Representations of family caregivers and older adults in need of care in the Swedish news media

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This is a draft of an article manuscript that examines the media representation of family care givers and older adults in need of care. The article draws on a social constructionist perspective of media texts to explore how these representations shape public understandings of family caregiving and older adults in need of care.

We would of course have liked to have come further with the manuscript by now, but we faced a number of challenges that delayed our progress (work and family obligations 😊). We are still looking forward to receiving feedback from you at this early stage, which will guide our work going forward.

We appreciate your time and consideration in providing us with feedback.

# INTRODUCTION

The Swedish society is, similar to many other post-industrial welfare-states, characterized by an ageing population, where the proportion of older adults who live longer lives has increased dramatically over the past decades (ref). This is a success for societies and improves the quality of life as many older adults have more healthy years to experience. Meanwhile, larger proportions of older adults result in strives of efficiency in use of public resources, simultaneously with increases of marketization, privatization and involvement of informal care (Rostgaard & Szebehely, 2012). Currently, neither financial resources nor personnel cover the existing care needs of older adults, which means that care from next of kin is an important part of eldercare in Sweden today (Rostgaard et al. 2022; Jegermalm & Torgé 2021).

An important aspect to consider regarding the care of sick, frail and dying persons is that it is largely about what Hughes (1984) calls "dirty work". It involves physically demanding work that involves taking care of bodies where sick or fragile people have to be fed, get help with going to the toilet and wash themselves (Twigg 2006). This type of intimate body work is not expected to be done in close adult relationships, in an age where professional and technical perspectives rather than interpersonal skills are emphasized (Exley & Allen 2007). Hence, the issue of family caregiving is a private issue, meanwhile, similar to death and loneliness (Walter, Littlewood & Pickering, 1995), it is increasingly being transformed into a public concern through policies, debates and the media (Ågren, 2020). Moreover, Walter (1994) argue that the private and public are conflated in the postmodern society, where the inner need of the patient is a public concern which the professional must satisfy (Walter, 1994). Concurring with these arguments, this study will attend to how the media represent the, to a large extent, private issue of family caregiving. The news media serves to construct welfare issues (Misra, Moller & Karides, 2003) that are in the borderline between the private and the public (Conrad, 1997). News media reports are, however, not objective mirrors of “reality”, since this context communicates meaningful symbols within the societal context within which it is located (Thompson, 2000).

Drawing on the perspectives that welfare issues, in this case family caregiving, is dependent on news media constructs, we will examine how family caregivers and older adults in need of care are constructed in Swedish news media. Hence, the overarching aim of this study is to investigate how family caregiving of older adults is represented in Swedish news media articles. This aim entails a focus on how next of kin providing care are positioned as responsible for the well-being of older adults and how older adults in need of care are positioned in relation to next of kin who care for them. Based on this aim, the following research questions will be addressed in this study:

1. How are family caregivers constructed in media articles?
2. How are older adults in need of care constructed in media articles?
3. How are family caregivers, older adults, and the welfare state positioned in relation to each other in media articles?

# BACKGROUND - FAMILY CAREGIVERS IN SWEDEN BETWEEN RIGHTS AND OBLIGATIONS

In Sweden, the municipalities that are responsible for ensuring that older adults receive the care they need. What the care should consist of is decided in a needs assessment process. Cohabiting partners have a certain legal responsibility to each other to jointly take care of, for example, the common household, but they have no responsibility to help the other person, for example, with toileting. Adult children have no responsibility at all for older parents. Even though it is the case that older adults should receive care through the municipality, next of kin help each other and it is not uncommon for the municipality to do some care efforts while next of kin do other, meaning that the older person receives a combination of formal and informal care efforts. Some next of kin take on a great care responsibility that goes on around the clock all year round. However extensive the informal care may be, it is considered to be completely voluntary in Sweden. In theory, next of kin always have the opportunity to refuse care responsibility, and then the municipality's formal care should step in. Emotionally, this is obviously not so simple.

