

I bXYfghubX]b['cZYh b]WiCh YfbYggĐjb'fY`Uhjcb'hc' elderly care provision/ recipiency: empirical insights from Sweden

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What is this lecture going to be about?

of Swedish elderly care.

Results from two research projects that have aimed to shed which elderly care actor we are speaking of

are referring to an elderly care recipient or an elderly care provider?

And if so, what are the implications of our understandings for the planning and provision of elderly care as well as for cross-cultural interaction in health and social care settings?

Swedish elderly care and the specifics about ethnic relations in that context.



Demographics: the elderly population in Sweden

Population in 2011: 9 million+ Percentage of it that is foreign-born:



The elderly care debate takes, however, for [fUbhYX'h UhÅ "

Foreign-born older people pose a challenge to Swedish elderly care

appropriate.

The to this sector can be reduced to the -born older people with non-European backgrounds that have migrated late-in-life (i.e. those that constitute the minority)

Culture/ethnic specific initiatives for foreign-born older people are needed:

in 2004 the National Board of Health and Welfare carried out, for example, a survey in order to assess what different municipalities are doing to plan for this group.

50 million crowns were allocated by the same this agency in 2007 for the development of initiatives for this group of older people.



What is the empirical point of departure of this lecture?

A research project focusing on the Swedish public debate on elderly care (based on daily newspaper articles) that has touched upon issues having to do with migration, culture, ethnicity, language and religion (using content analysis)

This is a project that aims to unveil the understandings of ethnic Otherness that underline the discussions that these newspaper articles tap into.

Another one focusing on cross-cultural interaction in Swedish nursing homes (using ethnographic data - participant observation data and interviews)

This is a project that explicitly explores if and how understandings of ethnic Otherness have any relevance for cross-cultural interaction within the context of Swedish elderly care.



What is the state of the arts of research on a YX]UfYdfYgYbhUh]cbg'cZYh\ b]WECh\ YfbYggE3

how different types of media convey messages about different kinds of

Such as migrants, asylum-seekers, refugees and/or ethnic minorities.

Most of this research has unveiled an array of negative representations
Which I think may be because the focus has been on specific societal problems—such as crime, drug abuse, honor killings—as opposed to focusing on the settings in which social interaction

The project on the Swedish public debate was designed in order to contribute to this research gap

It focuses therefore on a context (i.e. a welfare sector - elderly care) that has not been studied within media representations

shifted over the past two decades.



The project on the public debate on elderly WUfY'UJa g'h YfYZcfY'hcÅ

Shed light on WHAT newspaper articles having to do with elderly care and focusing on migration, culture, ethnicity,

What topics have been discussed?



Themes discussed in the articles:

48.8% out of the 123 articles analyzed were about the need for cultureappropriate care

29.3% were about the recruitment of unemployed migrants to the sector

8.1% were about labor migration (the import of workers from other parts of the world)

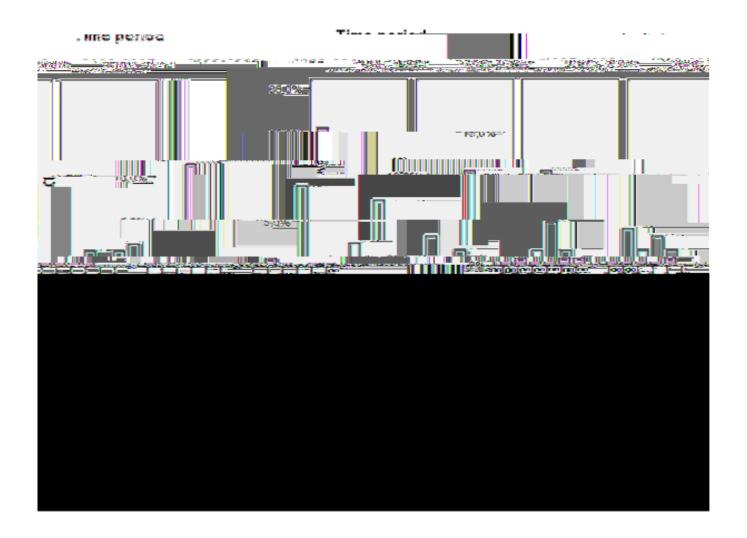
7.3% were about organizational and work environment issues

3.3% were about the sector as an arena for care-seeking migration

3.3% were about international lessons (i.e. things that the sector could learn from other countries)



