

PROFESSIONAL MEANINGFULNESS IN ELDERLY CARE – TRANSNATIONAL SHARED KNOWLEDGE IN A SCANDINAVIAN CONTEXT

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Abstract. *This paper focuses on the exchange of knowledge that stems from staff's experiences of working with the elderly in Sweden and Denmark. The article will, on the one hand, focus on how work in groups consisting of representatives from different levels in the elderly care sector previously served as learning spaces and cultural encounters. On the other hand, it will focus on tendencies to narrow the diversity of perceptions of elderly people and their care. The empirical material takes its points of departure from interviews, a film, and the work of project groups from learning, caring, and political perspectives. One main conclusion reached is that by studying professional meetings in comparison, we can contribute to shaping access to knowledge, identity, and the position of the individual. When several professional voices are heard, it adds value when we want to understand the care of the elderly and the meaningfulness of the profession.*

Keywords: *collaboration, profession, older and elderly care work, welfare state, learning process, representation, Sweden, Denmark*

This paper focuses on the exchange of knowledge that stems from staff's experiences of working with the elderly in Sweden and Denmark. The material underlying the discussion has been taken from a transnational project, CareSam. In this project, elderly care staff were given the opportunity to reflect on their views of their work based on the overall question: 'How can the elderly care profession be understood as meaningful work in a Danish and a Swedish context?' The main goal of this approach was to gain insights into the similarities and differences between two relatively equal welfare systems via a comparison between them.

Although there are many similarities between Sweden and Denmark, there is a great potential for knowledge transfer in elderly care because Sweden and Denmark have different traditions in terms of – for example – education, user influence, and funding. In Sweden, the autonomous roles and responsibilities of the municipalities in providing and organising elderly care mean that there are relatively large variations within the country. It has even been argued that Sweden, in terms of elderly care, is rather a welfare state of municipalities (a total of 290) than a single welfare state¹. In Denmark, elderly care is more centrally organised and the role of the state is stronger than in Sweden, thus municipalities do not have the same space to design care based on local conditions². However, despite these differences, elderly care in both Sweden and Denmark has emerged within the framework of the welfare state and is part of the same social democratic welfare model, states Esping-Andersen³. We are here discussing a model that is often highlighted as a hallmark of the social and political development of the Nordic countries in research literature.

Denmark has chosen to provide care that is both extensive and targeted towards the most vulnerable, as well as a limited range of relief efforts to large groups of older people with less severe needs. The Danish home-based care service is free of charge for the user, and the municipalities have a statutory obligation to actively offer relief efforts through outreach activities (so-called preventive home visits). In this respect, Denmark is the country that comes closest to the ideal image of the Nordic elderly care model⁴.

Denmark, like the other Nordic countries, has a general welfare model where everyone has access to the same care regardless of where they live. Magnusson, Chris-

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- 1 Trydegård, G.-B. *Tradition, Change and Variation. Past and Present Trends in Public Old-Age Care*. Stockholm: Stockholm University, Department of Social Work, 2000.
 - 2 Christensen, J. Professional development in social work. Elderly care in Sweden and Denmark. *Social Welfare. Interdisciplinary Approach*. 2016a, 1 (6): 62–76.
 - 3 Esping-Andersen, G. *Nordic Welfare States in the European Context*. London: Routledge Press, 2001.
 - 4 Larsson, K. & Szebehely, M. *Äldres levnadsförhållanden* [Elderly living conditions]. Rapport 112. SCB och Umea University. 2006, p. 413.

tensen, and Liveng⁵ note that Sweden and Denmark invest roughly the same amount of resources into the care of the elderly, although they distribute them in different ways. In Denmark, it is quite common for the elderly themselves to indicate what kind of assistance they need. Care managers contact the elderly to discuss the details, including who will perform what work. The individual can choose their own care provider among the municipal and private options available. Another difference is that while the home-based care service in Sweden is income-related, it is free of charge in Denmark. The care-user can therefore be said to have more influence in Denmark than in Sweden⁶. A consequence of this is that the care-users are generally more involved in the care and that the role of the care worker is therefore more personal. In Danish care, this is captured by the term ‘professional love’ (*professional kaerlighed*). Another example at the community level is that under Danish law there must be an Elderly Council in each municipality. The Council has a rather strong position as a referral body (but no formal decision-making power), and hardly any political decisions are made without its opinion first being obtained⁷. The Council’s members are elected in the general elections every 4 years, and all residents aged 60 years and over can both vote in elections for and be elected to the Elder Councils. The municipal board is obliged to consult with the Elderly Council on all matters relating to the elderly, and in time for the Council to familiarise itself with the matter and to have an influence on the decision.