In 2009, there was a revision of the Social Services Act, which stipulated that municipalities should no longer "should" but "shall" offer support to next of kin who care for older adults (SFS 2001:453, 5 kap. 10 §). However, the provision does not specify what the support should consist of. In addition, the reference to respite as a specific form of support was removed. Edebalk calls this a "high-level magic trick" (2022b) and argues that it can only be interpreted to mean that respite care, which is a costly measure for municipalities, would not be required by law and that it would be up to the municipalities themselves whether or not they want to provide this service. The change from "should" to "shall" can of course be seen as positive - a kind of recognition of the family's efforts - but it can also be seen as a step towards a reintroduction of the family's responsibility for the older adult. The government's bill Support for people who care for or support next of kin states that well-functioning support for next of kin can help them to be able to provide care for a longer period of time than they would otherwise have done (Prop. 2008/09:82). Support for next of kin was therefore presented as a way to prevent and perhaps completely avoid more costly needs, such as special housing. The bill also stressed the importance of protecting next of kin so that the burden did not become too great, as they would then be forced to seek care for themselves. Ten years later in 2019, the National Board of Health and Welfare (NBHW) (2020, p. 14) was tasked by the government to develop a "broad national strategy for family caregivers who care for or support older adults". The extensive report highlights several aspects, including that the efforts older adults receive from the formal care service and medical health service needs to be of good quality for it to be reliving also for the family care givers. This is prerequisite for family caregivers to provide care voluntarily and at a reasonable level. NBHW (2020, p. 113) writes that: "Today, it is known that older adults do not always receive the care and support they need, and that this in various ways affects family caregivers' care burden." The starting point for the report was therefore that the situation of family caregivers needs to be improved, including through better support.

In April 2022, the Swedish government adopted its first national strategy for family caregivers who care for, help, or support an older adult (Ministry of Social Affairs 2022). The overarching starting point for the strategy is that family caregivers' contributions and participation should always be voluntary. In addition, three points are highlighted (Ministry of Social Affairs 2022, p. 3), where it is considered important that:

* The welfare system's medical and care efforts for the older adult work.
* The welfare system's medical and care efforts for the older adult are provided with a family caregiver perspective (particularly in the form of information to family caregivers).
* It is recognized that family caregivers may need support for themselves, such as information, education, relief respite care, financial support, and counselling.

Within the framework of the strategy, the government has given the NBHW three tasks. The first is to follow up and review the support that municipalities and regions offer family caregivers, as well as to monitor the family caregiver perspective in these activities. The second task is to develop support that is aimed at both needs assessors, as well as employers, decision-makers, and managers within healthcare and care, as well as other healthcare and care staff. This support should provide guidance for strengthening the family caregiver perspective. The third task is to provide guidance in social service casework on how family caregivers' needs can be made visible.

Parallel to the development of the family caregiver strategy, the Swedish government appointed a commission in December 2020 with the task of proposing an eldercare law. The commission's mandate can be divided into two parts: firstly, to propose an eldercare law, and secondly, to consider and, if necessary, submit proposals that in different ways strengthen the availability of medical expertise within eldercare. The analyst's analyses and proposals should cover the consequences for both the older adult and family caregivers, as well as for staff in the relevant professional groups. In June 2022, the commission submitted the report "Next Step - Increased quality and equality in care and support for older adults" (SOU 2022:41).

The report again emphasizes that the care that family caregivers and other loved ones provide to their older adults should be voluntary (SOU 2022:41). It is the municipality's social services that have the ultimate responsibility for eldercare. However, the commission continues:

“Today, however, many family caregivers cannot choose how, when, or to what extent they provide care. Thoughtfulness or a sense of duty can make it difficult to draw a line between voluntary and involuntary care. The loved ones' ability to choose how much they want to provide care is dependent on the availability or quality of public care and support. When welfare interventions do not work well, the burden on family caregivers increases and their ability to choose how much they help their loved ones decreases. (SOU 2022:41, p. 221)

The main point is therefore that well-functioning medical and care efforts also make it easier for family caregivers. In short, the commission concludes that information, fixed care contacts, and better coordination of medical and care efforts should make it easier for family caregivers. To the extent that the older adult in need of care wants to, family caregivers can be involved in planning care interventions: "It is the person [the older adult] himself or herself who decides who or whom he or she wants to participate. If he or she opposes the participation of a family caregiver or other loved one, it must be respected" (SOU 2022:41, p. 279). Hence as the needs assessing process is directed to the older adult in need of care, family caregivers do not really have any saying in the process if the older adult does not want them to. Also, efforts that are directed to the family care giver such as relief can only be granted if the older adult him or her self's agree upon int. Hence, this can put family caregivers in a difficult situation where they themselves need relief respite care, but the older adult does not agree to it.

