

A PROUD PARTNER OF

SOCIAL  
INNOVATION  
IN HEALTH  
INITIATIVE

6-7TH NOVEMBER, 2024

Mötesplats Studenternas,  
Uppsala

# EXPLORING ENTREPRENEURSHIP FOR SOCIAL INNOVATION IN HEALTH

2nd international SIHI conference

Entrepreneurship



Implementation  
research



Co-creation of  
knowledge



Reducing inequity



**FORTE:**

Swedish Research Council for  
Health, Working Life and Welfare



UPPSALA  
UNIVERSITET



Karolinska  
Institutet



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 Sida

# WELCOME

SOCIAL  
INNOVATION  
IN HEALTH  
INITIATIVE

SWEDEN

Dear conference participants,

On behalf of the organizing committee, I am happy to welcome you to the second international SIHI Sweden conference! We hope that you will be inspired by the presentations and workshops, get the opportunity to connect with new friends and potential future collaborators and be encouraged that change is possible in these times of multiple crises.

Today, we are constantly reminded of the polarization and divide in the world, both with seemingly unresolvable conflicts globally and with an increasing political and ideological divide locally. At the same time, we are facing grave challenges to the foundation of our society and health through climate change and biodiversity loss. This is a time to be innovative, to think outside the box and find transformative ways to navigate these challenges. Action is required, and with this year's conference theme "Exploring Entrepreneurship for Social Innovation in Health" we hope to encourage and facilitate this action.

SIHI Sweden was launched in 2021 and is today hosted by the Centre for Health and Sustainability (CHS) at Uppsala University. Being a hub in a global network supported by WHO/TDR and Sida connects us to a larger context, where we can learn and share experiences, ideas and hopes for a better world. With a joint idea of utilizing social innovation as a vehicle for improved health and a more just society we share a vision with like-minded globally.

So once again, welcome! Let's build community together!



Professor of Global Health  
Director of CHS

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# LOCATION

The conference will be hosted at Mötesplats Studenternas in Uppsala. It is in the big football stadium, just in the end of the city garden.

The entrance is **E VIP** on Sjukhusvägen 12H, 753 09 Uppsala, located opposite to the Akademiska hospital. Please see pictures below.

**Arenaingång E VIP,**  
Sjukhusvägen 12 H  
753 09 Uppsala



# SCHEDULE

## WEDNESDAY NOVEMBER 6

9:00 – 09:30	<b>Registration and coffee</b>
09:30 – 10:00	<b>Welcome</b> Mats Målqvist, SWEDESD
10:00–10:45	KEYNOTE ADDRESS <b>The Power of Innovation: Driving Value Creation Through Research and Social Entrepreneurship</b> Samer Yammine, Karolinska Institute
10:45–11:00	<b>Break</b>
11:00–11:30	SOCIAL INNOVATION PRESENTATION <b>Platinea: a Swedish collaboration platform for innovation of existing antibiotics – how we developed 10 solutions against antibiotic shortages</b> Enrico Baraldi, Chaired Professor of Marketing, Uppsala University, Deputy Project manager, PLATINEA – Platform for Innovation of Existing Antibiotics
11:30–12:15	SOCIAL INNOVATION PRESENTATION <b>How did we make social innovation happen? Examples from Forum for Social Innovation Sweden</b> Gloria-Karin López, Forum for Social Innovation Sweden, Malin Lindberg, Guest Professor of Social Innovation, Malmö University, Andreas Hellström, Senior Lecturer at Chalmers University of Technology and Vice President of Kraftens Hus, Charlotte Forsberg, Director of Kraftens Hus Stockholm, Päivi Juuso, Associate Professor in Nursing, Luleå University of Technology
12:15 – 13:15	<b>Lunch</b>
13:15 – 14:00	KEYNOTE ADDRESS <b>Crowdsourcing for health: An introduction</b> Joe Tucker, University of North Carolina at Chapel Hill, London School of Hygiene and Tropical Medicine, Eneyi Kipokiri, London School of Hygiene and Tropical Medicine and Ruby Wang, SESH
14:00 – 16:30	WORKSHOP <b>Designathon – Innovation for Youth Mental Health</b> (with coffee & fika)
18:00	<b>Conference dinner at Heart and Bones</b>

