

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) New Challenges to Ageing in the Rural North. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

-Voices from the North:

Stories about active ageing, everyday life and home-based care among older people in Northern Norway

By: Mai Camilla Munkejord, Walter Schönfelder & Helga Eggebø

Institutional affiliation:

Mai Camilla Munkejord, (PhD), Professor at the Department for Child Welfare and Social Work, UiT, The Arctic University of Norway/Research Professor NORCE – Norwegian Research Centre

Email: Mamu@norce-research.no

Postal addresses: 1) UiT, The Arctic University of Norway, Box 6050 Langnes, 9037 Tromsø, Norway. 2) NORCE, Nygårdsgaten 112, 5008 Bergen, Norway.

Walter Schönfelder (PhD), Associate Professor at the Department for Child Welfare and Social Work, UiT The Arctic University of Norway.

Email: walter.schonfelder@uit.no

Postal address: The Arctic University of Norway, Box 6050 Langnes, 9037 Tromsø, Norway.

Helga Eggebø (PhD), Senior Researcher at the Nordland Research Institute.

Email: Helga.eggebo@nforsk.no

Postal address: Nordland Research Institute, Box 1490, N-8049 Bodø, Norway.

Abstract

What is the meaning of active ageing in the daily life of frail older people in need of comprehensive home-based care services? This chapter addresses this question using in-depth interviews with women and men aged 70-97 in Northern Norway. The chapter illustrates first,

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) New Challenges to Ageing in the Rural North. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

that some older women and men actually prefer to age actively *within their home* by doing activities such as reading books, solving Sudoku, watching TV and watching birds at the bird feeder. Second, it illustrates the key role potentially played by the next of kin in helping older relatives with different practical issues that may have major impacts on their social well-being. Third, we provide evidence for the limits of public care services in supporting older people with no or few relatives who, also when they become frail, still desire to engage in activities and meetings outside of their homes.

Key words: active ageing, everyday life, home-based care, Northern Norway

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

Introduction

We live in an ageing society. Although ageing is a multifaceted phenomenon, and being older by no means inevitably entails ill health, we do see a growing number of frail¹ older people in need of care services, especially in rural parts of the Nordic countries (Bygdell, 2014; Ness et al., 2014). According to the active ageing policies that are on the agenda in both Europe and Norway, people are increasingly expected to age in an active manner (Jacobsen, 2015; 2017). Although the term active ageing has only recently come into common use, it may be observed as a variation of other policy terms such as “positive ageing”, “successful ageing” and “healthy ageing”, used for the past 20-30 years in policy documents on ageing and care (Ranzijn, 2010; Jacobsen, 2015). However, what does active ageing mean? According to the abridged English version of the Norwegian white paper 34 (2012-13, p. 43), “active and secure ageing is not just about health services and care for the elderly (sic) – it is also about participation in physical, social and cultural activities.” An important question, however, is if older people themselves want to age actively in ways defined by current policies, especially when they experience sickness and increasing loss of functional abilities.

In this chapter, we ask the following question: What is the meaning of active ageing in the daily life of frail older people in need of comprehensive home-based care services? We draw on in-depth interviews with men and women in their 80s and 90s in Northern Norway to highlight their everyday life experiences. In particular, we emphasise what kind of activities they engage in, their care needs, whether these needs are met and, if so, how and by whom. Our findings suggest that active ageing in terms of engaging in social relations and meaningful activities is important for older women and men. However, as this chapter will show, one does not have to leave the house to live an active everyday life. Rather, some of the participants in this study simply enjoyed *being active while staying at home*. They hardly ever left the house and did not wish to do so, either. These participants rather spent their days reading books or magazines, watching sports or soap operas on TV, thinking about the old times, looking out of the kitchen windows to observe what was going on, or watching the sparrows at the bird feeder, in addition to socialising with visitors such as relatives or care workers who came to provide services. We observed that in addition to comprehensive public care services, these participants received substantial support and help from relatives and, to some extent, neighbours. We also analyse examples users of home care services who express their desire for support to pursue a more socially and physically active life while being confined to inactivity in their own homes due to the limits of social care services provided by the municipality. Hence, this chapter illustrates three points: first, that it is possible to age actively in ways not considered by public active ageing policies; second, that next of kin may have a major impact on the social well-being of frail older women and men; and third, that the public in-home care do not necessarily allow them to realize a wish of active ageing outside of their home.