Comparative perspectives are often seen as important in describing the different conditions for ageing in Europe. Comparisons make it easier to identify good practices and new ideas, which can then be translated into practice or incorporated into existing activities. Examples of good practice can also be used to illustrate successful, transferable, and sustainable ways of promoting care for the elderly. Among others, Blackman⁸ and Walker⁹ point out the potential for knowledge-sharing between countries in addressing the consequences of population ageing, evaluating different forms of welfare support, and considering services in the context of the wider systems

5 Magnusson, F., Christensen, J. & Liveng, A. (eds.) *Caresam. Åldrande och utmaningar i Öresundsregionen – att arbeta med äldre i Sverige och Danmark* [CareSam – Aging and challenges in the Oresund region – working with the elderly in Sweden and Denmark]. Malmö: MUEP, 2013. Retrieved on 10 January 2016, from <http://dspace.mah.se/handle/2043/16574>.

6 Ibid.

7 Jarden, M.E. & Jarden, J.O. *Social and Health-Care Policy for the Elderly in Denmark. Global Action on Aging*. 2002. Retrieved on 22 November 2015, from www.globalaging.org/elderrights/world/densocial-healthcare.htm

8 Blackman, T. Defining responsibility for care. Approaches to the care of older people in six European countries. *International Journal of Social Welfare*. 2000, 9: 181–190.

9 Walker A. (ed.) *Growing Older in Europe*. London: Open University Press, 2004. Walker, A. & Lowenstein, A. European perspectives on quality of life in old age. *European Journal of Ageing*. 2005, 3 (6): 61–66.

of which they are part. It is worth noting that the social policy objectives are not only transnational, but also national and regional¹⁰. They go hand in hand with the acquisition of specific skills and practices, which makes it difficult to distinguish between the development of the individual's professional identity and the way that they participate and act in the context of social policy¹¹. In addition, elderly care can be understood as both a process and a practice¹².

Project CareSam

The design of the CareSam project has been inspired by the tradition of dialogue in action research¹³. One important aspect is that the production of knowledge in action research is local while only the methods are universal, and that the practice is more important than the theory. It is thus a tradition that places an emphasis on the specific instead of the universal, the local instead of the general, the time-definite instead of the timeless, and, finally, the concrete instead of the abstract¹⁴. The underlying principle is that the researcher attains insights and knowledge by being directly involved in the processes of social change. The CareSam project was therefore divided into three phases.

The first phase consisted of four dialogue seminars, two in each country, with lectures and discussions on important topics on the ground. These themes were chosen by the research team. The seminar participants were invited from a broad base and represented education, management, care workers, and non-profit organisations. Between 50 and 150 representatives of the elderly care sector participated in the four seminars. In light of these dialogue seminars, the researchers compiled a wealth of knowledge, questions, and visions that became the starting point for the work of three different project groups consisting of employees, managers, and educational representatives in the cross-border region of Sweden and Denmark. During the last two workshops, participants were invited to join the project teams. A number of people signed up and each group was sufficiently moderate in approach and size to be able to organise and collaborate effectively, with around 10 participants per group.

10 Walker, A. & Lowenstein, A. European perspectives on quality of life in old age. *European Journal of Ageing*. 2005, 3 (6): 61–66.

11 Hultman, G. & Ellström, P.-E. *Lärande och organisationer*. Lund: Studentlitteratur, 2004.

12 Elmersjö, M. *Kompetensfrågan inom äldreomsorgen. Hur uppfattningar om kompetens formar omsorgsarbete, omsorgsbehoven och omsorgsrelationen* [The knowledge issue in elderly care – How perceptions about competence shape the care work, the care needs and the care relationship]. Linnaeus University Dissertations, 2014, p. 183.

13 Toulmin, S. & Gustavsen, B. (eds.) *Beyond Theory. Changing Organisations Through Participation*. New York: Basic Books, 1996.

14 Ibid

In the second phase, the three groups worked together with researchers who arranged and documented the work. The three groups immersed themselves in their tasks: a) training for care workers, b) future challenges in care work, and c) dementia and dementia care. The groups arranged visits to nursing and dementia clinics in the region, invited lecturers, and presented their own knowledge acquired through this work or in other projects. By way of conclusion, each group held a seminar where they presented their results to the other participants. During the group work the participants were inspired and sometimes provoked by gaining insight into how the work was done in the different environments. The discussions pointed both to possible changes and to the economic and educational restrictions in the care of the elderly.