# THURSDAY NOVEMBER 7

9:00 – 9:45	<p>KEYNOTE ADDRESS</p> <p><b>Using Storytelling as a Social Innovation for Health</b> Tori Ford, Medical Herstory</p>	
9:45 – 10:15	<p>SOCIAL INNOVATION PRESENTATION</p> <p><b>Collaboration in complex development processes</b> Klas Palm, Uppsala University</p>	
10:15–10:45	<p><b>Fika break</b></p>	
10:45–11:15	<p>ORAL POSTER PRESENTATIONS</p> <p><b>Trash 4 Health Innovation</b> Muhammad Abdullahi, Queen Amina Medical Integration</p> <p>AND</p> <p><b>Healthy Futures South Africa - Strengthening Primary Healthcare through Social Entrepreneurship in Health</b> Gillian Vedan, Bertha Centre for Social Innovation and Entrepreneurship</p>	
11:15 – 12:15	<p><b>Poster walk</b></p>	
12:10 – 13:15	<p><b>Lunch</b></p>	
13:15–13:45	<p>SOCIAL INNOVATION PRESENTATION</p> <p><b>How can social entrepreneurship be used as a method for system change?</b> Andréa Råsberg, Reach for Change</p>	
13:45 - 14:00	<p><b>Introduction to parallel workshops</b></p>	
14:00 – 15:15	<p>WORKSHOP</p> <p><b>How can we make social innovation happen? Inspiration from Forum for Social Innovation Sweden</b> Facilitators: Gloria-Karin López, Forum for Social Innovation Sweden, Malin Lindberg, Guest Professor of Social Innovation, Malmö University, Andreas Hellström, Senior Lecturer at Chalmers University of Technology and Vice President of Kraftens Hus, Charlotte Forsberg, Director of Kraftens Hus Stockholm, Päivi Juuso, Associate Professor in Nursing, Luleå University of Technology</p>	<p>WORKSHOP</p> <p><b>Effectuation for Entrepreneurship</b> Facilitator: Ulrika Persson-Fischier, Swedesd, Uppsala University.</p>
15:15 - 15:35	<p><b>Coffee and Fika</b></p>	
15:35 – 16:20	<p>PANEL DISCUSSION</p> <p><b>Panel: How do we scale-up and get long-term commitment to social innovation?</b> Panelists: Andréa Råsberg, Reach for Change, Mathias Blob, UU Innovation and Tori Ford, Medical Herstory Facilitator: Mats Målqvist, SIHI Sweden</p>	
16:20 - 16:30	<p><b>Closing remarks</b></p>	

# PROGRAM WEDNESDAY NOVEMBER 6

## KEYNOTE PRESENTATION

### **The Power of Innovation: Driving Value Creation Through Research and Social Entrepreneurship**

*Speaker: Samer Yammine, Karolinska Institute*

This session will explore how research and social entrepreneurship can collaborate to create meaningful and sustainable value in today's world. Businesses and organisations must go beyond traditional methods to innovate and drive impactful change in a rapidly evolving global landscape. The session will delve into the critical role of research in identifying opportunities for social innovation and how entrepreneurial strategies can transform these opportunities into scalable solutions.

**Samer Yammine** is a passionate entrepreneur and educator deeply involved in science research, particularly epigenomics. He is dedicated to shaping the future of healthcare education, strongly focusing on biodesign, innovative strategy, and business development.

Samer's mission is clear yet profound: to revolutionise education by aligning it with the needs of today's learners and preparing them to tackle future challenges. We invite you to join Samer in his efforts to transform the research landscape through innovative social innovation and forward-thinking strategies.

## SOCIAL INNOVATION PRESENTATIONS

### **Platinea: a Swedish collaboration platform for innovation of existing antibiotics – how we developed 10 solutions against antibiotic shortages**

*Speaker: Enrico Baraldi, Uppsala University*

The presentation focuses on how stakeholders from the four sectors of healthcare, academia, public authorities and industry collaborated to identify causes of and then solutions against antibiotic shortages through a structured interactive approach.

**Enrico Baraldi** is Chaired Professor of Marketing at Uppsala University. His research covers industrial networks, innovation management, business strategies, science & technology studies (STS), academic entrepreneurship and industrial and research policy. He is also involved in developing and promoting solutions to address the challenge of antibiotic resistance. He leads the collaboration platform PLATINEA for innovation of existing antibiotics, with a focus on antibiotics shortages, and has worked in the DRIVE-AB project about new economic models to stimulate antibiotics R&D. His research is published in, among others, Academy of Management Perspectives, California Management Review, European Management Journal, Technovation, Industrial Marketing Management, Journal of Business Research, Science& Public Policy, and The Lancet.

### **How did we make social innovation happen? Examples from Forum for Social Innovation Sweden.**

*Moderators:*

Malin Lindberg, Guest Professor of Social Innovation, Malmö University, Sweden  
Gloria-Karin López, Forum for Social Innovation Sweden

*Presenters:*

Andreas Hellström, Senior Lecturer at Chalmers University of Technology and Vice President of Kraftens Hus  
Charlotte Forsberg, Director of Kraftens Hus Stockholm  
Päivi Juuso, Associate Professor in Nursing, Luleå University of Technology

How can social innovations in health be realized in practice? What organizational forms, financial resources and human engagement are needed in the transformation from innovative ideas to practical solutions? Researchers from the academic network of Forum for Social Innovation Sweden (Mötesplats Social Innovation) present their experiences of developing new knowledge-based solutions to societal challenges in mental and physical health. They will present the examples Kraftens hus (House of Power) by and for cancer-affected, as well as Nature-based interventions to promote mental health.



**Malin Lindberg** is a Guest Professor of Social Innovation at Malmö University, at the Department of urban studies and Forum for Social Innovation Sweden (Mötesplats Social Innovation). She studies innovation in the civil society and in cross-sectorial cooperation.

**Gloria-Karin López** is a Project Manager at Forum for Social Innovation Sweden (Mötesplats Social Innovation). Her field of expertise lies in the intersection of human rights and sustainability challenges with cross-sectorial experience from academia, a social enterprise and the non-profit sector.