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

In the following, we will give a brief overview over relevant research on ageing and care for older adults in Norway before presenting our methods, data, analysis and conclusions.

Background

In Norway, everybody has the right to receive public health and care services at a relatively low cost, no matter where they live (Kröger, 2005; Vabø et al., 2013). Approximately 25% of people older than 67 years receive public nursing or other care services, most of whom continue to live in their own homes (Mørk, 2013). The trend towards ageing and being cared for at home may be explained by the fact that it is more cost-effective for municipalities to provide home-based rather than institutional care (VID and Kaupang, 2016). Furthermore, many persons who need nursing and practical care services actually prefer to stay at home – particularly if their only alternative is to move into a room in a nursing home (Berge, 2017; Ness et al., 2013; Ward et al., 2008).

In Norway, the responsibility for providing care is delegated to the municipalities, which offer home-based nursing care and home-based practical assistance. Whereas nursing care is about monitoring health and ensuring that users receive medical follow-up during their rehabilitation or illness, practical assistance includes services such as helping the user with getting up in the morning and going to bed, dressing and undressing, meal preparation, assistance with personal hygiene, as well as cleaning tasks such as washing floors, washing dishes, and doing the laundry (Otnes, 2015). In addition, and according to the law in Norway, the users' social care needs should also be attended to by the municipal home care providers (Kjellevoid, 2012). Social care, however, is a poorly developed field in municipal home-based care today (Munkejord et al., 2017; Skaar et al., 2010; Skatvedt and Norvoll, 2016). Hence, in recent years, the provision of home care services in Norway has increasingly prioritised health-related nursing care at the expense of social, and to a certain extent, practical care needs. This trend can also be found in other countries, such as the UK and the US (Patmore, 2002; White-Chu et al., 2009).

Traditionally, care for the frail women and men was mainly the responsibility of female family members. Although often referred to as “invisible care” (NOU 2011:11, p. 16), family care is still important today. Thus, about half of those receiving municipal home care services also receive substantial informal care on a regular basis (Otnes, 2013, p. 90), and estimates indicate that the amount of informal care is equivalent to that provided by formal (municipal) care providers (NOU 2011:11, p. 16). Thus, while providing care services for older people in Norway is a legal public responsibility, many women may experience strong expectations to assist a frail parent, sibling or another close relative (Gautun, 2007; Daatland and Veenstra, 2012; Alvsvåg and Tanche-Nilssen, 1999).

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

Methods and data

Selection of participants

This chapter draws on empirical findings from the project “Ageing at home. Innovation in home-based elderly care in rural parts of Northern Norway”.² A team of three researchers collected data in two municipalities characterised by a small and sparse population and a geography and topography that pose challenges for the provision of municipal home-based care in terms of accessibility and travel time. The leaders and employees of the municipal home care services were helpful in the process of establishing a strategic sample of respondents. In total, 11 men and 17 women aged 70-97 were interviewed³ for the purpose of this chapter. These participants were selected based on the criteria that according to the home care services, they were not living with dementia and were healthy enough to participate in an interview. The majority of these participants lived in their own homes, located between 5 and 50 km from the municipal centre. Nine of them had recently moved, either into a municipal sheltered home (six) or to a municipal apartment (three). Some of the participants officially lived alone, but had one or several relatives, children, grandchildren or others, living with them for parts of the year. In total, we interviewed three couples who lived together. Among the other participants, two were divorced, one had always been single, one had lived in a multigenerational home in which the parents and siblings had either died or moved out, and two had a partner who was living either full-time or part-time in a nursing home. The researchers brought flowers or chocolate to each participant and were themselves offered coffee, and sometimes also something to eat, during the interviews. This approach created the feeling of an “ordinary visit”. Some of the participants expressed great pleasure in having a visitor and some conversation.

Some of the participants had received higher education or vocational training certificates. Among this group, the women had held the positions of telegraphist, teacher and nurse, whereas the men had held the positions of principal and public administrative officer. However, the majority of the participants had received only compulsory education. Some of them noted that there had been no money to pay for their education after they had completed primary school. Among this group, the men had worked e.g. as a driver, as a janitor, in construction, or in a mine; some had worked as fishermen or had combined (river) fishing with sheep farming. Some of the older women we interviewed had never held a permanent salaried position. But, in addition to their work in their homes, where they looked after children and the animals on the farm (if any) and where they made clothes and prepared meals, they had occasionally earned some income from, for example, part-time cleaning jobs or from selling clothing that they had sewn or knitted.

