**CareSam**

A Cross-border Collaboration Contesting notions of elderly Care

Liveng, Anne; Christensen, Jonas

# CARESAM – A CROSS-BORDER COLLABORATION CONTESTING NOTIONS OF ELDERLY CARE

**Jonas Christensen, Anne Liveng**
*Malmö University, Roskilde University*

**Abstract**

This article presents findings and discussions generated on the basis of the Danish-Swedish development project CareSam. The article will *on the one hand* focus on how work in groups consisting of representatives from different levels in the elderly care sector at one time served as learning spaces and cultural encounters in which established notions of older people and elderly care were challenged and discussed. Inspired by action research these challenges were brought forth through discussions of and through insight in practical experiences. *On the other hand* it will focus on the tendencies to narrow the diversity of perceptions of elderly people and their care, which were also seen in the project and led to stories in which the meaningfulness of care work were honored. Departing from the interviews presented in the CareSam film and parts of the empirical material produced in connection to the work in the project-groups this paper will ask whether it is possible to represent care work for elderly people with all the ambiguities it holds: How can we as researchers represent both meaningfulness and straining dimensions of care work? Can we avoid either supporting Florence Nightingale-ideals or cementing negative cultural perceptions of help-needing elderly and the people who support them in everyday life? In answering these questions and thereby reflecting on our own work process we apply a caring, a learning and a political perspective. Hereby the article wishes to formulate a methodological point: The CareSam cross sector collaboration produced important experience near knowledge, but also lead to present somewhat one-sided understandings of elderly care. Applying theoretical perspectives to analyze the empirical material and the working process, nuances the understanding and makes it possible to maintain immediately conflicting dimensions in this kind of work.

KEY WORDS: Collaboration, Older and elderly care work, Welfare state, Learning, Representation.

**Anotacija**

Straipsnyje pristatomos bendro danų ir švedų projekto „CareSam" įžvalgos bei diskusijos. Viena vertus, dėmesys kreipiamas į tai, kaip darbas grupėse, kurios sudarytos iš skirtingo lygio specialistų, dirbančių su senais ir pagyvenusiais žmonėmis, buvo tapęs švietimo ir kultūros erdve, kurioje diskutuoti ir keisti nusistovėję požiūriai į pagalbą seniems ir pagyvenusiems asmenims. Naujas įžvalgas lėmė tyrimų rezultatai, aptarti diskutuojant, ir praktinės patirtys. Kita vertus, analizuojamos vykdant projektą pastebėtos tendencijos, kai siekiama susiaurinti požiūrių dėl pagalbos seniems ir pagyvenusiems asmenims įvairovę, tokios pagalbos prasmingumą. Šiek tiek nukrypstant nuo „CareSam" projekto filmuotoje medžiagoje pateiktų interviu ir darbo grupėse sukauptų empirinių žinių, straipsnyje keliamas klausimas, ar įmanoma reprezentuoti darbą su senais ir pagyvenusiais žmonėmis atskleidžiant visus jame slypinčius prieštaringumus: kaip tyrėjas gali vienu metu aprėpti ir prasmingumą, ir kylančias įtampas? Ar galima išvengti pasirinkimo tarp rėmimosi arba Florens Naitingeil idealais, arba neigiamais kultūriniais požiūriais į pagyvenusius asmenis, kuriems reikia pagalbos, ir jiems padedančius žmones? Siekiant atsakyti į šiuos klausimus, vadovaujamasi rūpesčio, mokymosi ir politine prieigomis. Straipsnyje formuluojamas toks metodologinis požiūris: „CareSan" tarpsektorinis bendradarbiavimas suteikė vertingos patirties ir žinių, tačiau kartu suformavo šiek tiek vienpusišką požiūrį į pagalbą seniems ir pagyvenusiems asmenims. Rėmimasis teorinėmis įžvalgomis analizuojant empirinius duomenis ir darbo procesą, padeda tinkamai sudėlioti suvokimo akcentus ir išlaikyti viena kitai prieštaraujančias šio darbo dimensijas.