**Päivi Juuso** is a registered nurse, district nurse and associate professor in nursing at Luleå University of Technology. In her research, she focuses on the importance of nature for health, more specifically how nature-based interventions can prevent mental illness. In interdisciplinary projects, she investigates how different actors can work together to contribute to health promotion, regional development and social innovations in health.

**Andreas Hellström** (Ph.D.) is a Senior Lecturer at the Department of Technology Management and Economics at Chalmers University of Technology. Andreas has extensive experience in action research and innovation work within healthcare and the public sector. He is also one of the co-founders of Kraftens hus and has been involved in driving the development of the organization from its initial idea to its current national expansion.

**Charlotte Forsberg** is a registered nurse and has a master's degree in quality improvement and leadership. She is the operations manager of Kraftens hus (House of Power) in Stockholm, which is a meeting place for those affected by cancer, including those who have been diagnosed with cancer, those who are close to someone or have lost a friend to cancer.

## **Crowdsourcing for health: An introduction**

Speakers:

*Joseph Tucker, University of North Carolina at Chapel Hill & London School of Hygiene and Tropical Medicine, Eneyi Kpokiri, London School of Hygiene and Tropical Medicine, Ruby Wang, UK Royal Society of Medicine and SESH*

In 1907 the crowd at a county fair accurately estimated the weight of an ox. The median estimate of the crowd was more accurate than estimates from farmers and other experts. This startling observation demonstrates the wisdom of the crowds or communities in specific contexts. Crowdsourcing is the process of having a group of people collectively solve a problem, then share back solutions with the community. Crowdsourcing approaches have been used to identify social innovations, iteratively develop interventions, spur community engagement, and inform guideline processes. This talk will provide practical tools related to crowdsourcing for health, share open access resources, and introduce a recently developed WHO/TDR guide on participatory health approaches.

**Joe Tucker** is an infectious diseases physician with a passion for social innovation. He is a Professor of Medicine at the University of North Carolina at Chapel Hill, a Professor of Global Health at the London School of Hygiene and Tropical Medicine, and member of the WHO/TDR Global Working Group. He now leads US NIH research grants totalling 29M USD, published 559 manuscripts, and helped to develop several WHO/TDR guides related to participatory health approaches. He has a special interest in research mentorship and strengthening capacity for participatory research.

**Eneyi Kpokiri**, PhD is a Clinical Pharmacist and Assistant Professor at the London School of Hygiene and Tropical Medicine, London, United Kingdom. Her research focuses on identifying and implementing social innovations in health with the use of community-engaged, participatory methods including crowdsourcing and hackathons. She has conducted several global crowdsourcing open calls, designathons and other public engagement methods for health research.

**Ruby Wang** is a practising Medical Doctor in the UK, Digital Health Council member at the UK Royal Society of Medicine and Director at LINTRIS Consulting, where she advises on health policy and health technology. She is currently supporting a research project looking at "Generosity in Medicine" at GDDH in Guangzhou, as part of SESH Global's long term collaborations between London School of Hygiene and Tropical Medicine, University of North Carolina at Chapel Hill, and Southern Medical University in China. Her prior work experiences include: Head of Health for the UK Government in China at the British Embassy in Beijing, Health Adviser for the United Nations Resident Coordinator's Office in China, as well as for AliHealth, Alibaba and the British Medical Association.

Ruby clinically trained at University of Cambridge Medical School, University College London and University of Oxford-affiliated hospitals, with an MA in Neuroscience and Psychology from the University of Cambridge and an MSc/MBA as a Schwarzman Scholar at Tsinghua University.

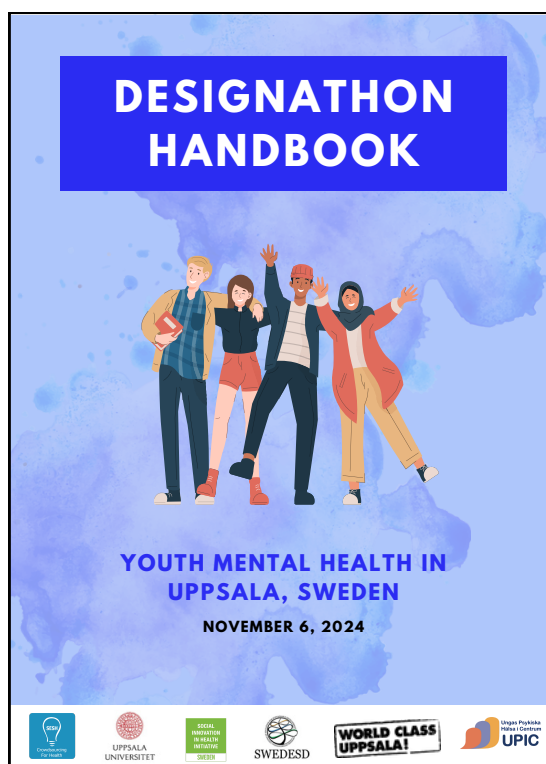
## WORKSHOP

### Designathon – Innovation for Youth Mental Health

Facilitator: Joseph Tucker

How can we improve mental health among young people in Uppsala? This question will be explored in a designathon. A designathon is a three-step participatory process that includes preparation with end-users, intensive collaboration, and some follow-up activities. We have invited youth based in Uppsala to together with conference attendees develop innovative and creative ideas on how to improve mental health for youth in Uppsala. We will together try this participatory method to develop new innovative ideas for change.