In the third and final phase, all material was compiled and discussed in the research group. Here, it transpired that the issue of the meaningfulness of care work had been an important theme for all three groups. Meaningfulness was obvious to people with an insider's perspective, but they had assumed that it was invisible to society in general. For example, the dementia group discussed the possibilities for raising public awareness of the importance of the social and psychological aspects of dementia care as a way of developing care. After the presentations, the research group decided to make a film for educational purposes and to stimulate knowledge of elderly care work¹⁵, where challenges and interesting and fruitful aspects of today's and tomorrow's elderly care in Sweden and Denmark were highlighted. The film would primarily be seen as a complement to the themes that arose in the seminar groups' discussions. The purpose of recording the film was to strengthen interest in and knowledge of the importance of elderly care services, and the themes of the three working groups were first presented to a film producer. The researchers then conducted interviews with the groups, and interviews with several care workers were included in the film. Some of them had participated in the CareSam seminars and thematic groups, as well as during the recordings in the care environments that the groups visited. In the film, the following questions were raised: How can we stimulate interest in the elderly? How do we get more people to be interested in working in care? What are the challenges they face at work? Some Danish (DK) and Swedish (S) care workers gave their answers as to why they want to work in elderly care. Their answers have been organised on the basis of a number of themes, such as the importance of activities, the right environment, the meetings with the elderly, and the reputation of the profession. Through a multitude of voices from the elderly care sector, the film contributes to the construction of elderly care as important and meaningful work. In doing this, the film shows that individuals and their needs are an important aspect of working with the elderly, and that it is through contact with these employ-

15 Ciasto, T. *Elderly care in the Cross-border region of Denmark and Sweden, Malmö. Visualife*. 2013. Retrieved on 5 November 2015, from <https://caresam.mau.se/links/>

ees that they are confirmed in the professional role and their contribution is recognised as meaningful.

Learning the Profession

For staff in the Swedish elderly care sector it is important to enable the elderly to be active. This idea can be seen as an ideological thread that runs through the core values of Swedish elderly care. Tornstam¹⁶ is one of those who has pointed out that activity theory is a basic approach that assumes that good ageing is associated with activity: ‘Therefore, it should also be important to continue to be active in social interaction with other people. It should also be important to replace the lost professional role with new roles in family life, associations, and social life, in order to maintain a positive perception of oneself as a valuable and needed person’¹⁷.

From a theoretical activity perspective, humans as organisms are adapted to a certain amount of physical and mental activity. In Denmark, you can see different activities that are adapted to the needs of the elderly. In Sweden, nursing staff work according to the ‘schedule’, while in Denmark they prioritise ‘the time you are there’. It brings to mind the Danish concept of professional love, to just ‘be there’. As a whole, the focus in Denmark is more on showing care, and in Sweden more on providing nursing: ‘In Denmark it is important to listen to the elderly and their wishes. There is greater flexibility and the activities seem to be more spontaneous than in Sweden, where they often occur according to “plans”’¹⁸.

In the CareSam project, Swedish nurses highlighted the importance of user influence and the need to raise the status of the profession. Danish nurses instead emphasised the need for good relations with the elderly, and to see the elderly as the people they are rather than as a product of their disabilities¹⁹. Jarden and Jarden²⁰ note that Denmark attaches great importance to public services, and that the care system developed is therefore more flexible and better adapted to different ways of life and social environments. These discrepancies can be seen in relation to what, according to

16 Tornstam, L. *Åldrandets socialpsykologi* [Aging Social Psychology]. Stockholm: Norstedts publishing, 2004.

17 Ibid, p. 125.

18 Peter, Swedish elderly care worker in Denmark, quoted in Ciasto, T. *Elderly care in the Cross-border region of Denmark and Sweden, Malmö. Visualife*. 2013. Retrieved on 5 November 2015, from <https://caresam.mau.se/links/>

19 Christensen, J. & Liveng, A. CareSam – a cross-border collaboration contesting notions of elderly care. *Tiltai*. 2016, 1 (73): 207–222.

20 Jarden, M.E. & Jarden, J.O. *Social and Health-Care Policy for the Elderly in Denmark. Global Action on Aging*. 2002. Retrieved on 22 November 2015, from www.globalaging.org/elderrights/world/densocial-healthcare.htm

Hofstede²¹, is central to the understanding of cultural differences: the realisation that the societal aspects he identifies as culture and values are theoretical constructs. They are tools designed to be used in specific cases. Generalisations about a country's culture can be useful, but they must be seen as just generalisations or a means of promoting understanding²².

What makes me feel rewarded is working with people who have lived a long life. I do not think everyone should work with the elderly or in a hospital. Not everyone should work with people. There are differences between Sweden and Denmark. In Denmark, it is easier to dismiss someone. We have talked to people in Sweden and heard that there are people in Sweden who should be made redundant but cannot because of certain rules. I think it is better if some people work with machines. It requires special skills to work with people, you have to be able to meet them in the right way²³.