Jonas Christensen, Anne Liveng

## Introduction

Caresam[1] was a Danish-Swedish collaborative project initiated by Malmö University and Roskilde University and supported by EU-Interreg funding. The project was implemented in 2011–2013. The aim of the project was to develop awareness and knowledge about care for the elderly across the Øresund. Despite many similarities in environment and culture there are differences in the Danish and the Swedish welfare systems and expectations for welfare in the two countries. Both have a long historical tradition of a universalist welfare state, but if you go closer to the actual welfare systems differences shows: in Sweden, for example, citizens pay a small amount for receiving home care, while home care services are free of charge in Denmark. Also training to work in public and private care varies. In Denmark exists one Social and health care education for all, while in Sweden there are two ways to train to work in elderly care, a primarily scholarly education targeting young people, and a more practice-oriented aimed at grown-ups, who have already experience of working in elderly care. Sweden also has the special Silvia Sister education aimed at working in dementia care. Future elderly are in both countries expected to make complex demands on the public health care services; partly on the basis of subjective wishes and desires, but also because of the complexity of diseases in the older part of the population and the many different cultural backgrounds in welfare states affected by globalization. These requirements must be met by leaders and the so-called "frontline workers". The majority of the latter have only short training and some have grown up with and are bearers of different cultures than the Nordic. Blackman (Blackman 2000, p. 181–190) among others point out the potential for cross-national learning that aim to address the consequences of ageing and particular types of social welfare provision and to consider services within the wider system they are part of. It is often that comparative perspectives are vital in outlining the different conditions of ageing throughout European countries. However the aims are not only transnational, they are national or regional as well (Walker, Lowenstein, 2009, p. 61–66).

The aim of the CareSam project was to provide a framework for sharing of knowledge and innovative thinking generating competence in elderly care by creating a network which consisted of employees, managers, educators and repre-

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[1]    www.interreg-oks.eu

sentatives of stakeholder organizations for the elderly. The network's goal was to contribute to an active dialogue on the future of care for the elderly in the Øresund region, where the labor market is changing, and both persons and skills move across borders. The region is an interface between the two countries and is similar regarding demographics and urbanization. The project, its seminars, meetings and group excursions served as learning spaces and cultural encounters, in which established notions of older people and elderly care were challenged and discussed. Lectures presented knowledge of and strategies for elderly care, groups discussed own experiences and practical examples were provided through visits to for instance dementia care units and care homes or by inviting professionals working with the inclusion of relatives in care. Care professionals were exchanged on a short time basis to work in the neighboring region. In this way the project facilitated a range of experiences and was able to contain multiple perspectives on the field. At the same time the project generated tendencies to narrow the diversity of perceptions of the elderly and their care, partly originating in the formulated desire to raise awareness of the work of elderly care. An understanding of care work as a meaningful and necessary activity in/of the human condition was shared between all involved. This meant that more difficult aspects of this kind of work not readily found way to the products by which we as researchers chose to represent the project. In this way the multiple voices included in the project collaboration simultaneously contested and restored the construction of elderly care.

## 1. The Project Process

In its design the CareSam project was inspired by the dialogue tradition in action research (Toulmin, Gustavsen, 1984). The idea in this tradition is that the researcher generates insights and knowledge though his or her direct involvement in social processes of change. Knowledge is seen as context bound, created in collaboration between the involved participators, who contributes to learning in a collective process. Researchers role are as facilitators and coordinators of the process. Action research is considered to be a developmental praxis, aiming not at producing universal knowledge but at qualifying professional work or organizations (Husted, Tofteng, 2012; Kildedal, Laursen, 2012). Hereby the tradition stands in opposition to a positivist, objectified approach to research.

The project was divided into three phases. The first phase consisted of four dialogue seminars, two held in each country, with lectures and discussions on important themes in the field. These themes were chosen by the research group. Participants in the seminars were invited broadly; representing education, management, care workers and NGOs. Between 50 and 150 representatives from the

field of elderly care attended the four seminars. Based on the dialogue seminars a diversity of knowledge, questions and visions were collected by the researchers, which formed the impetus for the work in three different project teams made up of employees, managers and educational representatives from the Oresund Region. At the last two seminar participants were encouraged to join the project teams. A number of people responded, so that each team had a size which made it able to organize itself and work together (approximately 10 participants in each team).

In the second phase these three teams worked separately, with researchers as documenters and arrangers, generating knowledge about their chosen themes: a) Educations for care workers, b) Future challenges in care work, and c) Dementia and dementia care. The teams arranged visits to nursing homes and dementia care units in the Region, invited lectures and presented own knowledge based on experience from work and other projects. Finally each working team hosted a seminar for all participants presenting their results. During the team work, participants were inspired, sometimes provoked from the ways work was being done at the different settings. Discussions pointed to both possibilities for change and to the restrictions experienced by economical and educational limitations in the field of elderly care.