Access the designathon handbook [here](#).



# PROGRAM THURSDAY NOVEMBER 7

## KEYNOTE PRESENTATION

### **Using Storytelling as a Social Innovation for Health**

*Speaker: Tori Ford, Medical Herstory*

In this talk, Tori Ford, explores how storytelling can be used to change the future of health experiences. She draws on her experience as the Founder of Medical Herstory, an award-winning international social impact organisation advancing gender health equity. By rethinking the traditional way of gathering and sharing medical histories, Tori is innovating how we build communities, conduct research, and create impact. She will be reflecting on her journey as a gender health advocate, providing practical reflections about entrepreneurship, and thinking about how to ensure the sustainability of the health equity movement.

**Tori Ford** is the founder of Medical Herstory, an international award-winning social impact organisation on a mission to eliminate sexism, shame, and stigma from health experiences. She is a feminist health researcher completing a DPhil in Primary Health Care at the University of Oxford funded by an NIHR Doctoral Research Fellowship. She holds a BA from McGill University in Gender Studies and an MPhil from the University of Cambridge in Health, Medicine, and Society. Her work on advancing gender health equity has been recognized by the Rising Star Champion Award and named a Top 25 Women of Influence. Tori is an outspoken patient advocate and has been featured in Hunger Magazine, Glamour, and Cosmopolitan.

## SOCIAL INNOVATION PRESENTATIONS

### **Collaboration for Innovation in Complex Contexts**

*Speaker: Klas Palm, Uppsala University*

We look at what the research says about managing innovation for social sustainability when many different societal stakeholders need to collaborate. We sniff out phenomena such as trust, design thinking, evidence-based care, systems theory and quality.

**Klas Palm** has worked with medical technology, organizational development and public relations. Klas is a social psychologist and is currently researching system-complex innovation management.

## **How can social entrepreneurship be used as a method for system change?**

*Speaker: Andréa Råsberg, Reach for Change*

What are the success factors and pitfalls when running a social enterprise? During this session Andréa will talk us through how Reach for Change works to support local social entrepreneurs to develop innovative and scalable solutions that improve the lives of children and youth. She will specifically focus on Next in Mind, an initiative to empower and invest in nordic mental health solutions for emerging adults.

**Andréa Råsberg** is passionate about system change, and believes in including those living close to the challenges in achieving that. She has over 15 years of experience working primarily with social innovation and entrepreneurship, but also to design and lead processes for societal change and system innovation. She has done so both in the public- and private sector as well as civil society, where previous employment includes both Vinnova, SE Forum and Fairtrade. Andréa is today Country Manager at Sweden at Reach for Change, an international global non-profit founded in Sweden 2010 unleashing the power of local social entrepreneurs to create a world where all children and youth reach their full potential.

## **PARALLEL ORAL POSTER PRESENTATIONS**

### **Trash 4 Health Innovation**

*Speaker:* Muhammad Abdullahi, Queen Amina Medical Integration

Trash 4 Health Innovation is the first of its kind on earth, a social health enterprise company that leverages plastic waste to create essential healthcare access for all people living below the bottom of the pyramid in underserved communities everywhere. People who are low income and yet suffering from silent killer preventable diseases (Diabetes & hypertension) are allowed to trade and exchange their plastics for essential lifesaving medications they need, the company targets women of child bearing age and low-income men.

The company is aimed at helping the world achieve universal health coverage (UHC). By combining sustainable plastic recycling practices with health solutions, we tackle both environmental and public health challenges, creating a scalable, sustainable model for healthier, empowered communities worldwide.

### **Healthy Futures South Africa - Strengthening Primary Healthcare through Social Entrepreneurship in Health**

*Speaker:* Gillian Vedan, Bertha Centre for Social Innovation and Entrepreneurship

The Bertha Centre at the University of Cape Town and with the support of the Mastercard Foundation, is working to strengthen health systems through social entrepreneurship in health. Under the Health Entrepreneurship Pillar of the African Higher Education Health Collaborative (AfHEHCo), the Bertha Centre team ran a variety of programmes for health innovators and entrepreneurs in the Western Cape of South Africa during 2024.

## WORKSHOPS

### **How can we make social innovation happen? Inspiration from Forum for Social Innovation Sweden**

In this workshop, we invite conference participants to discuss what it takes to transform innovative ideas into practical solutions when tackling societal challenges in mental and physical health. The discussions will be inspired by the experiences of realizing social innovations in health by researchers from the academic network of Forum for Social Innovation Sweden (Mötesplats Social Innovation). This will be based on the examples Kraftens hus (House of Power) by and for cancer-affected, as well as Nature-based interventions to promote mental health.

