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Introductory Chapter: An Overview of the Book

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http://dx.doi.org/10.5772/65717

Today, we feel the urgent need to understand the social problems that particular communities are facing and identify specific treatment interventions to address their unique needs both at macro- and at micro levels. The scope of this volume goes precisely toward this direction. Each chapter offers ways of intervention to address some of the most pressing social issues of our time.

The first chapter by Clare Cannon and Fred Buttell focuses on intimate partner violence in same-sex relationships in the USA and Canada, a real complex social problem if we think that violence in those relationships occur at a comparable or greater rate than opposite-sex relationships. Having demonstrated that the current traditional feminist theory sometimes inhibits an accurate view of the problem of same-sex intimate partner violence, the two authors reconceptualize the problem by deconstructing in a very sophisticate way the traditional gender-power argument. Their new approach is directed to understand who is violent in intimate relationships and why. The uniqueness of their approach is to look beyond the dichotomy 'same-sex/opposite-sex' and treat abusers and victims as whole people with power differences, which, in turn, create inequality. Based on empirical data analysis, the authors advocate for treatment options directed to work on both internal and external dimensions of those individual persons who use violence to mediate their intimate relationships.

The second chapter by Sylvia Kirchengast provides an interesting historical and contemporary analysis of teenage pregnancies and motherhood, a worldwide social and 'medical' problem. By looking specifically at the Austrian case, a number of strategies to decrease teenage pregnancy rates and improve teenage pregnancy outcome are discussed in this chapter. Although the author recognizes that Austria is still not among the lowest in terms of teenage motherhood among developed countries, she highlights the positive effects that mandatory sex education, legal abortions, and especially social programs have had in reducing teenage motherhood rates in this country. The author's description of the Viennese teenage pregnancy project is particularly informative. The results of this project made the author concluding that, even among early adolescent mothers aging below 15 years, teenage pregnancies are not



associated with increased obstetrical risks and overall teenage pregnancies are mainly a social and not a medical problem.

The third chapter by Gabriele Berg-Beckhoff, Gabriel Gulis, Carsten Kronborg Bak, and Pernille Tanggaard Andersen examines other two very important and interrelated issues, namely unemployment related to healthcare disparities. Their study refers to the Danish 'welfare' and 'labor market' models. The first is famous worldwide for its principles of universalism, participation, and equity; the second is well known because of the 'flexicurity' (i.e., security in employment and income combined with flexibility in relation to the hiring and firing of workers). The latter model, as explained by the authors in their chapter, guarantees a high level of benefit security to workers with insurance if they become unemployed. These two models are often seen as the causal explanation of an overall association between unemployment and health outcomes in Denmark. The originality of this chapter consists in the fact that the authors, by analyzing the results of cross-sectional and longitudinal studies on the short-term association between unemployment and hospital admission in the municipality of Esbjerg, find out that an association between social welfare benefits and hospital admission exists, but the direction of such an association cannot be clearly defined yet.

This book concludes intentionally with a chapter by Auxiliadora Gonzalez Portillo and German Jaraiz Arroyo. This chapter not only offers an accurate interpretation of the challenges currently faced by the public social services system in Spain, but also provides one of the most interesting conceptual and analytical frameworks with which the reader can more easily interpret the social issues discussed in the previous three chapters. In fact, according to the authors, we can distinguish three basic categorizations of social services:

- 1. Personal social services. Deeply rooted in the Anglo-Saxon realm, these are usually services directed to individuals and their families. Within this definition of social services, the authors recognize programs of intervention in families in conflict, especially highlighting intervention in situations of 'gender' violence. Therefore, it is evident that interventions targeting abusers and victims of intimate partner violence, discussed in the first chapter of this book, should be understood within this category.
- 2. Community social services. According to the authors, these services are intended to go beyond individual attention to needs and require the complement of individual intervention methodologies with other groups and community interventions. In this case, intervention programs are created for people with personal autonomy deficit. I think, the case of teenage pregnancy and motherhood, discussed in the second chapter, falls clearly into this category.
- 3. Universal social services. The authors argue that these are the services where the objective of social inclusion of disadvantaged social groups coexists with more universalistic objectives aimed at the needs of the whole population. The authors recognize that this understanding of universal social services is still vague for many nations. However, what is interesting to notice is that within this definition of services, we would have interventions directed to support population groups with social difficulties. This evidently recalls the case of Denmark and the issues of unemployment and health inequalities addressed in the third chapter of this book.

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