

Changes in Nordic care work and their effects on work related problems for workers in long-term care

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Care and care work in the Nordic countries

- The only, real cluster with respect to care' (Daly and Lewis, 2000)
- 'Public service model' (Anttonen, 1997)
- Service universalism: attractive, affordable and flexible (Vabø & Szhebehely, 2012)
- Care work in LTC considered to be a primary occupation and a career, and care workers are most often unionized (Dahl, 2000).
- Under pressure:
 - drive for making LTC more cost-effective; prioritization of the most frail and core services; retrenchment of LTC services
 - NPM leading to standardization, control and taylorisation of care work.
 - New reform tendencies of NPG towards cross-disciplinary and cross-sectoral cooperation btw health/social care and empowerment and engagement of users

Research question and methodology

How has care work changed over time and can this explain changes in work related problems for care workers?

Data: NORDCARE survey data among unionized care workers (assistant nurses, care aides etc) in 2005 and 2015, working in LTC institutional care or home care in Denmark, Finland, Norway and Sweden. n=2.216 in 2005 and 3.229 in 2015.

Method: investigate changes in care work tasks and whether this has affected levels of physical and mental exhaustion as well as intentions to continue working in the care sector. Controlling for changes in care worker characteristics (work hours and private for-profit vs. public employment, age, gender, work experience and education).

Changes in care worker characteristics

Still women's work

Ageing care work force

Over time, more with
migrant background

Most have formal care
education

Tendency to work part-
time, except for FIN

More work in for-profit
sector

	DK		FIN		NOR		SWE	
	2015	Change since 2005	2015	Change since 2005	2015	Change since 2005	2015	Change since 2005
Woman	96,3	↓*	96,2	↓***	95,9		92,8	↓**
Average age	49,3	↑***	45,8		50,5	↑***	47,1	↑***
Migrant, either born abroad or both parents born abroad	8,2	↑**	2,23		11,22	↑***	25,43	↑***
Job experience LTC sector, >10years	70,6		56,6	↓***	80,0		69,4	
>35 hours/full time	47,0	↑*	86,8	↓*	40,8		48,0	↑*
Education, none	2,1		2,3		12,6		8,8	
Education, 1-24 months	56,7		25,0		40,6		51,9	
Education, >2 years	41,2	↑***	72,7	↑***	46,8	↑***	39,3	↑***
Public sector employee	87,7		70,9		94,4		84,6	
For-profit sector employee	9,2		20,7		3,6		14,1	
Non-profit sector employee	3,1	↑**	8,4	↑***	2,0	↑***	1,3	↑***
Working in home care sector	36,7		26,0		18,2		29,3	

Changes in care tasks

Over time, more care workers do:

Personal care

Health care related tasks

Reabling services

In DK and FIN lifting

Fewer care workers do:

Cleaning (except N)

Shopping (except FIN)

In DK social care

	DK		FIN		NOR		SWE	
% doing the following task at least once a month	2015	Change since 2005	2015	Change since 2005	2015	Change since 2005	2015	Change since 2005
House cleaning	48,3	↓***	37,0	↓***	32,2		76,7	↓**
Preparing hot meals	64,4	↑***	14,1		46,5	↑***	38,0	
Serving pre-cooked meals	83,3		95,2	↑***	88,6		83,3	
Shopping for groceries in stores	13,5	↓***	18,4		13,3	↓***	35,5	↓**
Assisting with personal care	98,8		98,9		97,5		97,8	↓**
Lifting or assisting lifting	97,0	↑*	96,5	↑**	91,3		95,5	
Administrative work such as documenting	96,7	↑***	96,5	↑***	85,0	↑***	91,9	↑***
Assisting older person on walks or on errands?	41,5		52,2		44,0	↑***	73,6	↑***
Drinking a cup of coffee or something similar with OP	60,6	↓***	43,7		67,9		68,2	↑*
Hand out pre-dosed medicine	96,8	↑***	91,6	↑***	88,0		89,8	
Giving injections	31,9	↑***	79,9	↑***	42,4	↑***	52,7	↑***
Assisting with walk exercises, speech training	61,0	↑***	94,1	↑***	74,8	↑***	74,2	↑***

Changes in work related problems

Stepwise regression controlling first for changes in **background characteristics** and then for changes in **work tasks**

Even when controlling for changes in characteristics and tasks, work related problems substantial:

Btw 34-45% of care workers **seriously considering quitting**, and increasing in N

Btw 30-46% almost always **physically exhausted** after a workday and increasing in FIN and SWE

Btw 13-31% almost always **mentally exhausted** after a work day, and increasing in DK, FIN and SWE

Changes in work tasks explain the change in seriously wanting to quit in FIN

	DK		FIN		NOR		SWE	
%	2005	2015	2005	2015	2005	2015	2005	2015
Seriously considering wanting to quit, 'yes, often' (%)	39,3	43,1	25,76	38,8***	26,7	34,1**	40,0	48,2*
Physical exhaustion, 'almost always' (%)	26,8	31,1	31,98	39,7**	31,5	34,4	32,5	43,2***
Mental exhaustion, 'almost always' (%)	10,9	14,7*	13,76	20,7***	9,3	12,1	15,5	28,1***
Controlled for table 1 (Background characteristics)								
Seriously considering wanting to quit (%)	39,0	44,1	29,24	38,5**	24,4	35,7***	43,1	49,0
Physical exhaustion (%)	28,0	31,5	30,20	40,7***	33,0	33,7	33,7	46,0**
Mental exhaustion (%)	10,7	14,9*	11,23	21,2***	8,7	11,9	15,2	30,3***
Controlled for table 1 and 2 (Background characteristics and work tasks)								
Seriously considering wanting to quit (%)	38,5	44,0	32,52	36,9	24,6	33,9**	45,6	44,9
Physical exhaustion (%)	32,2	30,1	33,22	40,7*	32,0	32,8	31,9	46,3***
Mental exhaustion (%)	8,2	13,0*	12,48	21,4***	10,0	10,7	13,8	30,5***

Buffers/risks

Wanting to quit:

- Migrant background ↓
- For-profit employment ↑
- Nursing home sector ↑
- Cleaning ↑

Mentally exhausted:

- Reabling ↓
- Nursing home sector ↑
- Cleaning ↑

Physically exhausted:

- Providing social care ↓
- Administrative tasks ↓
- Lifting ↑
- Nursing home sector ↑

Conclusion

Care work has changed:

- Core services now personal care, health care, documenting, lifting, and less so cleaning

Work related problems have increased or remain substantial:

- Btw one in three to one in two wants to quit and/or feel mentally/physically exhausted after work day.

When controlling for changes in care worker characteristics, changes in work tasks contribute to explaining the changes in work related problems, but more structural problems remain

Some sectors seem seems particularly affected, such as the nursing home sector and the for-profit sector. Reablement and relational work buffers.