

6TH INTERNATIONAL CARERS CONFERENCE
CARE AND CARING: FUTURE PROOFING THE NEW
DEMOGRAPHICS
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COMBINING CARING
RESPONSIBILITIES AND GAINFUL
EMPLOYMENT IN SWEDEN

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PRESENTATION

Stockholm University and Swedish Family Care Competence Centre. The Centre is a commission from the government through the Swedish Board of Health and Welfare in order to collect and give knowledge about family care.

My subject is as researcher in the field "Combining paid work and family care".

BACKGROUND SWEDEN

- ◉ Sweden, as well as the other Nordic countries, differ from most other countries in that sense that both women and men must work and pay tax in order to get full access to the social insurance system, including full pension.
- ◉ Women and men pay tax separately.
- ◉ Most women work, despite education and age.

BACKGROUND SWEDEN

- ◎ The Swedish welfare model is based on the premises that the society, not the family, has the main responsibility for care.

BACKGROUND SWEDEN:

Public elderly care is popular among elderly.

Nevertheless:

- ⦿ Decreasing public help
- ⦿ Increasing informal help

THE COST OF CARE. FAMILY CAREGIVING IN MIDDLE OF LIFE; HOW DOES IT AFFECT WORK AND MAINTENANCE?

Research project together with Marta Szebehely och Petra Ulmanen, Stockholm University.

Mixed method study:

- ⦿ Survey of a random sample of 6000 persons aged between 45-66 years of age. 3630 respondents (62%).
- ⦿ Semi-structured interviews with 20 persons in differens relations and situations.
- ⦿ Work report 2014:1 Szebehely, Sand and Ulmanen. Department of Social Work. Stockholm University,

FOCUS

- ⦿ The possible impact of any caring responsibilities on employment, financial position and everyday life.
- ⦿ Received and preferred support in the form of care services, leave from work and payments for care.

SOME RESULTS

Persons between 44-66 years of age giving help to an old, disabled or ill family member:

- ⦿ Help at least once per month:
- ⦿ 42% of the women
- ⦿ 42% of the men

HOW MUCH TIME?

- ◉ A smaller part of the family carers give more intensive care.
- ◉ 6% of women and 4% of men give help everyday. In this group women gives about 19 hours per week and men about 13 hours per week.
- ◉ In general women give help about 5,4 hours per week, men about 3,8 hours per week.

THOSE HELPING AT LEAST WEEKLY.

PERCENT.

	Women	Men
Shopping, cleaning, laundry, cooking	58	48
Repairs, transportation etc	58	70
Banking, paper work	43	43
Contact health care, authorities	50	50
Reminding, motivating	61	56
Personal care	16	8
Medical help	17	9

BOTH WOMEN AND MEN ARE AFFECTED BY FAMILY CARE

- But it is more common for women to get negative consequences from caregiving.

CONSEQUENCES

THOSE HELPING AT LEAST WEEKLY. PERCENT.

	Women	Men
Feel mentally exhausted	63	35
Feel physically exhausted	36	16
Find it hard to get together with friends	47	30
Difficulties focusing on work	37	19

CHANGES IN THE WORKING SITUATION

Reduced working hours, quite job or retired earlier than planned:

- ◉ Monthly care:
 - ◉ 13% of the women
 - ◉ 8% of the men
- ◉ Daily care:
 - ◉ 32% of the women
 - ◉ 27% of the men
- ◉ Counted for the population: more than 90 000 women and more than 50 000 men in the age 45-66 years has reduced their working hours or left their jobs due to family care.

CONSEQUENCES

THOSE HELPING AT LEAST WEEKLY. PERCENT

	Women	Men
Economy worsened due to reduced income	20	11
Economy worsened due to increased expenses	24	20

ECONOMY WORSENERD DUE TO FAMILY CARE

- ⦿ Counted for the population: about 114 000 women and 75 000 men has worsened economy due to family care.

NOT MUCH JOB SECURITY FOR FAMILY CAREGIVERS

- ⦿ Legislation in relation to work:
- ⦿ 100 days off from work to be with a relative who is severely ill. Same payment as for sick leave.
- ⦿ Allowed to leave job in case of emergency. Payment only if agreed with the employer.
- ⦿ No right to flexible work.
- ⦿ No right to return to work.

SINCE 2009 THERE IS AN AMENDMENT TO THE SOCIAL SERVICE ACT

- Family Care Perspective in Health- and Social Services.
- *”My life has for many years been circulating around my ill mother and my ill daughter. I have never felt that I have been especially interesting as a relative, not of how I was affected economically or the way I felt, but only for what I could give their patient or customer.”*
- *(Mother and daughter, 2013).*

CONCLUSION

- ⦿ The research shows that family care in Sweden has considerable consequences for the caregivers well being, every day life, work and economy.
- ⦿ For both women and men this is true, especially for those giving more intensive care.

WISHES FOR THE FUTURE

- ◉ Family carers did not want to stop working but have the possibility to take days off from work when needed and get payed if they had to reduce working hours.
- ◉ Society should be responsible for care.
- ◉ Good quality on public care and service.
- ◉ Flexible work life

THANK YOU FOR YOUR ATTENTION!



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