

150 YEARS OF

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# The Helsinki Deaconess Institute



*Jyrki Paaskoski*



Portrait of Aurora Karamzin  
(1808–1902) by Dagny  
Furuholm, 1898.

*The establishment of the Helsinki Deaconess Institute in 1867 came in the wake of the first winter of the tragic years of famine. People in Finland started to succumb to hunger, weakened by disease epidemics. There had been nothing like it in Finland for some two hundred years. Amidst the crisis, Aurora Karamzin, a noblewoman, took the initiative to assist those in distress and so began the story of the Helsinki Deaconess Institute.*

*150 years later the purpose of the Helsinki Deaconess Institute is to create opportunities for people. Services alone are not enough. Other people are needed. Community support for vulnerable people is especially important.*

*The foundation and its subsidiaries jointly produce a range of social and health services. We are proficient in working with demanding special groups, for which we develop services impartially together with our clients and partners. Citizen action is a strong feature in all our activities.*

## THE DEACONESS INSTITUTE COMES TO HELSINKI

When the Helsinki Deaconess Institute was founded in 1867 Finland was a Grand Duchy of Finland, part of the Russian Empire, and its urban centres were very small. The majority of people made their living from agriculture. There was no state provision of social security, health services or medical treatment for the population. The Church, municipalities, parishes and families took care of the elderly, children, people with disabilities, and others in need.

The capital of the Grand Duchy, Helsinki, grew rapidly due to the industrialisation of the latter half of the 19th century. Tenement housing was built in various parts of the growing city, in which workers lived in cramped, stark conditions. 1866-1868 were years of soaring mortality, with 150 000 people perishing from hunger and disease. The Helsinki Deaconess Institute was established to alleviate the immediate plight of this period. The institute's first premises were a small hospital, which was used to treat indigent women and their children with typhoid fever.

The Helsinki Deaconess Institute was founded by the affluent Finnish noblewoman Aurora Karamzin.



The Deaconess Institute's first headquarters, centre right, in Helsinki in the winter of 1866.



Sister Amanda (1830–1871) was the institute's first manageress 1867–1871.



Emma Wichman (1836–1900), seated centre, was inaugurated as the Helsinki Deaconess Institute's first deaconess in 1873. The uniforms were modelled on those used the deaconess institute in St Petersburg.



The institute's hospital and hospital surgery was run by many of the country's leading physicians. Hospital services had been run by the subsidiary Diacor during the 21th century.



A novice reads to patients and deaconess keeps them company while knitting. During its first years the institute's hospital took only women patients.

She had become acquainted with the deaconess institutes in the principalities of Germany, the Nordic countries and in the Russian capital of St Petersburg, and was convinced that an institution of this sort was also needed in Finland. The main archetype was the Deaconess Institute at Kaiserwerth in Germany, established by Theodor and Friedrike Fliedner, and

comprising a teaching hospital, schools, sheltered housing for prisoners and women and other facilities. The first part-time director of the Helsinki Deaconess Institute was professor of medicine Otto E. A. Hjelt. The first manageress was deaconess Amanda Cajander, who had graduated from St Petersburg Evangelical Hospital.



The institute provided nursing training from the outset. Sister Hanna Masalin is shown here providing instruction on bandaging limbs. She served as director 1924–1937.



The Helsinki Deaconess Institute's new building was completed in 1897, modelled on European deaconess institutes. The building comprised a hospital, sisters' home and church. The church remains in its original use.

The Deaconess Institute's early years were still fairly modest in scope. In 1875, Aurora Karamzin bought a stone-built premises in the Katajanokka district of Helsinki, to which the institute's hospital and sisters' home were transferred. The Deaconess Institute was based here until 1897, when a new hospital, church and sisters' home were opened in the district of Alppila, north of the city centre (district of Kallio nowadays).