In the third and final phase all material were gathered and discussed in the research group. Here it showed that an important theme in the three teams had been the question of meaningfulness in care work, which people with an insider perspective found obvious, but which they at the same time thought were invisible in the surrounding society. The dementia team was for instance preoccupied with possibilities of raising knowledge about the importance of the social and psychological aspects of dementia care in society as a mean to develop care. On the basis of these findings the research group decided to make a film (www.mah.se/caresam), addressing challenging, interesting and rewarding perspectives in present and future elderly care work. The themes from the three working teams were presented to a film producer who conducted interviews with the researchers. A design for the film was made including interviews with frontline workers; some of them had been involved earlier in the CareSam seminars and in the thematic groups, as well as recordings at elderly care settings which had been visited by the teams. The film highlights the questions: How can we stimulate interest in care for the elderly? How do we make more people interested in working in the care sector? What are the challenges they are facing as employees? In the film a number of Danish and Swedish care workers give their answers to why it makes sense to them to work in elderly care. In the film, the answers are structured into a number of themes, for example the importance of activities, the right environment, meeting with the elderly and the reputation of the profession. In this way the film contributes to the co-construction of elderly care as an important and meaningful job, drawing on

multiple voices from the sector. It can be understood as presenting "the insider perspective", or what Geertz (Geertz, 1974) labelled an experience near analysis.

## 2. Reflective ethnography on a development project

After ending the project we continued to meet in the research group. Having laid a distance to the project and its final product we became puzzled by reflections on what images we actually had contributed to create of elderly care. Did the film present a one-sided, idealized idea of care work? Had we really been able to grasp all the diverse and contradictory images and affects connected to care work? When we considered parts of the empirical material which was not used in the film, it seemed as if the aim of CareSam of "raising awareness" of elderly care had to some degree turned into a denial of the strains and frustrations connected to the work which were also present. To further analyze our material and thereby also re-construct the potentially narrow image represented in the film, we therefore decided to make a theoretically informed analysis in which we apply a care theoretical, a learning, and a political perspective on the material. These perspectives support an experience distant analysis and are presented in this article.

With the analysis we want to develop a reflective ethnographic approach (Davies, 1999; Liamputtong, 2007) to our work. By seeing it through the theoretical perspectives picked up from outside the project, it is possible at once to understand the processes we became part of as researchers, and to include the complex dimensions of elderly care work in our representation.

## 3. To be hit by realities – unpleasant images of elderly care work

To illustrate what was difficult to represent in a film aiming at creating interest in elderly care work we have chosen a anonymized example from the notes written by one of the researchers after a meeting in team; b) Future challenges in care work. The theme of the day is Visions for future elderly care. We are visiting a re-build nursing home in Copenhagen and have seen the refurbished departments and a newly landscaped garden. Tom, who is speaking in the first part of the sequence, is head of another nursing home. He came too late and visibly incensed, exclaiming he was "hit by realities". The researcher has written in her notes: "Back in the meeting room, we discuss the possibilities to make time for visions. Tom exclaims again that he is '*reality hit*' – and somewhat depressed because he is experiencing that the daily running of the nursing home takes all time and energy for both him and his employees." The team begins talk about the fact, that both in Denmark and Sweden elderly care homes are missing staff, and there are no indications that the

area will be given higher priority politically or economically in the future. Tom expresses a feeling of powerlessness and says: "All time is spend on keeping the smell of urine from the door." One of the other participants, Sue, suggests that one have to plan for A-day and B-days. It must be the responsibility of management to outline what needs to be prioritized under which circumstances, Sue argues. "What do we prioritize on the day when everyone is there and what do we do when there is absence among the staff. It is important to articulate both the quiet and calm everyday life and the pressed days, when we only have time to do just what we need to." The conversation moves to the difficulties of having in general 75 % of the residents at nursing homes suffering from dementia. They have been "sneaked into the homes" Pat says, without letting you have more money to work with. "Many of these residents do not know how to eat, how to go to the toilet and it takes a lot of hours for the employees to support them." (All names have been anonymized. Meeting notes were written and translated from Danish to English by Anne Liveng).