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

Analysis and ethics

The analysis of the interview material was a collective process. We collaborated closely during the analysis by organising a workshop in which the three researchers came together to examine the data material. We used a twofold strategy. First, we presented a summary of each interview and identified themes. We mapped a large number of subjects and thereafter discussed what we considered the main themes and subthemes. After this initial round of analysis, we defined the specific research questions to be addressed in future publications. Second, for the purpose of this chapter, we analysed the interviews with the older participants once more with a focus on how they talked about their everyday lives, the activities in which they engaged, the social relationships they maintained and how they maintained them, their care needs, who met these needs, and whether and how they talked about unmet needs. During this second round of analysis, we were interested in identifying patterns and variations across the interviews: what did our various participants say about these issues? Were there differences in their experiences related to e.g., whether they had family members living nearby or whether they lived in a remote place, as opposed to the municipal town centre?

We obtained informed consent from all of the participants after having provided them with written and oral information about the study. All names used in this chapter are fictional. In the following, the experiences of four of our participants will be analysed in particular detail as they contribute to shed light on our research question in a particularly clarifying way.

Results: Voices from the North

Meaningful and active everyday life – within the home

Marit (aged 90) and Oskar (aged 86) both lived in their original homes far from the municipal centre. Both were widowed and had been so for a long time. They were quite frail, in the sense that they had reduced functional abilities and needed a walking frame to move around in their homes. Both of them had back problems and/or laboured breathing. Oskar needed help going to bed in the evening and getting up in the morning, whereas Marit was able to do so herself. Both of them had several health issues and needed medications of various sorts.

When talking about their everyday life, both Marit and Oskar stated that they spent their days with various activities within their home. Oskar said that he liked to sit by the kitchen window to observe what was going on outside. There was always something to look at – cars passing by, birds or the weather. He also liked to read books about local history, in particular about what happened in Finnmark and in the Barents Region during World War II. Marit stated that

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

she treasured watching the birds in the garden. She had seven different bird feeders strategically placed in front of the kitchen and the living room windows. She also liked watching TV and solving Sudoku puzzles. In addition, she had a passion for books:

Researcher: You told me that you like to read. What do you read? Newspapers, or?

Marit: Newspapers, yes, and this kind of (she shows a book to the researcher)...

Researcher: Right! (The researcher reads the title of the book and identifies it as a book in a series): So, you read serial novels?

Marit: Yes!

Researcher: Great!

Marit: Yes, I read six different series.

Researcher (laughs): Really?

Marit: Yes!

Researcher: That is so fun! I think it is really good for the brain to read as much as you do!

Marit: Yes! So I get them by mail, and I am able to keep the stories apart from each other.

Marit continued to talk a bit about the different series she was reading. It became obvious that keeping the stories apart from each other was more than just being able to read several books at the same time. For Marit, following six different storylines was a confirmation for herself of her own mental activity and her ability to categorise these storylines in each their own literary context. We regard this mental activity as an expression of active ageing not included in the public discourse on active ageing. In another part of the interview, she explicitly said that she did not attend social gatherings or meetings for seniors because she “did not need that”. In fact, neither Marit nor Oskar participated in the weekly café for seniors organised by the retiree’s association in the municipal centre nor were they involved in any other senior or cross-generational activities outside of their homes. Both explained that they hardly ever went out. In fact, Marit said that she did not leave the house at all other than for her regular visits to the GP accompanied by a relative. Additionally, Marit declined when offered a place at the municipal Day Care Centre where her daughter sent an application on her behalf. The municipal Day Care Centre was a low-cost meeting place provided for a selected number of older persons who would come together for some hours one or several days per week to take part in social activities, drink coffee and have dinner together. As Marit explained, she preferred her own company.