In 1883, Sofia Karolina (Lina) Snellman, graduate of the Stockholm Deaconess Institute, was appointed manageress. The diaconal work of the institute started to increase during her tenure, with a large number

of new students joining the institute. The Reverend C.G. Olsoni, who was appointed as the Deaconess Institute's first full-time manager in 1893, assisted Sister Lina in her work. At this time the Deaconess Institute introduced the Kaiserwerth sisters' home system, under which the institute had students, novices and deaconesses, who made up the sisterhood. The sisterhood's 'father' was the Reverend Olsoni and its 'mother' was Sister Lina.

At the turn of the century, parishes and Christian organisations employed their first deaconesses. Rauma parish retained the country's first deaconess, Sister Cecilia



The Deaconess Institute took charge of two children's homes during the early 1910s. It obtained premises for them in Helsinki and Espoo. Both places are still used by the institute.



The group photo shows German troops and staff members of the Deaconess Institute in 1918.



The parishes were, in addition to the hospital, a main focus of work. The job description of the sisters included home visits. Pictured here is Ester Särs at the home of a patient in the 1920s.

Blomqvist, in 1879. Four years later, she launched the work of the Helsinki Mission. This work helped people in their spiritual and physical need when they had grown away from a Christian way of life. The work focused on orphans, the homeless, sick, poor, alcoholics, former prisoners, and 'fallen' women. By 1917 the Helsinki Deaconess Institute had about 200 sisters, half of them deaconesses and the remainder novices and students.

## POST-INDEPENDENCE AND POST-CIVIL WAR YEARS

Finland gained its independence on 6th December 1917, in the aftermath of Russia's October Revolution. Finns were divided politically among the revolutionary Reds and the pro-government Whites, and at the end of January 1918 civil war broke out. The conflict's frontline ran across southern Finland from Pori to Tampere, through Lahti to Vyborg. The Deaconess Institute was located in the area occupied by the Reds – Helsinki and the southern part of Finland. The disruption of the postal service meant that the management of the institute had no communications with the parish sisters, who had to cope with the difficult conditions on their own. The situation of the parish sisters stuck in the Red half of the country who wanted to help everyone in distress was particularly difficult.

The Deaconess Institute's complex found itself at the centre of military operations in April 1918. German troops assisting the Whites attacked the area around the institute and the Reds returned fire. Civilians fleeing the fighting as well as wounded Germans, Whites and Reds came to the institute. After the Civil War the Deaconess Institute also operated as a German military hospital.



Two small boys required temporary treatment in 1927. This saw the start of work with intellectual or developmental disorders, for which the Rinnekoti care facility was established.

Some 80 000 men, women and children were interned in prison camps set up after the Civil War. About 12–14 000 of them died from hunger and disease or were executed. One of the largest prison camps was in Tammisaari at the southern Finland. Among those working at this camp were some sisters from the Deaconess Institute.

Following Finland's independence, the Deaconess Institute entered new areas of work. The most important of these was work with people with intellectual or developmental disorders, which was started at the end of the 1920s. A care facility, the Rinnekoti, was established for this purpose. Just before the outbreak of the Winter War, at the end of November 1939, the

Rinnekoti's residents and their carers were moved from Helsinki to a farm procured in Skogby, Espoo. The Rinnekoti is still based there.

The national standardisation nurses' training in 1929 forced the Deaconess Institute to review the content of nurse deaconess training, which is based on Christian values. The authorities granted the Deaconess Institute the right to run its own nursing school. Apart from nursing training, instruction was given for the sisters that focused on parish pastoral care. This approach did not achieve significant popularity and was discontinued in 1937.

## WINTER AND CONTINUATION WAR

In late November 1939 the Soviet Union invaded Finland. This started the Winter War, which ended in November 1940 with heavy territorial losses for Finland. During the conflict, the sisters of the Deaconess Institute worked as nurses near the front at the main dressing stations, field hospitals, on special trains for the wounded and at military hospitals in different parts of Finland. Most of the sisters continued with parish



The hospital was partly a military hospital during the Second World War (1939–1940 and 1941–1944).

work, participating in the health care and pastoral care of evacuees fleeing the war.