Focus of the debate over time:





Topics being discussed in relation to type of elderly care actor (recipient, providers, relative) and ethnicity fGk YXYg'j g"Yh b]WHCh YfgHL



5 ZYk Yl Ua d`Yg'zfca 'l\ Y'UfljWYgÅ

patients at the new Finnish-Sami nursing home in Stockholm were considered impossible at their previous residence. They yelled and swore, or sat alone and depressed in their rooms. No one realized

make themselves understood. But research has shown that bilingual older people often forget their second language. After these aggressive patients were given the opportunity to hear and speak Finnish, they became calm and (27/12/1995, code no. 83).

elderly and it is expected that by 2050 one in ten Swedes will be older

that well educated, young Swedes do it would crush their dreams and also be enormously costly to the economy and the public finances. So why not let, say, Filipinos do it? They would earn more than they would have in Manila, and Swedes old as well as young would benefit from *More Immigrants Save the Swedish Welfare State*, published on April 5, 2008).



Some findings from the qualitative analysis:

Culture-appropriateness is discussed but never defined:



This project shows:

depending on which actor is in focus



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The project on cross-cultural interaction within YXYf`miWUfY`U]a g'h YfYZcfY'hcÅ

Shed light on how elderly care providers and elderly care recipients perceive those that are culturally/ethnically different from them.

And how they relate to them.

Analyze how the perceptions and interactions in question facilitate and/or inhibit the deliverance of high quality and user-friendly elderly care.



Methodological point and departure:

An ethnographic study:

Participant observation

333.5 hrs. of participant observation have been conducted during 60 days in the field

30 days x 2 settings

152 pages of observation protocols and an additional 30 pages of field notes (including room-planning drawings; settings descriptions and context-specific debriefing notes) have been collected.

A total of 125 people were observed during the course of the field work (63 were staff & 62 were patients)

Semi-structured interviews 37 semi-



Nursing home #1

Participant observation:

14 patients

all were ethnic-Swedes

25 staff members (2 were managers)

7 of them were foreignborn

Interviews:

20 interviews

11 care providers

2 of them were foreignborn

2 staff managers

5 patients

2 relatives

Nursing home #2

Participant observation:

48 patients

11 were foreign-born

38 staff members (3 were managers)

28 were foreign-born

Interviews:

17 interviews

13 care providers

5 were foreign-born

3 patients

1 relatives



I bXYfghUbX]b[g'cZYh b]WïCh YfbYggĐjb'fY'Uhjcb'hc' elderly care provision:

Lack of professionalism and being a co-worker (an ethnic-Gk YXY'WUfY'k cf_YftgdYWfj Y):



Lack of professionalism and being a co-worker (a a][fUbhWUfY'k cf Yftg'dYfgdYWfj Y):

that is because of their culture, is simple is where they

take mostly care of Swedes so I think we should be more like the Swedes in the workplace, they know what a

think that they are in their grandparents place and they can



Lack of professionalism and care-recipiency (an ethnic-Gk YXY'dUhYbhgDdYfgdYWhj Y):

more foreigners in the health care sector since for foreigner oneself. I think that it is enough with the

that it can become a bit strange, it can become more rowdy, there will be more discussions, it will become loud and it will maybe be behavior-wise in a different



Higher expectations regarding the ability to work culture-competently and care provision (a migrant care k cf_YftgdYWtj Y)

and the whole corridor was filled with people and they sitting here and they are screaming and crying and you say there are other people that live here that we must take care of, I forgot because I see it like my culture, we do like that started saying to them that they have to be quiet, that they

come from the same country like them so I was told off and reprimanded because I sat there quiet and calm and like



"Being-better-at-caring-g_]" gĐUbX' WUfY-provision:

problem with sitting down with the old people but Swedes,

an ethic-Swede



The findings from this project suggest:



Both of these projects suggest the following:

ways and can therefore be constructed differently depending on which worker) perspective one departs from.

These understandings are central to cross-cultural interaction in multicultural health and social care settings.

They can, for example, influence the policies we formulate and The practices we engage on



THANK YOU FOR YOUR ATTENTION!!!

For more information on these projects contact: sandra.torres@soc.uu.se

OR look for the publications which are listed per project - in the following homepage:

www.soc.uu.se/en/research/research-fields/the-social-gerontology-group