perceived as such by those who do not have enough resources of their own.

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