#### **Facilitators:**

- Gloria-Karin López, Forum for Social Innovation Sweden
- Malin Lindberg, Guest Professor of Social Innovation, Malmö University, Sweden
- Andreas Hellström, Senior Lecturer at Chalmers University of Technology and Vice President of Kraftens Hus
- Charlotte Forsberg, Director of Kraftens Hus Stockholm
- Päivi Juuso, Associate Professor in Nursing, Luleå University of Technology

### **Effectuation - a strategy to go from idea to innovation to entrepreneurship**

In this workshop you will try out the strategy of effectuation, a way to move forward to entrepreneurship by dealing with uncertainty. The strategy has been developed by professor Saras Sarasvathy and is widely used within entrepreneurship education.

You do not need to prepare before the workshop. You will learn the tool, which you then can apply in your own future work.

**Facilitator:** Ulrika Persson-Fischier holds a PhD in anthropology, she focuses her research on sustainability and developing educational programmes.

## PANEL DISCUSSION

### **How do we scale-up and get long-term commitment to social innovation?**

Moderator: Mats Målqvist

Participants: Andréa Råsberg, Reach for Change, Mathias Blob, UU Innovation, Tori Ford, Medical Herstory.

# ABSTRACTS - POSTER WALK

## Trash 4 Health Innovation

Muhammad Abdullahi, Queen Amina Medical Integration

Trash 4 Health Innovation is a groundbreaking Social Health enterprise that pioneers the fusion of artificial intelligence (AI) and environmental consciousness to address pressing issues in Africa. As the first of its kind on the continent, our innovative approach aims to tackle both health disparities and environmental pollution simultaneously. At the heart of our initiative is a unique exchange program that empowers individuals to trade their plastic waste for essential lifesaving medications. This revolutionary concept leverages AI to create a symbiotic relationship between healthcare and environmental sustainability. The platform not only addresses the urgent need for access to medications in underserved communities but also contributes to the reduction of plastic pollution, a growing concern across the globe.

Our platform serves as a bridge between two critical challenges faced by many African communities: inadequate access to healthcare resources and the escalating environmental crisis. In numerous regions, individuals struggle to afford essential medications, leading to preventable health issues and even loss of life. Simultaneously, plastic pollution poses a severe threat to the environment, affecting ecosystems, wildlife, and human health.

Here is how our innovative solution works:

1. **Plastic-for-Medication Exchange:** Users can collect and deposit plastic waste at designated collection points established by our Company. Our AI-driven system assesses the value of the contributed plastic based on factors such as quantity, and recyclability.
2. **AI Valuation System:** The AI algorithm accurately evaluates the plastic's worth, determining the amount of medication credits users receive in return. This ensures a fair and transparent exchange process, encouraging active participation in plastic waste management.
3. **Redemption for Medications:** Accumulated credits can be redeemed for a range of essential medications available on our platform. This includes medications for prevalent health issues, such as Diabetes & Hypertension.
4. **Community Impact:** By engaging communities in the plastic-for-medication exchange, we not only address immediate health needs but also foster environmental awareness. This dual impact enhances community well-being, offering a sustainable solution to health challenges while actively contributing to plastic waste reduction.



## **Financing and Community Engagement for Suubi Health Center in Uganda**

Denis Muwanguzi, Budondo Intercultural Center

Despite extensive research about the causes of high maternal health-related morbidity and mortality in Uganda, this pool of knowledge is yet to make significant positive maternal and child health outcomes. Budondo Intercultural Center (BIC) has worked in Luuka District, Uganda for nearly a decade to address obstacles to access to health care. Professor Lydia Boyd from the University of North Carolina - US has been conducting maternal and child health research in our catchment population to support our evidence-based interventions. Preliminary findings from this research and BIC's experiences indicate that the top three determinants of maternal and neonatal health outcomes in this region are i) cost of seeking care, ii) access to transportation to and from health centers, and iii) lack of social support for the mother.

BIC's previous experience and collected evidence have informed its social innovations to improve maternal health financing and outcomes. They include;

1. Motorcycle loan initiative which generates approximately \$75,000 annually to finance health services and household income.
2. A stand-by motorcycle at our community health center to transport pregnant women from and back to their homes.
3. A permaculture model farm not only demonstrates regenerative agriculture but also yields food for the staff feeding program thereby reducing the cost of providing healthcare
4. A community outreach strategy including home-based care and forum theater plays for increasing community dialogues on maternal and child health
5. A community-based network of 500 households clustered into 21 groups across 16 villages. These are trained and work on population health and environment interventions.
6. Partnered with US-based Segal Family Foundation, The Woven Foundation, Mama Hope and Mainsprings and Australia-based Partners for Equity to increase financial support.

Results from the innovations include 20,000 health service use cases annually, 65% of the community health center operational cost covered by locally generated income, and a knowledge translation pathway from lessons learned to health program designs and interventions. However, BIC's work and experience is missing a robust evaluation, learning, and documentation framework that articulates evidence that these social innovations produce significant health outcomes in similar low-income settings.

## **Collaboration platform - everything an employer needs to know**

Åsa Fichtel, Samordningsförbundet Uppsala län

### **Background**

Financial coordination takes place between the Social Insurance Agency, The Public Employment Service, municipalities, and county councils through Coordination Agencies. The collaboration agency in Uppsala County covers eight municipalities. The interventions target individuals with social, medical, and occupational rehabilitation needs via staffed professionals from member organizations and are also targeted towards supporting better local collaboration.