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) New Challenges to Ageing in the Rural North. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

Social well-being – within the home

In addition to engaging in activities that they described as quite meaningful for themselves, mainly in their own company and within their own homes, both Marit and Oskar socialised a lot with relatives on the phone. Furthermore, various people visited them on a regular basis. Whereas Oskar received care services from the municipality three times a day, Marit received daily dinner at her door, help taking a shower once per week and regular cleaning of her house from various municipal employees.

In addition, their relatives had contributed substantially with meeting their practical care needs. Marit received different types of practical help on a regular basis from various people. Her son, for instance, had adjusted her house according to her particular needs to enable her to move around the main living area with her walker. Everything that she needed had been moved to the main floor so that she no longer had to try to climb the stairs. Her son had modernised her kitchen, so she could use the kitchen worktops while having the most important equipment within reach. He had also installed a heat pump. Marit's grandchild bought and brought home her groceries every week, such as bread, biscuits, coffee and milk. Her relatives, moreover, helped her put bird food on the bird feeders in the garden and her post and newspapers were delivered directly to her front door, while the driveway was cleared of snow by a neighbour during the winter months.

The story of Oskar illustrates similar points. Like in Marit's case, his house had been adapted: A relative had built a ramp at the entrance to allow Oskar getting in and out of the house while using his walking frame. The thresholds had been removed from the doors between the rooms to prevent stumbling. Among other aids he had a handrail by the bed and in the shower, and armrests attached to the toilet. In addition, he had a security alarm around his neck. Moreover, his adult daughters helped him in many ways, Oskar explained; they cleaned the house, did the laundry, and helped keeping the garden in order.

In both Marit's and Oskar's cases, it was obvious that their relation to their relatives was crucial. Both told us about various relatives who regularly came by or even came to stay with them for shorter or longer periods. Oskar said that his daughters often came to visit and that each of them used to stay with him for days or even weeks at a time. The same was the case with Marit, as illustrated in the following excerpt where also her daughter Linda was present:

Researcher: What, are you saying that your grandchildren pop by *every day*?

Marit: Yes, I even have a grandchild who lives with me when she [Marit nods towards Linda] is not here.

Researcher: Really? Whose daughter is that grandchild?

Marit: That's [my son's] daughter.

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

[Marit continued to talk about other issues. A bit later in the interview, we came back to this issue:]

Researcher: Do you feel safe here in your home?

Marit: Yes, I do. But, I don't like to be alone during the night.

Researcher: Right, so that's why your grandchild has moved in here.

Marit: Yes, so that is all very well.

Researcher: How old is [your grandchild]?

Marit: She is 28, so she is an adult.

Researcher: Right, she is an adult. So, you don't like to be alone during the night. Has it been like that for a long time?

Marit: Oh yeah, for a long time... I was... After my husband died [20 years earlier] I was alone of course...

Researcher: ... Yeah, you had to... But, you did not like it?

Marit: Well, it was ok in the beginning because I was young and fit, so I would have been able to run out of the house in case of fire or anything. Now, that is not so easy anymore. That's why I like to have someone with me in the house at night.

Researcher: That is a very good arrangement. Has it lasted for a while? I mean: for how long has [your grandchild] slept here during the winter?

Marit: It must be two or three years or something like that?

In the excerpt above, we see that Marit explained that she had become a bit worried about sleeping alone in her house in case of a fire or similar hazards. In another part of the interview, she explained that it was most important for her to have someone in the house during the winter, because the darkness made her particularly anxious. As we observed above, Marit's grandchild, a single woman in her late 20s, had moved in with her in recent years; moreover, during the coming winter, this grandchild was planning to move into her house, which was essential for Marit to be able to stay home for yet another year. Likewise, during the summer, Marit's daughter used to come to stay with her as long as she could, normally between one and two months. Hence, although Marit formally, and according to the leaders of the municipal care services lived alone, in practice, this was not really the case.

In addition to substantial social and practical care from family members, Marit and Oskar received quite a lot of care services from the municipality. In Oskar's case, a healthcare worker called in every morning and evening to take his readings, make an evaluation, record an assessment, and check the oxygen bottle and the breathing machine. Oskar usually took some of his medicines in the presence of the healthcare worker, whereas other medicines were prepared for him to take with his next meal. In addition, the healthcare worker used to prepare

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) New Challenges to Ageing in the Rural North. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

a light meal before leaving, which Oskar could eat whenever he felt hungry. The following extract gives insights into Oskar's daily contact with his health care workers:

Researcher: Are they often here to look after you?