This excerpt is dense in the way several "unpleasant themes" of elderly care work are articulated in very few sentences. First we encounter the hopelessness and powerlessness expressed by an enthusiastic leader in the care sector: apparently there is a contradiction between his experience of everyday reality and the idea of formulating visions. The harsh realities consist of scarcity of staff *and* of unavoidable presence of bodily fluids, here urine, which in connection to the next sentences seem to symbolize bodily decay. Sue calls for responsibility of management to prioritize tasks (so that other than cleaning could be actual) – and she tries to nuance the "depressed" state of mind put forward by Tom, by making a distinction between calm days and pressed days. But her initiative to "teach" Tom how to master his job is immediately challenged by the rest of the team. A feeling of being cheated upon by the level of government is expressed by Pat, a middle manager, who picks up on both the theme of lack of staff and the theme of bodily decay. In contrast to Tom she is angry; the state of health of the residents demands in her opinion more staff, that the homes can afford to employ. Touching upon recent politically determined cost savings on elderly care and other public benefits and upon "care work related to situations of decline" (Wærness, 1982) this short sequence deals with subjective experiences of important dimensions of public care services for elderly.

## 4. Relations and recognition – constituting meaningfulness

Experiences as the one described above could not be traced in the film; rather what could be labelled a "discourse of meaningfulness" (Ducey, 2007) constituted

the red thread through the film. The film was intentionally created with the purpose to stimulate interest in and raise awareness of the importance of elderly care services. This intention was sought fulfilled through a number of interviews with care workers and half-documentary video recordings showing care workers handling central tasks and challenges of the work. The interview questions centered both on the reasons why the care workers were in their jobs, what they found satisfying, but also on the challenges and difficulties they saw to the sector. Still a consensus on the importance and meaningfulness of the work came to dominate the film. To illustrate this, we have transcribed statements and expressions from care workers which are presented in the film. As the transcripts illustrate meaningfulness is related to the care-relation, but also to possibilities of learning as well as to reflections about own professional role and importance.

Care work is characterized by a professional closeness with older people. As Maria says "The thing that is so giving for me is working with people." Central to all the interviewed employees is the relationality of the work. It means that the care worker potentially receives a direct recognition from the elderly she supports. Vera for instance points out the giving and taking when being a part of the daily life of the elderly at a nursing home: "You get a lot back from the elderly… when you have helped them with something they give you a smile…, a hug… or they say: I am so happy you did this for me… you simply feel that you have done something that is good for them… and they are content."

The various meetings are in themselves described as fulfilling in a way that is not replaceable in many other occupations. Paul focusses on the diversity of human beings meaning that no working days are the same; "Its about being together with people and no days are the same… You are meeting fifteen different people… and can't do anything the same way… some days things go easily and other days you think "Oh my God…", but that's what's so exciting… it gives a lot…" As Sue in the team meeting talks about calm days and pressed days, Paul acknowledges the extreme poles of the work: it can almost be heaven or hell, but that is what he likes about it. To him care work will never be routinized, as every person he meets is unique.

## 5. Learning and professional reflections

The diversity of the work is appealing to several of the interviewed care workers. Together with the encounters with different live situations and a variety of illnesses the work provides according to the employees multiple potentials for learning. As in the excerpt from the team group meeting the interviewed reflects on the different situations in which they balance their professional role.

The historical dimension as being part of the elderly´s life and the connection between the care worker and the elderly is a linkage between past and present. Being "invited" into the home and life of the elderly person can be experienced as an honor. Ingrid expresses it in this way: It's their home and you have to show a lot of respect… what I enjoy is getting to know them at home… where you can experience them at home… for example you see pictures… and insights into how they have lived. In this expression, there is both a professional and personal meaning. Ingrid needs to be a guest and humble listener as well as a professional care worker carrying out tasks in the home of others. She must integrate personal interest and professional values, knowledge and competence in a way so that the elderly feel that Ingrid as a care worker is accepted to be part of daily life. There is a conditional, continuous learning perspective under the condition that you are professionally aware and open towards the elderly. As Alicia express it; You learn something new every day at work and from the elderly… they have so much wisdom that can´t be found elsewhere… if you listen actively and show some commitment you can learn things. Visiting many elderly every day is not perceived as a problem for Alicia. The satisfaction in a relational work as elderly care work could be seen as dependent on personal interest and knowledge but also a relatively high level of autonomy is crucial for the satisfaction (Kamp, 2012, p. 108), as the relation cannot develop without autonomy.