The Winter War was followed by a brief truce, after which in June 1941 the Continuation War started, with Finland fighting against the Soviet Union as an ally of Germany. As with the Winter War, the sisters of the Deaconess Institute cared for the wounded in various parts of Finland, including in East Karelia. A few of the sisters worked in prisoner of war hospitals and German military hospitals in North Finland. Most of the sisters worked in parishes throughout the country, with only the head sisters and students remaining in Helsinki.

The strenuous war years had undermined the Deaconess Institute from within. The return to peacetime work in autumn 1944 was difficult for the Institute's management and for the sisters returning from military secondment. Many were critical of the hierarchy and the rigid sisters' home, meagre pay, dress code, etc. After the war, many left the Deaconess Institute's sisterhood. Finally, following the enactment of the church's pensions legislation, the Deaconess Institute's sister's home system was scrapped in 1959.

## THE WELFARE STATE AND DIACONIC WORK

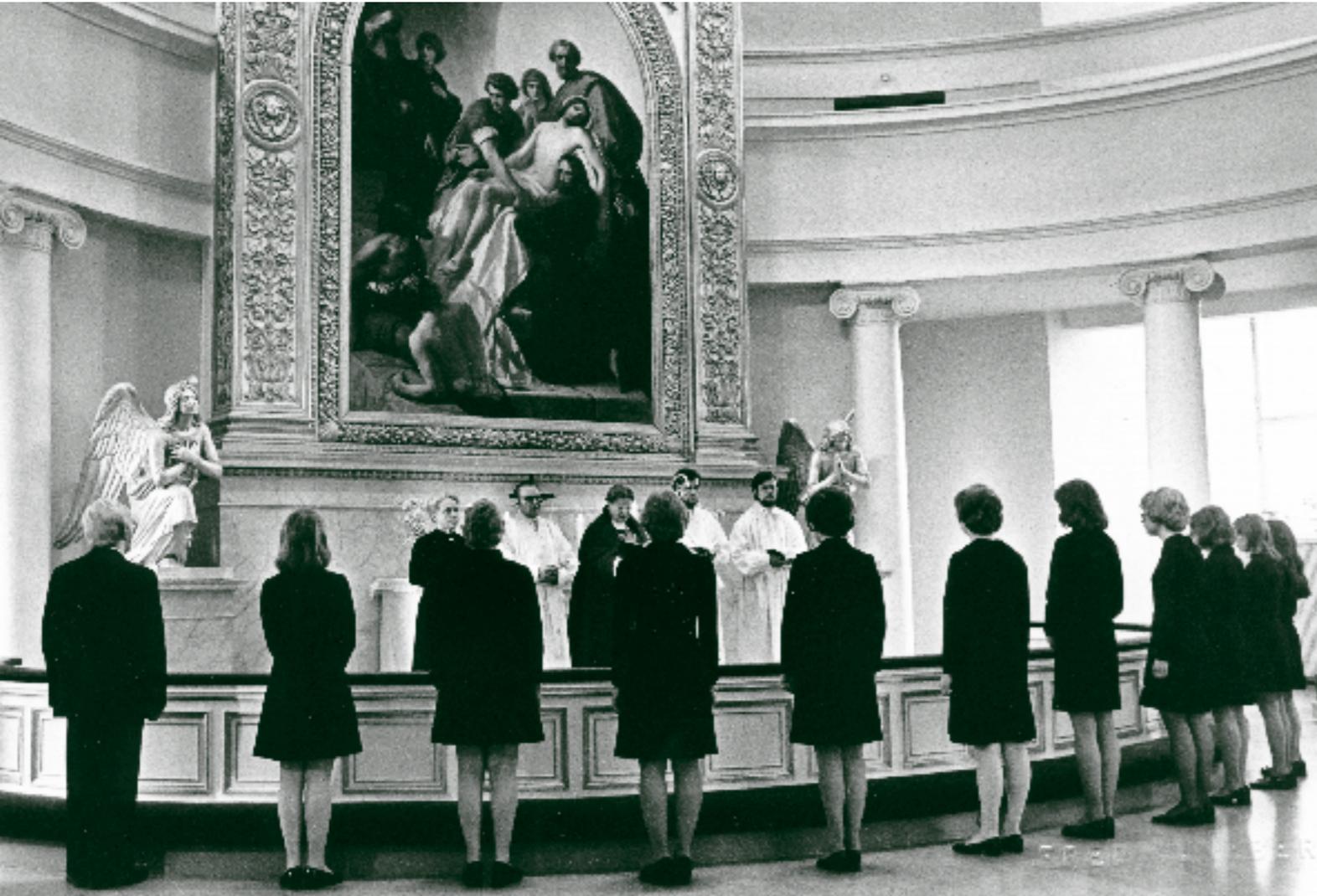
In the post-war years, Finland embarked on building a welfare state. Under this system the state would look after the entire population, including the disadvantaged. Through legislation, government took over responsibility for a social care sector that had previously been handled by the Evangelical Lutheran Church, Christian foundations and organisations or other charitable and philanthropic associations.