Oskar: The nurses?

Researcher: Yes.

Oskar: Morning and afternoon.

Researcher: Yes.

Oskar: Morning and afternoon. And during the night, The Sandman is coming...

(Both are laughing)

Researcher: So, what do they do? They help you take the medications...

Oskar: Yes, they give me medications, they give me food, they do the bed... And they want to give me a shower, but I don't want that, yet. I rather take care of that myself... (The researcher laughs).

Researcher: Do they do anything else, as well? Do they help you with anything else? Such as cleaning the floors?

Oskar: My daughters take care of that.

Researcher: Right, your daughters do that.

Oskar: Yes, they do enough cleaning.

Thus, both the municipal care workers and his daughters supported Oskar in many ways. As in Marit's case, the close contact and well-established distribution of work between Oskar's daughters and the public home health care services made it possible for him to stay at home, which, for Oskar, was the preferred over moving into the local nursing home.

To summarise, both Marit and Oskar received a relatively large amount of municipal care services. However, despite this substantial public support, neither of them would have been able to live in their own homes without the comprehensive supplementary care and support from their next of kin. Marit's and Oskar's relatives thus played a key role in helping with all kinds of practical issues, and in addition highly contributed to their social well-being and made them feel safe at home.

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

Social well-being outside the home -not all needs are met

Most of our participants told us that overall, they were satisfied with the help they received from the municipality. The participants who had their medicines delivered to their door with the appropriate dosages in medicine organisers highly appreciated that; and those who had dinner delivered to their doors said that the meals were varied and good. They also appreciated that home help staff came to do some cleaning in their homes or that someone came to help them with a weekly shower. However, some of the participants in our study noted that not all of their needs were met. Several participants mentioned that they needed help with shopping for groceries, transporting their purchases home, and putting them in drawers and cupboards. Other unmet needs for practical help mentioned included assistance with buying and carrying wood inside the house, cleaning beyond the usual, changing from winter curtains to summer curtains, window cleaning, gardening and more. For such practical tasks, the Norwegian care system entitles citizens to apply for care services on an hourly basis to manage the activities of daily living. However, several participants indicated that they did not know what kind of services they could apply for, or how to apply. In most cases, their relatives or even staff in the municipality had helped them apply for their current or past services. As illustrated in the following section, the granted services did not allow all of our participants to maintain the active everyday life that they wanted to uphold.

Distance, mobility and the limits of care for active ageing

Distance and mobility, particularly in a rural context, are challenges that are tackled differently in different stages of life. In this study, the local shopping mall was by several participants described as an important arena for socializing. But a simple task such as going shopping could for many reasons suddenly require considerable or even insurmountable logistical effort (e.g., the driver's license was not renewable due to age-related ailments, public transport was not easily available, or asking for help from someone in one's own social network was considered difficult). With increasing frailty, geographical distance was all too easily coupled with social distance, making the ideology of active ageing outside of the home hard to achieve for some our participants.

To illustrate some obstacles for aging actively caused by unmet care needs, we will start with the story of Laila (aged 83). Laila lived in a remote part of the municipality. Most of her former neighbours had left over the years with the exception of two of her children and her son in-law. During the last few years, Laila had been very much on the move commuting to the municipal centre to visit her husband, who was admitted to the nursing home six years earlier. Laila's husband however, died a few months before our interview.

Laila had never owned a driver's license. This was not previously a problem, because she adjusted her visits to the municipal centre to the schedule of the school bus, which she used for travelling. Moreover, during school holidays she had applied for, and obtained from the

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

county administration, something called “taxi for bus” which meant that she could call for a taxi to come and fetch her and bring her back home once a week for the price of the bus tickets. When her husband lived, she used to visit him between one and three times a week. Sometimes she stayed overnight in her husband’s room at the nursing home and returned home with the school bus the next morning. While visiting her husband, she also used to take a coffee and spend some time in the *arbeidsstue*, a local Day Care Centre for older people located within the nursing home facilities. Laila described these combined visits as significant events in her active everyday life:

When I meet others in the corridors, they ask: (...) Are you at the Day Care Centre? Yes, I am. Then they ask if I get paid for it! Paid? Are you supposed to get paid for voluntary work? And they don’t get it. When they don’t do this kind of work themselves, they don’t understand how important that is. It’s meaningful to those who receive and to those who give! There are many people who have just as much time as me, but they are not there (at the Day Care Centre). And I see how happy the old people are to get some sweets, an ice-cream or a flower vase. So, they lose a lot, those who don’t engage in volunteering.