The diversity of needs in itself potentially adds learning to the work whereby the expressed meaningfulness gains more professional dimensions. Tilde express "Also, you learn a lot through meeting different people… and gain knowledge about illnesses… Their needs are so diverse… that you are always learning something new. Hackman and Oldham (Shields, Johns, 2016, p. 25) point out that when a job is having high complexity dimensions like task identity, task significance, skill variety, autonomy and feedback, this will have a strong impact on meaningfulness, responsibility and identification in the work and this create motivation. An example of taking responsibility can be seen when Anna is going to help Mrs X to put on her compression stockings. Mrs X's husband has recently passed away and in the film sequence Anna reflects on and explains the purpose of her visit at Mrs Xs apartment: We are going to help Mrs X to put on her compression stockings… but in reality the visit is more about the social comfort… to give her a hug and hear how she is doing… it's really hard for her and it´s really nice to bring energy for her.

The aspect of identification leading to motivation is further expressed by Sofia; I think it's really exciting to have my work space within other people's homes… I get this special feeling when I go into someone's home… and experience their life… for example, knowing that their table cloth has a history… these relations…

and the closeness and the personal space… I think that's really interesting and exciting and why I belong in home care. Altogether, what these care workers are showing and express is dedication and content to a daily work with elderly where meaningfulness and interplay with clients is outspoken.

## 6. Elderly care work – meaningful and anxiety provoking?

In this section we apply a care research perspective inspired by the Nordic tradition initiated by the Norwegian sociologist Kari Wærness. The research and theory of the Wærness is often used in a Nordic context and has formed the basis of a feminist critique of the modernization of elderly care (Kamp, Hvid, 2012, p. 105–109). Wærness pointed to "a rationality of care" (Waerness, 1989), which characterizes home helpers engagement in their work with the elderly. The concept of care rationality reflects a subjective orientation among care workers, which can be challenged by the way care work is organized under New Public Management (Szebehely, 2006). Care workers often act according to a rationality, which is not formal or abstract, but pay attention to the immediate needs of the elderly and try to fulfill these needs in the daily practice. Fulfilling these needs is meaningful in itself due to a rationality of care. A number of quantitative investigations support Wærnes' theory – and the findings of the centrality of meaningfulness, which we encountered in the CareSam project. Research made by the Danish National Institute of Occupational Health shows that the main motivations among trainees in the Social and Health educations are the wish to work with human beings and to help others who cannot care for themselves (Nabe-Nielsen et al., 2005). In Norway, too, this tendency is found among employees in the home based care for the elderly. The Norwegian care researcher Karen Christensen (Christensen, 1999) labels the work orientations of the employees "an orientation towards the other". Danish research in the home based care of the elderly draws a picture of a work field which is both physically and mentally straining, but also a picture of dedicated employees who find their job meaningful (Chrisiansen et al., 2002). Newer research has focused on the sense of meaningfulness in care work for the elderly, finding that the relational aspects of the work are central to care workers if they are to find their work meaningful (Tufte et al., 2011; Liveng, 2007). At the same time as the meaningfulness is recognized in Nordic care research, it's straining dimensions are as well. Wærness (Waerness, 1982) analyzes care work for the elderly as integrated in a patriarchal and biomedical hierarchy. She distinguishes between three categories of public paid care work, placing care work for the elderly in the third and least valued category: Care work connected to situations characterized by decline. The three categories of paid care work are ascribed different societal status; workers

will be paid differently and will gain different levels of cultural recognition. The third category of care work is problematic to organize according to economic-technical rationality, as the positive results of this kind of work are often invisible to others but people very close to the old person in question. Wærness deals with the societal devalorisation of elderly care work, while understandings of the subjective strains of care work for the elderly is unfolded in a range of theories dealing with the meaning of death and bodily decay. Supplementing Wærness and drawing on Mari Douglas groundbreaking work (Douglas, 1970), Isaksen (Isaksen, 2003) thematizises care work for elderly as inscribed in a hierarchy of body and dirt. Elias (Elias, 1985) carries out an analysis of the relation between anxiety of death and the process of civilization. Isaksen and Elias talk about the repression of bodily decay in western culture, which means that work with decaying bodies, take place hidden from "the world of the living". The professional, gendered and bodily hierarchies in which care work is inscribed have been seen as explanation for the "crisis of recognition in care work for elderly people" meaning that the logic of care isn't recognized in the standardized organization of work (Liveng, 2008). The desperation expressed by Tom when he and his staff try to get rid of the smell of urine can be seen in connection with the bodily hierarchy, whereas the lack of staff can be connected to the low societal valorization of the work. As old people who need support from others to carry out basic bodily functions always represent decay or even death, the risk that the work activates the care workers' own anxiety of dying is always present. Similarly it potentially affects the researchers ability to represent these dimensions as we of course also are both societal, cultural and emotional beings whose anxiety can be activated through encountering illnesses and decay. It this way the care research perspective helps to explain why certain part of the empirical material, and thereby certain dimensions of care work were left out in the representation of the work as something interesting and worthy of raised awareness.