The agency in Uppsala has three main focuses; financial help to collaborating projects, facilitating collaboration between the authorities, and being a knowledge mediator. Even though there is a lot of information about support systems for employers and officials working with the target group this information is found at different webpages and sometimes it is really complicated to find out where, how, and what kind of support you can get from different authorities.

### **Methods**

To collect information a platform was built where linkage to relevant homepages were made. Headings were: The role of authorities, The role of the mentor, Preventive and health support, Inspiration and tools, Disabilities, and Mentor education.

### **Results**

Since this is not a scientific work it can not be evaluated as such. A lot of positive reactions have been noted from mainly workers meeting the individuals that been helped by this platform.

### **Discussion**

A platform that can be used by, employers or authorities helping individuals in need for rehabilitation can be a useful tool to improve information and support. However, even though the platform works with external links it has to be updated regularly which needs mancraft. Since collaboration agencies are not that well known it requires effort and money to communicate with the target groups for the platform, a work that might need more resources than a collaboration agency has. It might also be hard to know the exact target group for this platform. Since it is more of a facilitator the outcome is also hard to evaluate scientifically. However, this platform is a unique result of collaboration that no other authority would take. Since it can upscale the skills of staff and employers from a broad area from many different areas it might be called a social innovation.

## **Increased competence and effective coordination by the Collaboration Agency**

Annika Sagström, Samordningsförbundet Uppsala län

### **Background**

The Collaboration Agency in Uppsala County plays a central role in financial coordination enhancing cooperation among various authorities, aiming to address social, medical, and occupational rehabilitation needs. Covering 8 municipalities, it facilitates financial coordination and collaboration between the Social Insurance Agency, The Public Employment Service, eight municipalities, and Region Uppsala. This collaborative effort is crucial for supporting staffed professionals from member organizations to deliver effective interventions. The agency also has a close collaboration with Uppsala University regarding the development of various interventions. The agency focuses on three main areas: providing financial assistance to collaborative projects, fostering cooperation among authorities, and serving as a knowledge hub. By ensuring knowledge spreading across stakeholders, the agency elevates competence levels among staff from different authorities. This collective approach enhances the overall quality of services provided.

### **Methods**

Three different methods have been used depending on the target group and the type of skills development: developing digital platforms for employer information, training of trainers in competency enhancement, and financing of responsible personnel for external financial projects.

### **Results**

Through these innovative initiatives, the agency addresses identified needs effectively. The impact of these interventions is notable. Scaling up dissemination of knowledge that promote societal integration through employment the work contributes to improved mental health among the target group. Additionally, by financing a role that ensures external funding does not only fill knowledge gaps but also optimizes resources and improves outcomes for individuals and organizations involved. This has led to successful projects financed with approximately 150 million SEK for Uppsala County.

### **Discussion**

The Collaboration Agency in Uppsala County exemplifies an innovative model for scaling up knowledge and fostering collaboration across authorities, it ensures sustainable improvements in service delivery and community welfare. This coordinated approach sets a benchmark for enhancing competence and achieving meaningful societal impact through collective effort. The agency's innovative initiatives aim to improve service quality, optimize resources, and ultimately contribute to societal welfare through enhanced competence and impactful collaborations.

## **Co-creating restoration and integration services for human trafficking survivors in Mexico: A case study in social innovation and social entrepreneurship**

Sara Aldén & Shepherd Urjene, SWEDESD Master's Programme in Implementation, Transformative Learning and Sustainability

Human trafficking survivor service providers are poorly understood societal actors that play an important role in helping victims recover from trauma, build independent productive lives and reintegrate into society.

The aim of this case study is to investigate the involvement of trafficking survivors in their own restoration and integration process through holistic care, education, job training and social enterprise development. This study explores how well the business' service model fits social innovation criteria, beneficiaries' influence on its development and implementation, opportunities for their improved and future involvement, and ways that the social innovation may strengthen survivors' social health.

The case study utilizes qualitative data collected from individual and group interviews, observations and documents to investigate the enterprise's evolution and implementation, providing unique insights into its collaborative development and how it aims to meet the needs of a hidden, stigmatized population.

The study applies theoretical constructs from social innovation, social enterprise and transformational services to the Mexican case study context. Key findings include the discovery of bi-directional teaching, learning and empowerment among survivors; an increase in co-design and co-production activities in line with mental health improvement and core skill acquisition; the negative effects of poverty and lingering trauma on social innovation co-creation and expansion; and the positive effects the social innovation process, environment, benefits and outcomes have on survivors' social health. It also suggests the important roles that partnerships, survivor leadership and social learning may play in future innovation co-creation.

This study fills a research gap regarding the process, context, limitations and benefits of collaboratively developing social enterprises and innovations with and for sex trafficking survivors in low-resource settings.

## **Optimizing vaccine rollout strategy through a co-design approach to generate demand and enhance vaccine response**

Wosene Berhanu, Karolinska Institute

Cervical Cancer (CC) is a major global burden of disease. Despite the disease being highly preventable, its mortality and morbidity rates remain very high in Low- and Middle-Income Countries (LMICs) (Mullapally, 2024). The disease can be prevented through proper Human Papilloma Virus (HPV) vaccination and screening. However, the response towards these prevention mechanisms is very low in the LMICs (Thinley, 2021). The prevalence of the disease and the outcomes is devastating in Ethiopia. (WHO, Cervical Cancer , 2024). Due to multiple factors, the vaccine strategy and the health sector's approach of implementing the disease prevention face challenges (Getahun, 2013).