In this narrative, Laila did not present herself as a participant but rather as a “volunteer” at the Day Care Centre. On one hand, she used to come there to spend time with her husband, but on the other hand, and more generally, she was there to contribute to the well-being of the other “old people” going there. At the time of the interview, she still travelled to town to buy groceries and do visit the Day Care Centre at least once a week. However, since her husband died, she described her life as increasingly secluded, as revealed in the following extract:

Researcher: If you look forward, is there something you need help with, in order to be able to continue living at home?

Laila: No, not yet. But I have some thoughts about what fall will bring. I’ll see what the doctor has to say about my health, and then we’ll see. But, I am also thinking – well, I am the kind of person who likes to socialise. And now, since my husband passed away, it has become pretty desolate here. So, I’m sitting here all day, and all these strange thoughts are coming, and my good mood seems to disappear. My good mood always used to keep me going. It was a tough time after he got so sick. (...) And I think for myself; is old age really supposed to be like this for people who have worked as hard as I have?

With the death of her husband, the social justification for continuing her efforts to tackle the challenges posed by geographical distance to reach the municipal centre partly disappeared. Laila also lost some of the energy and meaning she got from spending time as a volunteer at the Day Care Centre. Suddenly, she felt that she had actually become an older person herself increasingly confronted with the challenges of frailty and growing care needs. As Laila described in the following excerpt, the possibilities for realizing her views of active ageing were partly compromised by the fact that the municipal home care personnel did not view it as their job to meet her practical and social care needs:

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

But now, when I start needing help from the system, she (the head of the municipal care services) says to me, no, if I choose to stay out here, I cannot expect to receive help from the home care services, because it is so far for them to drive. Then one has to move. - But where am I supposed to move to, I ask? Well, they are going to build flats for older people at the municipal centre in two years' time. But two years from now, that doesn't help me. But still, I can't get help from the home care service. When my husband died, I needed help from home nursing for medicines and such. But they couldn't bring them out to me. Those medicines, I had make sure to get to the pharmacy to pick them up by myself.

Earlier tasks that Laila had been able to take care of as part of her regular visits to the municipal centre became a challenge after her husband died due to her own increasing health issues. She also said that she needed, but did not yet receive, help to put on the compression stockings in the morning. Hence, at the time of the interview, Laila explained that she spent considerable time and energy wrestling with a care system that did not want to meet her needs and that, as she felt it, even prevented her from being a resource for others e.g., at the Day Care Centre where she previously had spent so much time.

The threshold of incomprehensive care for ageing actively

The second narrative we want to present to illustrate how unmet care needs may contribute to increasing social isolation is the story of Berit (aged 94). Berit received daily visits from municipal care providers early in the morning, who helped her get dressed and change her incontinence pads. During the day, Berit was quite independent. She told us that her most important tool for reaching and moving things around was a poker. Moreover, she used an office chair to move around inside the house and a walker to move around outside. A serious obstacle for the transition from inside to outside of the house were the four stair steps from the porch. However, Berit managed to overcome even that obstacle, although "not very gracefully", as she put it herself, by sitting down and sliding from stair to stair. Moreover, despite her physical challenges, Berit emphasized that she used not only the main floor but also the basement:

For example, to get down into the basement, I need to bend my knee to reach the last step in the stairs. But no way can I manage that. So, I have to lay down flat on the floor and shuffle over the floor until I am there, and then I manage to open the door.

Nevertheless, despite the creative solutions allowing her to stay mobile and active in and around the house, Berit expressed a need for more care services than she actually received. She mentioned for instance that doing the dishes was demanding for her due to gout plaguing her hands. In addition, she had great pain in her feet when she stood still for too long. Whether she received help with her dishes or not depended on the individual care provider:

There are those who do the dishes in the morning, but others do not. They say: You can manage that yourself! Yes, but they should know how much it hurts! Yes. It doesn't show, but it really hurts. It's pins and needles. No, they say, it's just the gout.