## 7. The conditional professional meaningfulness

Seen in the light of the above perspective meaningfulness of care work is fragile and conditioned: it depends on organizational framing, culture and work place support as well as on personal insights, serenity and emotional exuberance, which of course cannot be regarded as separate. During the recent decades, we have seen a move towards the ideas of New Public management, which in short has led to a larger differentiation and complexity of the eldercare system (Meagher, Szebehely, 2013, p. 13–21). In the kind of relational work, represented by Care work, personal knowledge of the client and a relatively high level of autonomy that makes it possi-

ble to adapt care to the individual and to the situation are crucial for conducting satisfactory work (Kamp, Hvid, 2012, p. 105–109). At the same time as the perceived meaningfulness might be changing as a result of political and economic forces there exist a dilemma. Professions are encountering many different demands and expectations from citizens; they are acting as "gatekeepers" between their professional competence and administration (Terum, 2003). In their work they have to balance relations offering both meaningfulness and hopelessness – and they have to balance the bodily and relational work with administrative tasks, such as planning, documentation and knowledge acquisition (Cossette, Pepin, Ricard, Xavier D'Aoust, 2006). Human service (Svensson, 2008, p. 135–137) organizations, to which elderly care belongs, represent a special kind of organization which is characterized by professional bureaucracies in which the relationship between collegial autonomy and control is crucial. Therefore, the care worker can be seen as a part of a professional system (Hoffer, Piontowski, 2007) based on their experience of their own profession; its codes, values, attitudes, social properties (including economic, ecological and cultural properties) and biological properties but also a part of a non-professional system. Societal demands on control, measurement and influence is challenging for the Care workers profession and it gives both new opportunities and problems for the professional development (Christensen, 2010, p. 108). Factors that are crucial and essential for every organization to take care of in order to stimulate and develop care workers professional competence and the ability of the work is to give recognition and enough space of activity and autonomy, using the individual's own potential of influence both within and without the organization. When values and autonomy becomes secondary, as in the case example where Tom sees his visions disappear, the meaningfulness of the work seems to be threatened as well.

## 8. A learning theoretical perspective on care work

As pointed to above the learning potentials of care work are closely intertwined with the organization of work and with the acceptance of its contradictory dimensions. Elderly care functions as a part of a knowledge-system on individual and organizational level where the needs of the elderly and societal needs interacts with each-other. When organization of care work has the potential to recognize the importance of self-thinking and active care workers, the professional development will be stimulated (Argyris, Schön, 1974). In a theoretical perspective the experienced dependence or independence which care workers feel in relation to their work place and organization is of great importance when looking upon knowledge acquisition and learning processes. "Learning is now seen by many researchers

as a process in which knowledge is formed integrated with the organization, and where learning of specific skills or practices go hand in hand and are difficult to distinguish from the development of the individual's professional identity and ways to participate in and act within the framework" (Hultman, Ellström, 2004).

If we view care work as an action-oriented discipline, then both action and intervention are essential elements of the identity of the professionals. In order to meet the elderly's needs, the professions involved need to be creative and focus on opportunities to organize work in the best way to fulfil the elderly's needs. Age and ageing are related to biological phenomena, but their meanings are socially and culturally determined (Featherstone, Wernick, 1995) which gives impact to the heterogonous needs among elderly. The care workers ability to define his or her professional sphere of influence can therefore be seen as defined in relation to the contextual level of freedom or lack of freedom that the care worker experience in the relationship to the elderly that he or she takes care of. The empirical material shows that the ability to coop on an individual, professional meso-social level must be regarded as a key-factor in the perceived meaningfulness. It also seems that factors such as the diversity of meetings with unique individuals, taking part in the elderly's life history and collegial collaboration influences professionally perceived meaningfulness. The care workers in their organizations reflect their own commitment and dedication to improve the quality of life of people in need which offer them the opportunity to practice and develop their professional and occupational skills (Hasenfeld, Yeheskel, 2009).