## Previous research on family caregiving in Sweden

A validity question is how extensive informal care efforts in Sweden are. The extent of informal care in Sweden depends heavily on how we define "care" and the types of interventions considered. Studies in the 1990s using a narrow definition focused on personal care showed around 10% of the population as caregivers. Expanding the definition to include "lighter" interventions like companionship, supervision, transportation, and babysitting alongside heavier care tasks, the percentage jumps to 30-40%. Caution is needed when comparing studies due to varying definitions and questions used. For example, population surveys from 1992 and 1998 asked about providing informal care outside the home for next of kin, friends, neighbors, or colleagues, focusing on concrete tasks like cleaning, shopping, transportation, and gardening (Jeppsson Grassman, 1993; Jeppsson Grassman & Svedberg, 1999). From the Population Study 2005 onwards (Olsson et al. 2005), respondents have been asked whether they provide informal care for someone *outside their own* household, with or without special care needs, or for someone i*n their own household* with care needs. Researchers highlighted the need to include intangible and emotional support like companionship, contact, and supervision, often overlooked but valuable to care receivers (Jegermalm, 2005; Parker & Lawton, 1994). Previous studies often didn't distinguish between support within or outside the household (Jegermalm, Malmberg & Sundström, 2014). By considering diverse interventions and recipient needs, we gain a fuller picture of the critical role informal efforts play in Sweden.

**TABLE 1: SWEDISH STUDIES ON CAREGIVING OUTSIDE AND WITHIN ONE’S OWN HOUSEHOLD**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Caregiving outside one’s own household** | | | | **Caregiving within one’s own household** | | | | |
| **STUDY** | **YEAR CONDUCTED** | **AGE GROUP** | **WOMEN** | **MEN** | **STUDY** | **YEAR CONDUCTED** | **AGE GROUP** | **WOMEN** | **MEN** |
| **Jeppsson Grassman 1993 (SOU 1993:82)[[1]](#footnote-1)** | 1992 | 16-74 | 27% | 29% |  |  |  |  |  |
| **Olsson *et al.* (2005)** [[2]](#footnote-2) | 1998 | 16-74 | 31% | 28% |  |  |  |  |  |
| **Szebehely and Ulmanen (2009)** | 2000-2001[[3]](#footnote-3) | 20-54 | 37% | 27% |  |  |  |  |  |
| **Szebehely and Ulmanen (2012)** | 2002-2003[[4]](#footnote-4) | 55-64 | 31% | 29% |  |  |  |  |  |
| **Olsson *et al.* (2005)** | 2005 | 16-74 | 54% | 51% | **Olsson *et al.* (2005)[[5]](#footnote-5)** | 2005 | 16-74 | 5% | 5% |
| **Svedberg *et al.* (2010)** | 2009[[6]](#footnote-6) | 16-74 | 46% | 43% | **Svedberg *et al.* (2010)** | 2009 | 16-74 | 5% | 5% |
| **Szebehely and Ulmanen (2012)** | 2009-2010[[7]](#footnote-7) | 20-65 | 69% | 67% |  |  |  |  |  |
| **Szebehely *et al.* (2014)** | 2013[[8]](#footnote-8) | 45-66 | 42% | 42% | **Szebehely et al. (2014)[[9]](#footnote-9)** | 2013 | 45-66 | 5% | 5% |
| **von Essen, J., Jegermalm, M. & Svedberg, L. (2015)[[10]](#footnote-10).** | 2014 | 16-74 | 42 | 41 | **von Essen, J., Jegermalm, M. & Svedberg, L. (2015).** | 2014 | 16-74 | 5% | 5% |
| **von Essen, Jegermalm, Kassman,**  **Svedberg, Vamstad & Wallman Lundåsen (2020)[[11]](#footnote-11)** | 2019 | 16-84 | 45 | 47 | **Jegermalm & Torgé[[12]](#footnote-12)** | 2019 | 16-84 | 4%  (47%) | 4%  (53%) |

Table 1 presents data from various studies conducted between 1992 and 2019.