Elderly care is characterised by the professional proximity of care professionals to the elderly. Maria (S) says, for example, 'What I think is so rewarding is working with people'. All of the interviewees underline the idea that relations are central to their work. It is in relations with the elderly that care workers can receive direct recognition from those they help. Vera (DK), for example, highlights the giving and taking that is part of the everyday life of retirement nursing: 'You get a lot back from the old... when you have helped them with something you get a smile... a hug... or they say, "Oh, what? I'm glad you've done this." You feel that you have done something good for them, simply... that they are satisfied.'

The various meetings (e.g. in connection with dressing, toilets, meals, or walking with the elderly) are described as fruitful in a way that is not equivalent to many other professions. Paul (S) emphasises people's versatility, and says that one day is never like another: 'It's about being together with people and no day is like the other... you meet fifteen different people... and can't do anything the same way... Some days everything goes smoothly and other days you just think "My God!"... But that's what's so exciting... it gives so much.' During the group meeting, Sue (DK) talks about calm and stressful days and the extreme contrasts – the difference can almost be as 'between heaven and hell' – but that's what she likes about the work.

21 Hofstede, G. *Culture's Consequences. Comparing Values, Behaviours, Institutions, and Organisations Across Nations*. Thousand Oaks: Sage Publishing, 2001.

22 Ibid.

23 Johan, Swedish care worker in the elderly care sector in Denmark, quoted in Ciasto, T. *Elderly care in the Cross-border region of Denmark and Sweden, Malmö. Visualifjē*. 2013. Retrieved on 5 November 2015, from <https://caresam.mau.se/links/>

Learning about Life

The lives of older people also have a historical dimension, and the contact between the care worker and the elderly can be a link between the past and the present. Ingrid (DK) describes it as: 'It is their home and you have to show great respect... I really appreciate getting to know them at home... where you experience them at home... You see photographs for example... and get insights into how they have lived.' This applies both professionally and on a personal level. Ingrid must be a humble listener and a professional care giver, and merge these disciplines into her work so that the elderly feel that Ingrid, as a caring worker, is part of their everyday life. Continuous learning is based on a professionally conscious and open approach towards the elderly. As Alicia (S) puts it: 'You learn something new every day, both at work and from the elders... They have a kind of wisdom that you can't get anywhere else... if you are a bit responsive and show dedication, you can learn things.' Visiting many older people every day is not seen as a problem by Alicia. The satisfaction of working with people can be seen as dependent on the personal contact with the care-takers and the relatively high degree of autonomy that the care personnel perceive as crucial to job satisfaction²⁴.

The many different needs of the elderly give meaningfulness to a particular dimension, explained Tilde (DK): 'You also learn a lot by walking around to so many different people... You encounter so many different diseases and different needs and, in this way, you always learn something new.' Hackman and Oldham²⁵ point out that if you have high ambitions when identifying tasks and possess the skills needed, autonomy and feedback have great significance for the feeling of meaningfulness, responsibility, and motivation. An example of meaningfulness and responsibility can be seen when Anna (S) helps Mrs Jensen to put on her support socks: 'We are there to help Mrs. X to put on the support socks... but, in fact, the visit is more about social care... to give her a hug and hear how she has it... It's really hard for her and it's really great to come up with energy for her.' Sofia (S) talks about the motivational aspect: 'I find it very exciting to have my workplace in people's homes... it feels so special to come home to someone and take part in their lives... For example, knowing that their canvas has a history... the relationships, the proximity, and the personal room... I find it so interesting and exciting and therefore the home service is the right place for me.' These care workers express a strong sense of commitment to and satisfaction in their daily work with the elderly, where both meaningfulness and the special relationship with users are evident. Work with the elderly is also seen as meaningful in that the professional role contributes important social content, and being professional also means being personal, with the meeting with the individual as a starting point.

24 Kamp, A. & Hvid, H. (eds.) *Transition: Management, Meaning and Identity at Work. A Scandinavian Perspective*. Frederiksberg: Copenhagen Business School Press, 2012.

25 Shields, J. & Johns, R. *Managing Employee Performance and Reward*. Cambridge: University Press, 2016.

Theoretical framework

Elderly care is often undertaken as part of a major nursing organisation. Those who work in the care sector are therefore part of a care society, and are expected to practise values such as care, commitment, trust, and responsiveness to people's needs²⁶. Relations between individuals and the interaction between different levels are included in the understanding of the professional context. These meetings take place on different levels: the individual level where the elderly meet other elderly people or the care staff meet the elderly and their relatives, and the organisational level where Danish and Swedish elderly care communities interact through their care-staff meetings. At a societal level, colleagues are prioritised through structural meetings on issues such as education and legislation in the area of elderly care in Denmark and Sweden, as well as through political decisions and meetings with Danish and Swedish elderly care in a regional context. The CareSam project gives concrete examples of the different levels of understanding through the care workers' reflections on everyday care situations (e.g. accompanying an activity as an assistant or eating with older people in their home) and through interaction in an organisational context (e.g. by collaborating with colleagues, being part of a working group, or applying policy documents) where the professional element plays a role.