Deaconesses were inducted to their duties at the institute's own church until 1953. Inaugurations were performed by the manager of the institute – in this photograph, taken in 1949, by Edvin Wirén.

For an actor like the Helsinki Deaconess Institute the construction of the welfare state signified an identity crisis that it was only able to shake off at the end of the 1980s. The Institute's leaders felt that the situation was such that the work of Christian organisations to help those in need was marginalised. Under the 1972 Public Health Act medical treatment was in the hands of health centres, and parish deaconess nurses were no longer entitled to work as nurses. They were left only to provide acute support and pastoral care.

The situation forced the institution to revamp its deaconess training. Parallel with it, the institute created



The Deaconess Institute provided training for women only until 1972, after which parish social welfare training was opened up to men. The first such welfare officers were inaugurated in 1974.

the practice of parish social welfare work, which did not involve nursing training. Social welfare training was started in 1972. It focused on mental health and pastoral work. In addition, in 1975 the Deaconess Institute started training for mental health carers.

Strengthening the welfare state was an intrinsically positive and important thing, but it aroused grave concerns among the leaders of the Deaconess Institute. In

the 1970s many private hospitals were forced to close for various reasons. The Deaconess Institute feared the rise of the political Left and the 'socialisation' of its hospital. But such fears proved groundless.

Work with the elderly and child protection had become the Deaconess Institute's key focus in the 1960s. The institute built housing for its own retired deaconesses and for paying clients. The children's homes

opened in 1914 in Pitäjänmäki in Helsinki and Pellas in Espoo acquired new properties. The institute's director Matti Ojala readily talked about 'institutional diaconia', because it sought to concentrate its activity within its own walls. However, it did not undertake assistance to the most vulnerable, such as homeless substance abusers, but consciously left such activity to municipalities and other actors.

The financial position of the Deaconess Institute became significantly stronger in the 1970s and 1980s. The institute concentrated mainly on reinforcing its real estate operations and strengthening occupational health care. It scored successes in both areas. Special mention should be made of the purchase of the medical centre called the Lauttasaari Research Centre, which together with the institute's own occupational health care subsidiary formed Diacor, to which hospital services were later transferred.

## THE PERIOD OF DIACONIC PROJECTS

Institutional diaconic work came in for robust criticism after the late 1970s. Many people felt that the Deaconess Institute should have been more actively involved in assisting the most vulnerable. Changes were made in 1988 with the appointment of Tapani Vuorela as director of the organisation. His tenure saw the start of diaconic projects, a prime focus of which was to reach those groups left out of the social service system. The aim was to mobilise rapidly together with the institute's partners. In the 1990s these projects were tagged "radical diaconia" or "fighting diaconia"

The first diaconic projects focused on homeless substance abusers, for whom the institute arranged daytime



One of the villa in Pitäjänmäki, formerly the children's home, was turned into a day centre for homeless alcoholic men in 1988. The leader of the programme, Sakari Selin, standing on the right, later started other diaconic projects run by the institute.

activities and pastoral services. In the 1990s, the Deaconess Institute broadened the scope of its activities for alcoholics by establishing a 14-bed old people's home facility. Clients were not obliged to commit to abstinence. The Deaconess Institute took the same approach in establishing housing unit in East Helsinki. Future diaconic projects concerned providing help for prostitutes, refugee victims of torture and homeless women.