# THEORIES

In this study, we draw on the theories on how the news media serves as an important source for constructing societal understandings of welfare issues. In order to grasp the dynamics of the news media, we are inspired by social problems theories on how various actors within the public sphere contribute to construct certain notions of family caregiving and older adults receiving care provided by next of kin and give meaning to this phenomenon. Furthermore, constructions of imagined identities work as the foundation for social policies (Weicht 2013; Hall 2000). How a welfare issue is understood as a problem and thus gains societal attention is dependent on how it is presented, discussed and negotiated by claim-makers in public arenas (Blumer 1971; Hilgartner & Bosk 1988; Loseke 2003). Hilgartner and Bosk (1988) claim that the process of competition between social problems where there are numerous conditions which potentially cause harm, but only a few reach “celebrity” status and becomes recognised as problems in need of solutions (Hilgartner & Bosk 1988). How an issue is constructed and understood in society has an impact on how the issue at hand is dealt with, regarding how plans for organising actions are formulated and what resources that are allocated for solving the problem (Blumer 1971; Spector & Kitsuse 1973). Loseke (2003) argues that actors, defined claim-makers, who strive to gain public attention for certain potentially harmful conditions, construct social problems with ambitions of persuading audiences that a condition is a social problem because it is widespread, causes harm, and can be reduced through human action. According to Seale (2003), a central part of mass media representations is to construct opposites with the purpose of creating drama, as dramatized contradictions and simplifications are necessary for the media to entertain their audiences (Seale, 2003). The news media is nevertheless a complex context where the perspectives and voices of journalists, governments, civil society, the industry and others meet and compete, resulting in various sources of knowledge being available and also blurring the lines between “expert” and “lay” knowledge (Hallin, Brandt, & Briggs, 2013). These theories are of relevance to analyze how various claim-makers contribute to construct family caregiving in specific ways and how the news media is dependent on the context within which it is located, follow certain logics and construct narratives in specific ways with the aim of attracting readers and advertisers.

## Methods and material

### Design

From a social constructionist perspective, we have analyzed how informal caregiving provided by next of kin is constructed and how caregivers are positioned in Swedish news media in articles published between 1996 and 2022. Thus, we have examined how informal caregiving conducted by next of kin is constructed in the news media and whether these constructions have shifted over time. The motive for the selection is based on the fact that issues relating responsibilities for older adults' well-being, including the issue of informal caregiving, received increased attention in the public debate in the 1990s, with a number of targeted initiatives to increase knowledge about the living conditions of older adults.

### Material

The empirical material of this study consists of news media articles published over the years 1996 and 2022 in Swedish newspapers. The articles were collected using the Swedish words "anhörigomsorg” + “äldre”, which translates to “family caregiving" + “older person”, in the database Mediearkivet, which covers most of the Swedish newspapers and magazines.8 Articles that were duplicates, press releases, brief notices and event information were excluded. Following the work of excluding articles, our material comprised 112 news articles which were downloaded and saved on the authors’ computers.

### Process of analysis

After searching, identifying, and downloading articles from Swedish newspapers, we proceeded by the process of analyzing the empirical material. In the first phase, we read all the articles. After this first reading we acquired an initial understanding of the articles. In order to facilitate a comprehensive overview, we sorted the articles based on geographical distribution area and types of articles (i.e. debate, news reports, reportages and so on), as displayed in **Table 1**.

**Table 1. Types of articles and geographical distribution area of the newspapers**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Nationallevel** | **Regionallevel** | **Locallevel** |
| **Debate** |  |  |  |
| **Reportage** |  |  |  |
| **Newsreport** |  |  |  |
| **Editorial** |  |  |  |
| **Lettertotheeditor** |  |  |  |
| **Chronicle** |  |  |  |
| **Total** |  |  |  |

Sorting the articles based on geography and types of articles was an important analytical endeavor, as the contexts of the media also influence how news are represented in the news media (Thompson, 2000). It also illustrates on what levels in society the issue is discussed, and types of articles gives insights to how the issue is written about. For example, if an issue is discussed in mainly debate articles, the tone may be focused on pointing out blame and less attention of nuances (Agren, 2017) whereas reportages may give in-depth descriptions of an issue from different perspectives.

Thereafter, all the news articles were read several times to familiarize ourselves with the material. Then we searched for preliminary categories that would enable us to form an overview of and to organize the material. These categories were identified by finding words, expressions, and concepts that occurred recurrently. Throughout the analytic process, we were inspired by concepts and perspectives from media research enabling understandings on the interplay between public discourse, policy, and the media (e.g. Stroobant, Van den Bogaert & Raeymaeckers, 2019; Seale, 2003), how issues relating to ageing and old age are constructed in the media (Ylänne, 2022), and how responsibilities for the well-being of older adults are constructed (Agren & Cedersund, 2020). Departing from these perspectives, we asked these questions to the material:

What is the overall content? How is informal care provided by next of kin described? What contexts are actualized and related to informal care provided by next of kin? How large share of the article is about next of kin? How large share of the article is about older adults? How are next of kin positioned? How are older adults in need of care positioned? Whose perspective is in focus? What is the problem, solution and who is made responsible?