Significant efforts have been made thus far to alleviate the burden of diseases, and the Sustainable Development Goals (SDGs) represent one of the substantial endeavors. Health is one of the prominent components of agenda 30. Therefore, this project will utilize the SDGs as a framework to explore strategies for enhancing community awareness and uptake of HPV (UN., 2024). In addition, the research will also make a significant contribution to accomplishing SDG 1: No poverty, SDG 3: Good health and well-being, SDG 5: Gender equality, SDG 10 Reduce inequality and SDG 17 Partnership for the goal by integrating them into research process.

The project aims to develop a demand-generated vaccine response using the co-design method, specifically designed with and for girls in Ethiopia. The goal is to foster stronger community engagement towards prevention efforts. Through collaborative design processes, we seek to create a vaccination program that addresses the unique needs and challenges faced by girls in Ethiopia, ensuring their active participation and ownership in the prevention of vaccine-preventable diseases. Consequently, the prototype will be tested based on the feedback from the stakeholders and based on the monitoring and evaluation result of the project.

The findings and the designed solution from the project can serve as a model for other regions facing similar challenges, thereby contributing to global efforts to reduce the burden of CC and improve public health outcomes.

# **Effectiveness of TKTX-Cream in Reducing Pain and Fear During Pediatric Venipuncture: A Randomized Controlled Trial**

Sherzad Khudeida Suleman, PhD Student and Karin Enskär, PhD, Professor, Uppsala University

## **Introduction**

Intravenous venipuncture in children can cause significant stress and anxiety, potentially leading to long-term behavioral problems. Current pain management techniques, like EMLA cream, require 60-90 minutes of application time and carry risks such as vasoconstriction and methemoglobinemia. Goal of study To assess the effectiveness of TKTX-Cream in reducing pain and fear levels in children during venipuncture procedures.

## **Methods**

This parallel randomized controlled trial involved children aged 6-12 years. The intervention group (n=44) received TKTX-Cream (5% lidocaine, 5% prilocaine, 1% epinephrine), while the control group (n=44) received no cream. Pain and fear levels were evaluated post-procedure.

## **Results**

The TKTX-Cream group reported significantly lower mean levels of pain (3.02 vs 6.88) and fear (2.52 vs 3.02) compared to the control group. The intervention group also showed decreased venipuncture attempts and duration, with no adverse effects beyond minor, tolerable dermal changes.

## **Discussion**

TKTX-Cream's accelerated onset time (20-25 minutes) offers a practical advantage over other topical anesthetics. Its improved safety profile and potential to enhance procedure outcomes through reduced pain and fear are noteworthy. Further research is needed to evaluate long-term effects and real-world applicability.

## **Conclusions**

TKTX-Cream is an effective topical anesthetic for managing pain and anxiety in pediatric venipuncture, with rapid onset and favorable safety profile. Implementation is supported, though further research on long-term effects is warranted. Implications for practice TKTX-Cream offers pediatric nurses an effective option for managing venipuncture-related pain and anxiety, with practical advantages in onset time and safety. Its implementation could improve the overall experience and success of venipuncture procedures for pediatric patients.

## **Healthy Futures South Africa - Strengthening Primary Healthcare through Social Entrepreneurship in Health**

Gillian Vedan , Bertha Centre for Social Innovation and Entrepreneurship

### **Background**

The Bertha Centre and UCT Graduate School of Business, in collaboration with the UCT Faculty of Health Sciences, is embarking on a 9-year project to strengthen Primary Health Care through social entrepreneurship in the Western Cape of South Africa. As part of the African Higher Education Health Collaborative (AHEHC) supported by the MasterCard Foundation, the Bertha Centre's role is to support youth entrepreneurs to establish social health innovations.

### **Description of the programme**

Bootcamps were designed to build entrepreneurial capacity through social innovation in health lens. The course material was developed at the UCT Graduate School of Business and is designed for student cohorts in urban, peri-urban and rural communities in the Western Cape. Ventures with social innovation in health focus are encouraged to enter a 5-week online Venture Launch programme to refine their ideas. After pitching to a judging panel, promising ventures move onto a 12-week Venture Scale programme to operationalise their innovations.

### **Results**

41 unemployed youth participated in Bootcamps. During the 5-week Venture Launch programme in August, 153 were onboarded, 75 completed the course, 38 students passed with >60%, 15 ventures pitched and 14 were promoted to the 12-week Venture Scale programme which will run until December 2024. Reducing drug and alcohol addiction, improving maternal health outcomes, improving nutrition and prototyping accessibility devices are some of the notable social innovations in health that have been pitched during these programmes.

### **Next steps**

Students receive Masterclasses and technical support to bring their health ventures to fruition. After completing the Venture Scale programme, ventures will be eligible to pitch for a share of ZAR1mil or kr580,000 in seed funding from the UCT Healthy Futures Innovation Fund and this fund is expected to grow across the 9 year duration. Social entrepreneurs will also be connected with impact investors in the health sector to ensure sustainable financing of early stage ventures. The Bertha Centre is also launching a Fellowship programme for postgraduate students with a focus on social innovation in health to build stronger health systems through social entrepreneurship in South Africa.