The theoretical framework of the survey was taken from the development ecology of the Bronfenbrenner model²⁷ and by Christensen²⁸. According to the Bronfenbrenner model, everything is connected and interacts, but to varying degrees and at different times. Bronfenbrenner's theory is not focused solely on interpersonal relationships, but also on the different systems that our lives and worlds consist of. A part of this theory is that the individual always evolves in a context, and his theory encompasses all of that context. The development ecology divides the context into several levels, which simultaneously influence and interact with the individual and affect his or her development. In order to understand the individual's self-reflection and development in its context, a study should focus both on the individual and his or her specific environment, as well as on the individual's relationship with the surroundings at different levels. When we examine people's views on their own profession, we look at both individuals and organisations, and when we reflect on social systems, we focus on the societal level. However, the developmental ecological theory can be questioned in terms of a way of looking at the individual's role in relation to other actors in order to define and understand the underlying forces of professional devel-

26 Hasenfeld, Y. *Human Services as Complex Organisations*. Thousand Oaks: Sage Publishing, 2009.

27 Bronfenbrenner, U. *The Ecology of Human Development*. Cambridge: Harvard University Press, 1979.

28 Christensen, J. Proposed enhancement of Bronfenbrenner's development ecology model. *Education Inquiry*. 2010a, 2 (1): 101–110.

Christensen, J. *A Profession in Change – a Development Ecology Perspective*. PhD dissertation, Lund University dissertations, 2010b.

opment²⁹. The focus on the individual could hinder the understanding of the development of the consolidated population. This theory is not focused on the individual's sphere of influence, but instead on the individual's motivations and ability to influence their relationships within a specific environment. According to his theory, human development is understood only by seeing individuals' relationships with other people in their socio-cultural context, with given psychological and biological conditions. Then we can also see the development of the individual as an integral part of the family and institutional development³⁰. Through their organisations, care workers show their commitment to improving the quality of life for people in need. The organisations give them the opportunity to use their professional knowledge in practice³¹.

Bronfenbrenner created his developmental ecological model to facilitate the understanding of the complex interaction between the individual and society. The model consists of four system levels: from micro (the most specific level) via meso and exo to macro (the most general). To understand an individual, it is not sufficient to describe him or her in the family context (the microsystem), but we also need to know how the different subsystems affect the individual and each other (meso and exo). The macro system is, in turn, crucial to placing the analysis in a social and cultural context, such as the care of the elderly. In addition to the four system levels, time is also an important factor in the developmental ecological perspective. Both the individual and the environment change over time, and Bronfenbrenner believes that these changes are important for the understanding of how different systems affect the individual and his or her development. The same holds for the development, both cultural and otherwise, of the institutions: the presence of strong individuals in an organisation strongly influences the development of the organisation itself. This is why Bronfenbrenner's model can be seen as a multi-level model³². The model, however, does not hold an international level, which is an omission given the major impact of globalisation in almost all areas. For this reason, I would also like to refer to the Drakenberg study³³, which in its investigation supplemented the bridging of Bronfenbrenner's model with a fifth level, an ex-macro.

29 Christensen, J. *A critical reflection of Bronfenbrenner's development ecology model. Problems of Education in the 21st Century*. 2016b, 69: 22–28.

30 Bronfenbrenner, U. "The social ecology of human development. A retrospect perspective conclusion". In Bronfenbrenner, U. (ed.), *Making Human Beings. Human Bioecological Perspectives on Human Development*. Thousand Oaks: Sage Publishing, 2004.

31 Hasenfeld, Y. *Human Services as Complex Organisations*. Thousand Oaks: Sage Publishing, 2009.

32 Bertram, H. *Sozialstruktur und Sozialisation. Zur mikrosoziologischen Analyse von Chancenungleichheit* [Social structure and socialization. A micro-sociological study on inequality]. Darmstadt, Neuwied: Luchterhand, 1988.

33 Drakenberg, M. *Kontinuitet eller förändring? [Continuity or change?]* Equal Ordskraft [Power of Words] project report. Municipality of Helsingborg, Malmö University, 2004.

From intra-level to ex-macro level

Resilience at a mental intra-level³⁴ and an entrepreneurial way to simultaneously create, develop, and maintain networks broadens the understanding of what stimulates learning and our view of education and professional work in a welfare context. Changes in a welfare context can thus be seen from both individual and social perspectives³⁵. The CareSam project can therefore be said to include actions at six different levels: the intrapersonal level (resilience, self-employment), the micro-social level (person, user, focus on interaction; to meet unique people and help them with activities; cross-border meetings at work), the meso-social level (group, institution, context; professional team), the exo-social level (society, institutions, school systems; society's approach to the profession, regulations), the macro-social level (culture, nation, traditions, languages, school systems; a low-status job, a profession to be proud of) and the ex-macro social level (international relations; future challenges with ageing societies, prioritising technologies that improve quality of life). Ties, meetings, and networks are closely linked to the individual. Bringing entrepreneurship as an additional dimension to the (enlarged) developmental ecological model, results in the Entrecology model (Fig. 1) developed by Christensen³⁶.