These questions enabled in-depth understandings on how the issue of informal care provided by next of kin is constructed in the Swedish news media and how this issue has changed over the years. Moreover, it was possible to distinguish themes when asking these questions, in particular concerning the issues of who´s perspective dominates and who is in focus; the caregiver or older adults. In some cases, it was however not a straightforward task to identify distinctive themes as some aspects could be addressed in several articles, leading to themes being intertwined. We could, nevertheless, by detailed analysis on the words used to give meaning to informal care and asking the this variety of questions to the material made it possible to distinguish themes from one another.

Utv: An example of this was when the word informal care provided by next of kin was expressed in an article. Both authors were actively involved in the analysis process and met regularly to discuss what we found in the material and through these meetings we reached consensus regarding how we interpreted the material and what themes we identified.

In Table 2 an overview of the identified themes is presented.

Table 2.

# RESULTS

In this segment we present themes that were found in the empirical material consisting of 112 articles from the Swedish news media published between the years 1996 to 2022.

Theme 1. Family caregiving, cutbacks and deficiencies within the welfare state

A dominating construct in the analyzed news media articles was that cutbacks and deficiencies within the welfare state has led to increased responsibilities for family caregivers to care for their older family members in need of care. Under the headline “Being mother's mother”, a journalist argued that successive and stealthily austerity measures have led to older adults being placed; “Straight into the daughter's lap.”, as family caregiving is described as a task for women since; “Women take care of their old mother”. When referring to a report from Stockholm University, the author states that one in four places within eldercare facilities have disappeared and that places in hospitals were cut in half between the years 1995-2005. Thereafter, it is argued that the foundation of the Swedish society was that human values includes all, also sick and old persons, where everybody has the right to care and not being dependent on children and grandchildren. Ideas, which according to the journalist are not prevalent today. The conclusion of the article is that “the care of our old and sick” are the most important societal issues when it comes to equality, justice and how society is structured (Arbetarbladet, 2014-01-08).

Theme 2. Family caregiving as a trap for women

Theme 3. Family caregiving, eldercare and politics

Theme 4. Family carers as a lifeline and economic resource for society

In a number of articles, family caregivers were praised and positioned as conducting work of importance for older adults, for eldercare and for society as a whole. In a reportage, a daughter is described as a “lifeline” for her mother who has extensive care needs after suffering two strokes. Here, the daughters hectic everyday life is described in detail, with a full-time job, three teenage children and no time for friends or leisure activities. She visits her mother three times a day, and spends two hours daily with her mother. Time that she could spend with her children, which leads to guilty conscience. In parallel with portraying her stressful life and sacrifices, a critique of the municipality´s eldercare and priorities runs through the article. Due to the large amount of homecare staff, her mother's second stroke was not discovered in time, because the staff, who hadn´t met her mother for eight months, just thought she had become worse. The time pressure on staff is illustrated through the example that her mother takes long time to eat. Due to time pressure, the staff cannot always stay throughout the whole meal and the daughter has found half a meal in the trash. Critique was also directed towards the municipality which invested money in a cinema but not eldercare. Moreover, the mother was considered not sick and frail enough to be eligible to reside at a nursing-home, but still have extensive care needs. The daughter did, however, also express that she understood the pressure on the staff, and that some staff were “nuggets of gold”, who took time for her mother and meant a lot. One example of an article where family carers are positioned as ”saving” eldercare, with the title “Family carers saviors of eldercare” (Göteborgs-Posten, 2004-02-24), was a reportage about a man who had cared for his wife for 15 years. The article intertwines the man´s experiences with reports, from NBHW, on the situation of family caregivers. The article adapts a critical perspective, as the NBHW report is cited to state: “Eldercare stands is dependent on family caregivers - without them, the welfare system collapses”, and meanwhile the man expresses a lack of understanding from the politicians. Throughout the remainder of the article, focus is, however, more on the man´s feelings of being a family caregiver, without a critical tone. For example,

Discussion

* Deficiencies in the welfare state today.
* Researchers, persons from governments, journalists and other “experts” are the most prominent voice.
* Family caregivers, active citizens are also to some extent expressing their experiences. Older adults in need of care are almost made invisible
* Overall, the argument is that family caregivers make important contributions but more support, financial and social is needed.
* Medical vs social?
* Trap for women
* How do these findings relate to previous research?