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

In another part of the interview, Berit was ambivalent about her relationship to the ideal of active ageing outside of the home:

Berit: Earlier I was often out for the evening, at gatherings at the coffee house and such. It was nice to get out. But coming home again, that was another thing... All quiet. So I'm better when I just stay at home all the time.

Researcher: Well, really?

Berit: Yes.

Researcher: Yes.

Berit: Whenever they [the home carers] are here to help me wash and dress, I tell them I need to go to the Red Cross' café. But they never respond. Their task is to help me wash only, so I better stay put at home. They say it would cost a lot, so they cannot take me out. To get out, I would have to organise it myself. Lisa [a home carer] usually asks me whether I have been out lately. Then I ask her: Do you help me get out of the house?⁴

In this account, Berit communicated different messages. She obviously valued her former visits to the coffee house, even if it was difficult to face the reality of her lonely life upon her return. However, even if she described a rather fatalistic perspective in her statement that it would be better just staying at home altogether, she had not given up hope for a socially active life outside of her home. This was clear not least in the strong appeal to the home care providers to help her to get out of the house. Berit's request for more practical assistance from the municipality was met in different ways. On the one hand, her need for help with washing the dishes was responded to according to whom was on duty. Her need for assistance to get out of the house to see places and meet people, on the other hand, was mostly ignored altogether.

Conclusions

According to the Norwegian white paper 34 (2012, p. 43), active ageing not only concerns health and care services but also "participating in physical, social and cultural activities". However, as illustrated in this chapter, some frail women and men simply enjoy being active at home, reading books or magazines, watching TV, thinking about the old days, looking out of the kitchen window to observe what was going on, or watching the various birds at the bird feeder. Importantly, the participants in our study who felt happy with staying at home and engaging in everyday activities in the home were quite physically disabled. Significantly also, in addition to the extensive home-based care services they received from the municipality, they obtained regular visits and informal care from relatives and others. In the other cases discussed in this chapter, we documented a need to better meet the social care needs of those

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

in later life who are unhappy with remaining too much alone at home. These participants explained that they wanted to go out, but obtaining the help needed to be able to get around was very difficult. Hence, the ideal of active ageing could certainly be met in a better and more sensitive way among those who want to get out of the home to socialize, meet others and get around to see places – but who need support to be able to do so.

The main conclusion from our analysis is that the term of active ageing has more facets than those commonly highlighted in current policy papers. As we have illustrated with the case examples of Marit and Oskar, one does not have to leave the house to experience an active everyday life. Additionally, as we illustrated with the examples of Laila and Berit, those ageing at home who would like to go places and meet people may need support and encouragement to be able to accomplish this goal. There are various ways to achieve meaningful active ageing among frail older people. In a recent publication, Jacobsen (2017, pp. 10-11) points to a possible danger of an unreflected active ageing policy. He states that a consequence thereof may be “fewer services for the less active, who are made partly responsible for their own welfare and health, and also less help for the frailest whom no one expects to become activated”. “Active ageing” as a policy, in other words, runs the risk of marginalising older people who do not want or are not able to age actively as communicated in the narrow sense found in various policy papers. Our analysis supports this appreciation. Thus, if the ambition of developing more inclusive ageing policies in rural and urban parts of the Nordic countries is to be realised, the voices and the everyday life experiences of frail citizens themselves should be included and valued. Moreover, policies should reflect a wider perspective on active ageing according to the individual needs and preferences among the widely heterogeneous group of older women and men in the Nordic countries and beyond.