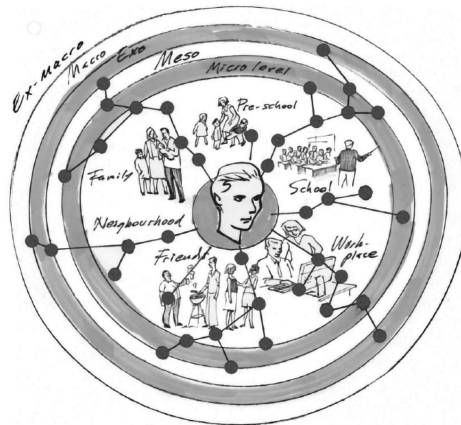


Fig. 1. The Entrecology model³⁷

34 Christensen, J. Proposed enhancement of Bronfenbrenner's development ecology model. *Education Inquiry*. 2010a, 2 (1): 101–110.

35 Ibid.

36 Christensen, J. *A Profession in Change – a Development Ecology Perspective*. PhD dissertation, Lund University dissertations, 2010b.

37 Illustration by in Christensen, J. *A Profession in Change – a Development Ecology Perspective*. PhD dissertation, Lund University dissertations, 2010b.

Every connection in the Entrecology model should be seen as part of the individual's own unique personal network. The model is based on the individual and their interaction with the environment. An analysis of social networks connected by micro- and macro-level networks shows the strength of the dyadic ties³⁸. Their strength (or weakness) gives rise to both dependence and independence. This can lead to the professional dilemmas that exist in many organisations³⁹.

Action and influence

If we see elderly care as an oriented activity, both action and intervention are essential elements of the work. In order to meet the needs of the elderly, people in the profession must be creative and focus on how they can do this in the best possible way⁴⁰. At the same time, we must see the person concerned as part of a wider context in which power and influence are closely linked to the political and legal levels of society. This especially applies when political and legal decisions have consequences in everyday life for elderly care workers, for example in how we talk about older people and what we consider to be 'truths' about the elderly. Among other things, Harnett⁴¹, in her study of Swedish elderly care, has shown the importance of everyday power and influence.

Conclusion

Based on the material presented in this paper, we can draw a number of conclusions. The staff's stories show that in Denmark there seems to be more flexibility in the profession of elderly care, and great importance is attached to spending time with the elderly. In Sweden, however, there is a more action-based approach, where the focus is on doing rather than being. This leads to greater demands on the care staff, which, in turn, can create sharp contradictions between the claims of the care system and the growing groups of elderly care-users with increasingly complex care needs⁴². In Denmark, the user influence seems to be more in focus and has a different status

38 Granovetter, M. The strength of weak ties. *American Journal of Sociology*. 1973, 78 (6): 1360–1380.

39 Jansson, E. *Entrepreneurship as a Paradox. A Romantic-Ironic History of a Deviant Entrepreneurship*. Uddevalla Symposium 2008. Spatial Dispersed Production and Network Governance. University West, 2008.

40 Christensen, J. & Liveng, A. CareSam – a cross-border collaboration contesting notions of elderly care. *Tiltai*. 2016, 1 (73): 207–222.

41 Harnett, T. *The Trivial Matters. Everyday Power in Swedish Eldercare*. PhD Dissertation, Jönköping University, 2010.

42 Magnusson, F., Christensen, J. & Liveng, A. (eds.) *Caresam. Åldrande och utmaningar i Öresundsregionen – att arbeta med äldre i Sverige och Danmark [CareSam – Aging and challenges in the Oresund region – working with the elderly in Sweden and Denmark]*. Malmö: MUEP, 2013. Retrieved on 10 January 2016, from <http://dspace.mah.se/handle/2043/16574>.

than in Sweden⁴³. The user influence of Danish elder care is traditionally strong, while in Sweden there seems to be a clearer focus on practical tasks and attitudes among those working in the care sector⁴⁴. This gives the profession a certain power, but also the responsibility to use it correctly. The care workers can be said to have a position of power, but they are not expected to use that power because it could create a professional dilemma in dealing with the balance between everyday activity and being a human being in the profession⁴⁵. This professional dilemma is governed by how the scope of action is interpreted from policy documents and translated into practice, where the ability of the care worker to design their own professional sphere of influence is determined by the freedom or lack of freedom that they experience in relation to the elderly. The empirical material shows that individual, professional, and organisational levels must be seen as central in order to understand the meaningfulness of the care worker's experience at work. Factors that seem to contribute to the sense of meaningfulness are, for example, meetings with unique people, opportunities to take part of the life histories of the elderly, and cooperation with colleagues.