## **RFSU Innovation Fund**

Jacob Brunner, RFSU

The RFSU Innovation Fund is a dedicated funding mechanism aimed at supporting social innovation projects focused on addressing unmet Sexual Reproductive Health and Rights (SRHR) needs.

The Innovation Fund seeks to foster creative and innovative approaches to addressing SRHR challenges. It aims to support projects that leverage new ideas, methodologies, and technologies to improve access to SRHR information, services, and rights. The Fund prioritises projects that target unmet SRHR needs, particularly those affecting marginalised and vulnerable communities, ensuring that all individuals have equitable access to comprehensive SRHR support.



## **Social Innovations in Health Initiatives : Slow/ Sustainable Fashion as a Tool.**

Ehmeli Amengor Larsson, Msc Leadership for Sustainable Development/  
Sociology, Study Circle Leader

In recent times, slow fashion is becoming familiar especially among fashion enthusiasts who are more attuned with the sustainable discourses mostly surrounding health, environment and climate matters. Slow fashion can be synonymous with sustainable fashion, there are some similarities and slight differences between the two, however, for the purpose of this presentation I would like to focus on the slow fashion. Regardless, slow and sustainable fashion are fiercely competing with fast fashion which has fast become a global nightmare for people, health matters, communities, environment and climate as such especially in the global south. However, slow fashion has a great potential to mitigate this menace through social innovation impacting on health.

The marriage of slow fashion and health provides a fertile grounds and magnificent opportunity for social innovation in health addressing both human (social) and environmental well-being. Slow fashion is undeniably a sustainable alternative to fast fashion which has the potential to reduce carbon dioxide emission (production and usage of garment) and also promotes well being such as psychological, physiological well-being and social well-being of individuals and communities as a whole. Locally, Uppsala has the potential of being saved from 500 tonnes of carbon dioxide which impacts the local climate for example from clothing and textile discards.

The Sewing art/slow fashion Gang through active advocacy for social and behavioral change/ adjustment especially among consumers and most importantly the youth is relentless, like reusing "old" clothes, saving discards, even upcycling( which gives and promotes a sense of style, identity, skill enhancement and empowerment in one's choice of clothes just to mention a few. These do not only save the climate or environment but also promote human health, well being and social cohesion.

The habit of buying fast fashion products (which bothers in the form of addiction, spending sprees and unhealthy social sense of belonging) can be replaced through slow and conscious fashion. Participants who engage in upcycling for example in social circles develop a sense of belonging, inclusion, collaboration, social awareness and bonds.

## **Social Innovation In Health Care/ Intervention for Fibroid and Cysts.**

Ehmeli Amengor Larsson, The Ovary and Uterus Care Advocacy (HHHH)

Ovarian Cysts and fibroids are some of the reproductive health issues women in their 20s and 40s face usually prevalent among women of color. Though non-cancerous, they pose a huge discomfort mentally and physically in the patient. In most situations they are not detected early until later down the line during an emergency. Unlike Breast cancer, we are yet to find out how women can self check the existence of these tumors in the ovaries or uterus before they rupture or grow to further cause discomfort and damage in the patient. Usually surgery is recommended by a specialist in the hospital especially in these cases . In addition, there are also alternatives like contraceptives doctors prescribe including local Swedish Doctors. However, there are other proven and tested herbal medications for fibroid cases which should be encouraged locally if a patient finds herself in a discomfort position of fibroid detection.

Social Innovation in health interventions such as National and Global awareness creation similar to that of breast cancer should be adopted and publicized to create more awareness. Even though pockets of groups have taken initiatives there is a need for more and more health advocacy to be made.

In public places, conferences, hospitals, trains , subways, support at workplaces for patients through awareness creation and days designated for check ups for patients who happen to be women of color mostly tools for creating awareness and inclusion in the mainstream health discourse. In partnership with holistic health and wellness centers and practitioners who have prior knowledge and experiences in administering herbal interventions( from other countries) but in Uppsala are great sources of complementary interventions for treatment. Retreats are great opportunities that present support for groups or women who have had experiences of these can have a safe space to share their stories and provide peer counselling and help for others socially . This can serve as a source of comfort and create human connections fostering rapid healing. Adjustments in medical policies can create inclusion and thereby support patients to have a "voice".

# CONFERENCE DINNER

Those who have registered for the conference dinner, please arrive at Heart and Bones at 18.00. The dinner offers conference participants an excellent chance to enjoy delicious food in a relaxed setting while getting to know each other and making new connections outside the main conference environment.

For a map displaying the conference dinner venue with directions, please scan the QR code below using your smartphone camera.



**Heart and Bones, Drottninggatan 9, Uppsala**



**SCAN ME**

# DELEGATE INDEX

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# LEARN MORE ABOUT SIHI

## Webpage

Visit [SIHI Sweden's webpage](#) to learn more about the Swedish hub.

Visit the [webpage of Social Innovation in Health Initiative](#) to learn more about the global network.



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