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1. "The Population Study" conducted in 1992 marked the first time it included questions about informal caregiving. According to Jeppsson Grassman, 28% of respondents provided care to someone outside their household, with similar rates for both men and women. However, a later study by Olsson et al. (2005) compared data from 1992 (Svedberg et al., 1993), 1998, and 2005 and found a different gender breakdown for 1992: 27% of women and 29% of men provided care. [↑](#footnote-ref-1)
2. The information comes from “The Swedish Population Study” [in Swedish: Befolkningsstudien] by Olsson et al. (2005, p. 36 and onwards) and contains comparable data from 1992 (Svedberg et al. 1993), 1998 and 2005 (and a study from 2001 that only involved Stockholm County, not included in this table). These studies are based on simple random sampling, with about 1500 interviews conducted by Statistics Sweden. The material was analyzed by a research team from Ersta Sköndal University College. The question in the survey was: “This survey is about the extent to which people help other people with things like housework, transport, gardening, supervision or other help. Do you give such help regularly to relatives with whom you do not live with, as well as neighbors, friends or co-workers?” (Olsson et al. 2005, p. 36, my translation). [↑](#footnote-ref-2)
3. This study draws on data from the “Time Usage Survey” [in Swedish: Tidsanvändningsundersökningen] collected in 2000-2001 by Statistics Sweden [in Swedish: Statistiska centralbyrån] through a simple random sample of 4000 people aged 20-84 years who were interviewed. The question was: “Are there any people not belonging to your household who are dependent on your help in the form of grocery shopping, cleaning, doing the laundry, regular babysitting, going out or the like?” Child care has been excluded from the data (see Szebehely and Ulmanen 2009, p. 10, Table 1, my translation). For this question, the number of respondents was 3553, that is, those who responded to the question on whether they provided care outside their household (see Szebehely and Ulmanen 2009, p. 11). [↑](#footnote-ref-3)
4. These figures are based on data from studies by Statistics Sweden using the “Living Conditions Survey” [in Swedish: Undersökningar av Levnadsförhållanden, abbreviated to ULF] in 2002 based on a simple random sample consisting of interviews with 5973 people (see Statistics Sweden 2010a, Appendix 12). The 2002 survey was the first time that questions were asked about caregiving in a ULF study. The question was: “Are there any people not belonging to your household who are dependent on your help in the form of grocery shopping, cleaning, doing the laundry, regular babysitting, going out or similar?” (My translation). Those who responded that they only provided help with childcare were excluded from the data (see Szebehely and Ulmanen 2012, p. 20). [↑](#footnote-ref-4)
5. From the Population Study 2005 onwards, respondents have been asked whether they provide informal care for someone outside their own household, with or without special care needs, or for someone in their own household with care needs. The reports do not provide a gender breakdown, but they state that men and women perform roughly equal amounts of care work in their own homes. [↑](#footnote-ref-5)
6. These figures are based on data from “The Population study” conducted in 2009 and analyzed by the same research group from Ersta Sköndal University College as the other population studies. [↑](#footnote-ref-6)
7. These figures are based on data from studies by Statistics Sweden using the “Living Conditions Survey” in 2009 based on a simple random sample consisting of interviews with 6309 people (see Statistics Sweden 2010a, Appendix 12) (see Szebehely and Ulmanen 2012, p. 22). [↑](#footnote-ref-7)
8. The data come from a survey conducted by the Institute of Social Work, University of Stockholm, where 3630 people aged 45-66 years responded to questions on caregiving for people outside their own household (see Szebehely et al., 2014, p. 4, and Table 1, p. 12). [↑](#footnote-ref-8)
9. See Table 5, Husband/wife/partner. [↑](#footnote-ref-9)
10. These figures are based on data from “The Population study” conducted in 2014 and analyzed by the same research group from Ersta Sköndal University College as the other population studies. [↑](#footnote-ref-10)
11. These figures are based on data from “The Population study” conducted in 2019 and analyzed by the same research group from Ersta Sköndal University College as the other population studies. [↑](#footnote-ref-11)
12. These figures are based on data from von Essen et al. (2020). The survey had n=1108 respondents, with n=585 of them reporting caregiving for an older adult. Among these caregivers, 81 provided care to a cohabitant older adult. This translates to 53% men and 47% of women caregivers. Recalculating these numbers to the survey response gives a figure of 4%. [↑](#footnote-ref-12)