Actors (individuals, organisations, or at the community level) in the care of the elderly act as parts of a knowledge system at an individual or organisational level, a system in which the market and society interact. In particular, the meso-social and the exo-social levels have a central role to play. Professional autonomy depends on organisational and societal frameworks⁴⁶, and the care worker is a part of them. It affects relations between carers and users, thus covering social, legal, and market components. The relationship between freedom of action and the limitations of behaviour may vary depending on how the rhetoric is translated into practice in each region. It is therefore important to understand the practices for work and learning that result when meetings in a professional context are to be compared. An example from the CareSam project is the knowledge that the care workers received through meetings and seminars with participants from both countries. In order for them to contribute to their skills, behaviour must be learned, practised, and transferred to the workplace.

The environment – the societal framework (local, national, and international) and/or the organisational context (personal network or workplace) in relation to the individual's capacity – is of great importance for development. The Entrecology model gives us a tool to see knowledge acquisition as a process in which the individual develops through and together with their network. How reality is perceived and

43 Ibid.

44 Ibid.

45 Christensen, J. Proposed enhancement of Bronfenbrenner's development ecology model. *Education Inquiry*. 2010a, 2 (1): 101–110.

Christensen, J. Professional development in social work. Elderly care in Sweden and Denmark. *Social Welfare. Interdisciplinary Approach*. 2016a, 1 (6): 62–76.

46 Christensen, J. *A Profession in Change – a Development Ecology Perspective*. PhD dissertation, Lund University dissertations, 2010b.

how it forms collectively at different levels – family, organisation, and society – influences the individual's ability to act and learn.

The degree of dependence or independence that the care workers experience in their organisation and in society is of great importance for knowledge processes and knowledge gathering. The ability of the care worker to design their own professional sphere of influence is determined by the freedom, or lack thereof, that they experience in both the horizontal and the vertical relationships of the organisational environment. Knowledge sharing at an individual and professional meso-social level, and knowledge transfer at the exo-social level, are key factors in a regional development context in the area of care for the elderly. Generally, experiences in the Exo-system can contribute significantly to personal development and a sense of meaning. The developmental ecological model, further developed into the Entrecology model, significantly contributes to our understanding of the individual's role and behaviour in relation to the surrounding context at different levels.

Future work

In these findings, one important conclusion is that the Swedish staff seem to have a more rule-based approach to service execution, while care workers in Denmark seem to be more flexible and attach greater importance to spending time with the elderly. Another conclusion is that in Swedish elderly care there seems to be a clearer focus on 'doing' than in the Danish context. Finally, we can say that, in terms of elderly care, there are many similarities between the care of the elderly in Sweden and Denmark, but also some differences in terms of organisation and structure. Elderly care workers in Denmark can be said to have a more 'entrepreneurial' approach to the profession. Granovetter's⁴⁷ idea of the strength of the dyadic ties, the link between freedom of action, and the limitations of behaviour are interpreted differently depending on how rhetoric is translated into practice. Reflections on cultural differences and values as tools must also be factored into the equation⁴⁸.

In Sweden, it seems in many ways unprofessional to 'do nothing'. In both Sweden and Denmark there is also a gap between rhetoric and practical operations. The views on and confidence in authorities and government are different, and there are differences in norms, regulations, and legislation, albeit not in all areas. In Sweden, care staff are happy to emphasise consensus and consensual solutions, while decision-making in Denmark is more absolute: when a decision is taken, it is quickly passed on to action. The organisation of elderly care affects the elderly, and to an even greater extent the scheduling and schedule management of the staff.

47 Granovetter, M. The strength of weak ties. *American Journal of Sociology*. 1973, 78 (6): 1360–1380.

48 Hofstede, G. *Culture's Consequences. Comparing Values, Behaviours, Institutions, and Organisations Across Nations*. Thousand Oaks: Sage Publishing, 2001.

Care for the elderly as a profession must be further developed with a focus on social and nursing needs, where the elderly are given the right to decide what they think is reasonable care. In this way, individual thinking and a higher quality of care are promoted. Moreover, the development of the care profession should not only apply to medical care, but also to social skills. In Denmark, it is important for individual users to feel that they can influence their care. We are not only trying to adapt care to what the users want, but also to take into account what they do not want. In Sweden, we see instead that operational frameworks play a major role, and that it is important that the elderly are kept active and employed. Comparisons make it easier to identify good practices and new ideas that can then be translated into practice or incorporated into existing activities.