The mid-1990s saw an alarming increase in drug abuse in the greater Helsinki area. The institute had located its first substance abuse care unit in Espoo and Helsinki for drug addicts and their dependents. Both projects were carried out in cooperation with the au-



Missionary work has changed skills into robust development cooperation in Southern Africa. As a result of work done with the Evangelical Lutheran Church in Namibia (ELCIN), young people are receiving vocational training. Volunteer home carers are trained to help elderly people. Pastor Josef Ngula (left) and Pastor Justina Shilongo (right).

thorities and the municipalities of the greater Helsinki region. By the early 2000s the Deaconess Institute had become Finland's largest producer of specialised substance abuse services.

The Helsinki Deaconess Institute has run international programmes in cooperation with the Finnish Evangelical Lutheran Church and the Finnish Evangelical Lutheran Mission, particularly in southern Africa.

In the 1990s and early 2000s these commitments were reflected in intensive diaconic projects. One of the most fruitful of them was CUAHA (Churches United against HIV and AIDS), carried out from 2002-2007. This was a joint ecumenical initiative involving Finnish churches and Christian organisations that used awareness raising to combat the HIV pandemic and Aids. In 2005 the project Diaconia in the City was started at the initi-

ative of the Namibian Evangelical Lutheran Church. This aimed to improve the life management and social responsibility for one's neighbours among people living in poor areas of the Namibian capital Windhoek.

## DIACONIA UNIVERSITY OF APPLIED SCIENCES AND THE DIAKONIA COLLEGE OF FINLAND

Changes in the education system affected the training provided by the Diaconia College of Finland. The training of deaconess nurses was transferred to the Diaconia University of Applied Sciences (Diak), which was made permanent in 1999 following a trial period. Diak is a church-based vocational educational institution with many branches throughout the country. Those in Southern Finland were amalgamated at the beginning of 2016, when Diak started operating from a new campus in Helsinki's Kalasatama.

The Deaconess Institute started running courses in practical nursing in 1957. Over the years the content of the training diversified. Training practical nurses became a major study field for the college. Its new building in Kallio district in Helsinki was completed in 1991, and training courses commenced in an entirely new framework. Training also began to be given to people with immigrant backgrounds, and the first practical nurses in the country from the immigrant community graduated in 1995. The Ministry of Education awarded the Helsinki Diaconia College with a cash prize for long-term performance and vocational training quality prize

The start of 2017 saw the establishment of the Finnish Diaconia College, comprising the Helsinki



The first immigrant students started training to be practical nurses at the Helsinki Diaconic College in 1994.

Diaconia College, the Lahti Diaconia Institute and the Oulu Diaconia College. The result is a training facility in the form of a limited company for 2 000 students in the field of welfare and care. The amalgamation of the colleges was an important milestone in the history of the educational work of the Helsinki Deaconess Institute.

## A CARING POPULAR MOVEMENT

At the turn of the millennium the Finnish welfare state was mired in problems. Social welfare and health services maintained from tax revenue no longer func-

tioned adequately, and their costs were rapidly increasing. Municipalities had to outsource their statutory services to private companies in the health and care provision sector. Under the leadership of its new director, Antti Lemmetyinen, the Deaconess Institute was profiled as Finland's first social conglomerate. Its operations aimed at increasing the social good and solving societal problems, and its profit distribution was restricted. The Helsinki Deaconess Institute was no longer an occasional stopgap of the social protection and service system but had become an element of the service chain provided by the Finnish welfare state. Lemmetyinen wanted to establish a values and community oriented popular movement around the Deaconess Institute. It developed a hybrid service model rooted in community and civic action, through which services were produced in collaboration with different actors. Volunteers were also brought in. The model has been used in conceiving such things as the youth outreach programme Vamos, which provides help to

socially excluded youth left out of the service system. It has been possible to use the same model has been used for socially excluded older people.