## 9. A political perspective

Timonen (Timonen, 2008) describes how we have to understand old age and care, namely that it affects us all, even those people who today are not old. He argues that ageism is a universal phenomenon and that it is not possible to isolate the conditions and discourses of old age from policies and socio-economic factors. Relations between the care worker and client include both social, legislative and instrumental components (Culbertson, Jeffers, Besser Stone, Terrell, 1993). The link between freedom of acting and limitations of the same may look different according to how the organizational and legislative components are translated into practice in a regional context. This translation gives the profession a certain position of power. Harnett (Harnett, 2010) has been discussing the usage of power and points out that although there are roles which are associated with power, it is important to emphasize that these roles only get their meaning when they are staged. This point of view is based on a relational perspective and where power is seen as something that is in constant negotiation. As shown by power is distributed be-

tween both clients and professionals *and* between professionals working in direct contact with the elderly and political-economical administration. But power is not just about who has power over whom, or the power to act. Power is also involved in how we are talking about the older and what we see as "truths" in Danish and Swedish elderly care (Harnett, Jonson, Wästerfors, 2012). How reality is looked at and how, in a collective way as reality is defined on different levels – family, organization and society – will affect our capability of acting and learning. The surrounding environment related to a societal framework (local, national and international) and / or organizational context (such as personal network, workplace) in relation to the individual's capacity plays a key role in development as a whole. Organizational conditions in which the individual act must be considered in order to encounter changes and transformation processes.

**Conclusion**

In case of the CareSam project cross sector collaboration produced important experience near knowledge, but also lead to present somewhat one-sided constructions of elderly care. The difficulties in representing a part of life and a field of work which can be seen as firstly culturally, societal and historically marginalized and secondly potentially contains (working with) bodily decay, loneliness, and eventually death has been a challenge. When discussing the construction of the field of care work we have argued that it deepens the analysis to apply three different and though connected perspectives. The analysis of a project initially designed as a development project building on the tradition of pragmatic action research was nuanced as we discussed it from a care research, a learning and a political perspective. Here we so to speak took a view from outside the project in order to include and understand the knowledge created in the project. *The Caring perspective* – the diversity of needs and the experiences from caring institutions from both countries opened for a nuanced understanding of what caring can be, and raised awareness of its societal construction and importance. Through a care research perspective the straining dimensions of care work for older people can be articulated and this gives a deeper understanding of the work and broader, more diverse representations. *The Learning perspective* is double: the meetings between the care worker and the elderly creates an interplay in which learning potentially is stimulated, and the CareSam project created an arena for inter-professional and intercultural learning. Exchange of learning on an individual, professional meso-social level and knowledge transfer on the exo-social level seem to be key-factors in a regional development context when it comes to the elderly sector.

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*The Political perspective* – the professional care worker must be seen as an independent actor in a political dependency. This is a key-point to counteract the negative cultural perceptions of help-needing elderly and the people who support them in everyday life, and raises questions of how care and care work is of fundamental value in a welfare society. Through these perspectives, we as researchers can reflect on how or when we too represent the straining dimensions of care work and when we contribute to deeper understandings and broader, more diverse representations of care work for older people. So, the multiple voices collaborating in the project challenged constructions of care work on the experience near level, while the theoretical perspectives applied by the researchers broadened the understanding of the projects own process and made it possible to reflect on the dilemmas in representing this complex field. Elderly care functions as a part of a knowledge-based system on individual and organizational level where the elderly needs and society interacts with each-other. Diversity of perceptions and images of elderly people and their care is a key-factor in order to understand different constructions of meaningfulness in the health care professions. There are significant differences between the care work in Denmark and Sweden. A cross-border dimension in a project where multiple voices are included gives an added value to the understanding of notions of elderly care. However, the ultimate aim remains the same and there are major similarities in the way the work is performed. Through greater awareness of the differences and similarities in how we address future needs, we can acquire a greater understanding of what we have in common and hopefully construct the field in ways containing its complex and multiple dimensions.

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