Comparative studies exist, but international comparisons are relatively sparse when it comes to elderly care⁴⁹. Comparisons are often instructive, and seeing their own reality with fresh eyes from an international perspective is valuable for the profession and in educational contexts. A cross-border dimension in a project where several voices are heard adds value when we want to understand the concept of elderly care. But the ultimate purpose of care work is the same, and there are great similarities in how the work is done. By becoming more aware of differences and similarities in how we deal with future needs, we can gain a better understanding of what we have in common, and hopefully help to construct the field in all its complexity and versatility.

We see that there are many ways of interpreting words such as ‘prosperity’ and ‘freedom of choice’, and that new insights can be applied in the care sector. This paper has demonstrated that by studying professional meetings in the care of the elderly in a regional perspective, based on a comparison of two relatively equal welfare societies, we can develop our understanding of the similarities and differences between these societies and what contributes to shaping access to knowledge, identity, and the position of the individual. A cross-border dimension in a project where several voices are heard adds knowledge-based value when we want to understand the care of the elderly and the meaningfulness of the profession. By becoming more aware of similarities and differences in how we deal with future needs, we can gain a greater understanding of what we have in common, and hopefully construct the field in ways that can accommodate its entire complexity and versatility.

49 Szebehely, M. (ed.) *Äldreomsorgsforskning i Norden – en kunskapsöversikt [Elderly care research in the Nordic countries – A knowledge overview]*. Nordic Minister of Council, 2005, p. 508.

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SENYVO AMŽIAUS ŽMONIŲ PRIEŽIŪROS PROFESINIS ĮPRASMINIMAS. TARPVALSTYBINĖS PATIRTIES SKLAIDA SKANDINAVIJOS VALSTYBIŲ KONTEKSTE

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Santrauka. *Straipsnyje aptariama personalo patirtis, susijusi su pasikeitimu sukauptomis žiniomis. Personalo darbo vieta – senyvo amžiaus žmonių priežiūra Švedijoje ir Danijoje. Analizuojama medžiaga buvo sukaupta tarpvalstybinio projekto CareSam metu. Vykdant projektą, personalui, prižiūrinčiam senyvo amžiaus žmones, buvo sudaryta galimybė pateikti savo požiūrį į klausimą „Kaip galima įprasminti senyvo amžiaus žmonių priežiūros profesiją Danijos ir Švedijos kontekstuose?“ Straipsnyje apžvelgiami keli aspektai. Viena vertus, aptariami senyvo amžiaus žmonių priežiūros sferoje dirbančių įvairaus rango personalo grupių susitikimai mokymosi bei bendravimo erdvėse. Kita vertus, pastebima senjorų ir jų priežiūros įvairovės apibrėžties siaurėjimo tendencija. Atliktas empirinis tyrimas mokymosi, priežiūros ir politiniais aspektais, interpretuojami pokalbiai, filmas ir projekto grupių veikla. Teorinė tyrimo metodologija susijusi su ekologinio formavimosi modeliu, peraugančiu į entrecologinį (angl. entrecology) modelį. Tyrimo rezultatai atskleidžia, kad Švedijoje dirbantis personalas linkęs į instrukcijomis grįstą darbą bei atliekamas pareigas, o Danijos prie-*

žiūros darbuotojai lankstesni, linkę labiau vertinti laiką, skirtą bendrauti su senyvo amžiaus žmonėmis. Nustatyta, kad švedų senjorų priežiūros sektoriaus darbuotojai labiau susitelkę į veiklas nei Danijos specialistai. Konstatuota, kad tarp Švedijos ir Danijos senyvo amžiaus žmonių priežiūros srityje dirbančių asmenų esama daug skirtumų – ir organizacinių, ir struktūrinių. Danijos senyvo amžiaus žmonių priežiūros sferos darbuotojai savo profesinėje veikloje yra labiau entrepreneriški. Teigtina, kad tiriant ir lyginant profesinį bendradarbiavimą, įmanu prisidėti prie žinių, tapatumo ir asmens pozicijos formavimo. Keli profesiniai požiūriai gali leisti kokybiškiau įsigilinti į senyvo amžiaus žmonių priežiūrą, svarstant profesijos prasingumą. Tarpvalstybinė tyrimo dimensija, susijusi su įsiklausymu į įvairias nuomones, suteikia tvaresnę pagrindą rasti žinioms, įprasmina senyvo amžiaus žmonių priežiūros profesiją. Elgesio stebėjimas, numatant būsimus poreikių bendrumus ir skirtumus, leidžia aiškiau išvelgti žmones vienijančius dalykus ir taip formuoti įvairiapušį ir universalų pažinimo lauką.

Reikšminiai žodžiai: bendradarbiavimas, profesija, vyresnio ir senyvo amžiaus žmonių priežiūra, gerovės valstybė, mokymosi procesas, reprezentatyvumas, Švedija, Danija.

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