In spring 2007 the Helsinki Deaconess Institute drew attention to the appearance on the streets of Helsinki of Roma beggars, whose extreme poverty and distress concerned many people. In subsequent years the numbers of this so-called itinerant community grew, and in 2011 the institute, together with the City of Helsinki and parish union, opened the Hirundo day centre.

In 2015 saw the rapid expansion of the biggest European refugee crisis since the Second World War. The majority of refugees left their homelands to wait for the situation in them to settle, but many continued their journey to northern Europe. In autumn 2015 some 32 500 refugees came to Finland to apply for asylum. About 3 000 of them were unaccompanied children. At the request of the authorities, the Deaconess Institute received 140 children, who were placed at the institute's Helsinki and Espoo centres.

## REFORM OF THE SOCIAL WELFARE AND HEALTH CARE ADMINISTRATION

In 2012, Olli Holmström was appointed director of the Helsinki Deaconess Institute, whose main tasks included monitoring the reform of the Finnish social

The Helsinki Deaconess Institute's Hoiva Ltd pledged a commitment to service: "No one will be left behind". Community singing events brought together care home residents, their families, staff members and volunteers.



At the Narinkka Square in Helsinki, Tarja Jalli, the coordinator of voluntary programmes, presented in summer 2015 the Deaconess Institute's opportunities for civic activity involving working with people. This activity is grounded in trust and equal interaction between people. This does not require any special skills.

and health care administration (known as Sote). The aim of the reform has been to reduce welfare and health inequalities and improve the equality and availability of social and health care services. The reform is also aimed at controlling rising costs.

But the decision-making in the Sote reform process has been very difficult, and has also been a headache for the Deaconess Institute. It is clear, however, that

new legislation and financing solutions related to the Sote process will have a major impact on the institute's operating environment and profitability. The reform will pose a challenge to private and third sector actors and open opportunities for wholly different innovative options. Christian neighbourly love and courageous diaconic work will continue to be the cornerstone of the Helsinki Deaconess Institute's activity.

## CHANGING DIACONIC WORK

Over the course of its 150-year history, the Helsinki Deaconess Institute has experienced highs and lows in diaconic work. The first high was in the early 1900s, when the institute attracted a great many students. The second was in the post-war period, when the church and parishes took up diaconic work.

The third high point was in the late 1980s was preceded by a trough in the history of diaconic work, when the institute withdrew into itself and did not

participate in on-going social discourse. This was followed by a rapid turnaround, and the fourth phase of diaconic activity traversed radical diaconic work.

The same vision of diaconic work has persisted into the second decade of the 2000s, even though the operating environment has altered. Christian values and the example of the Good Samaritan unite the Helsinki Deaconess Institute and those working for it. Diaconic work must go where human distress, degradation and suffering are the greatest, so that we can fulfil the vision of heeding the human dignity of everyone.



Low-threshold free cultural, sports and arts events are open to everyone.

### 150 YEARS OF THE HELSINKI DEACONESS INSTITUTE

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Front cover

In addition to the hospital, parishes were a central focus of deaconess work. Cycling speeded up the journey to visit people to be cared for living in rural parishes far from village centres.

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The Helsinki Deaconess Institute started off as a plague hospital in 1867, and provided training for young women to help people in distress, to be deaconesses. Diaconic work was already at that time the mainstay of our work.

The Helsinki Deaconess Institute is a non-profit organisation, a bold and influential player. We are specialists in social problems and special groups in society. We create new solutions specifically in areas where human dignity is jeopardised. Our work is guided by the values of Christian charity.