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

References

- Alvsvåg, H., & Tanche-Nilssen, A. (1999). Den skjulte reformen. Om mestring og omsorg i et hjemmebasert hjelpeapparat. Oslo: Tano Aschehoug.
- Berge, M. S. (2017). Telecare - where, when why and for whom does it work? A realist evaluation of a Norwegian project. *Journal of Rehabilitation and Assistive Technologies Engineering*, 4, 1-10. doi:<http://dx.doi.org/10.1177/2055668317693737>.
- Bygdell, C. (2014) 'Omsorgsfylld landsbygd: Rumsliga perspektiv på åldrande och omsorg på den svenska landsbygden' *PhD-avhandling ved Kulturgeografiska institutionen, Uppsala Universitet*. Uppsala: Upplands Fornminnesförenings tidskrift 56.
- Daatland, S. O., & Veenstra, M. (2012). Bærekraftig omsorg? En dynamisk balanse mellom familien og velferdsstaten. In S. O. Daatland, & M. Veenstra (Eds.), *Bærekraftig omsorg? Familien, velferdsstaten og aldringen av befolkningen* (pp. 187-196). Oslo: Nova, Rapport 2/12.
- Gautun, H. (2007). Hvordan gjøre det lettere for seniorene å kombinere jobb med omsorg og gamle foreldre? *Søkelys på arbeidslivet*, 24(1), 5-14.
- Jacobsen, F. F. (2015). Understanding public elderly policy in Norway: A narrative analysis of governmental White papers. *Journal of Aging Studies*, 199-205. doi:<http://dx.doi.org/10.1016/j.jaging.2015.04.006>.
- Jacobsen, F. F. (2017). Active ageing. *International Practice Development Journal*, 7(Suppl 3), 1-13. doi:<https://doi.org/10.19043/ipdj.7SP.003>
- Kjellevoid, A. (2012). Ny lov om kommunale helse- og omsorgstjenester – verdivalg og rettslig regulering. *Tidsskrift for erstatningsrett*, 9(1/2), 15-42.
- Kröger, T. (2005). Interplay between formal and informal care for older people: the state of the nordic research. In M. Szebehely (Ed.), *Åldreomsorgsforskning i Norden. En kunnsapsöversikt. TemaNord 2005:508* (pp. 243-280). København: Nordiska Ministerrådet.
- Munkejord, M. C., Eggebø, H., & Schönfelder, W. (2017) 'Hvordan ivaretas den sosiale omsorgen? En studie av brukeres, pårørendes og ansattes erfaringer med hjemmebasert eldreomsorg (How are social care needs met? A study of the experiences of users, next of kin and employees of home-based elderly care in Norway)'. Bergen: Uni Research Rokkan-rapport 3/17.
- Mørk, E. (2013). Hjemme så lenge som mulig. In J. Ramm (Ed.), *Eldres bruk av helse- og omsorgstjenester* (pp. 63-68). Oslo, Kongsvinger: SSB, Statistiske analyser.
- Ness, T., Enmarker, I., & Hellzen, O. (2013). Experiences of being old and receiving home nursing care. Older South Sami narrations of their experiences—An interview study. *Open Journal of Nursing*, 1-7, <http://dx.doi.org/10.4236/ojn.2013.31001>.
- Ness, T., Hellzen, O., & Enmarker, I. (2014). "Embracing the present and fearing the future": The meaning of being an oldest old woman in a rural area. *Qualitative Studies on Health and Well-being*, 9(x), 1-11, Available at: <<http://www.ijqhw.net/index.php/qhw/article/view/25217>>.
- Otnes, B. (2013). Familieomsorg - fortsatt viktig. In J. Ramm (Ed.), *Eldres bruk av helse- og omsorgstjenester* (pp. 85-92). Oslo - Kongsvinger: Statistisk sentralbyrå.
- Otnes, B. (2015). Utviklingen i pleie- og omsorgstjenestene 1994–2013. *Tidsskrift for omsorgsforskning*, 1(1), 48-61.
- Patmore, C. (2002). Morale and quality of life among frail older users of community care: Key issues for the success of community care. *Quality in ageing and older adults*, 3(2), 30-38.
- Ranzijn, R. (2010). Active Ageing - Another way to oppress marginalised and disadvantaged elders? Aboriginal elders as a case study. *Journal of Health Psychology*, 15(5), 716-723.
- Skaar, R., Fensli, M., & Söderhamn, U. (2010). Behov for praktisk hjelp og sosial kontakt. En intervjustudie blant hjemmeboende eldre i Norge. *Sykepleievitenskap*, 30(2), 33-37.
- Skatvedt, A., & Norvoll, R. (2016). Hverdagsresponsivitet - Et situasjonelt perspektiv på omsorgsarbeid og eldre med psykiske helseproblemer. In C. E. B. Neumann, N. Olsvold, & T. Thagaard (Eds.), *Omsorgsarbeidets sosiologi* (pp. 107-129). Oslo: Fagbokforlaget.
- Vabø, M., Christensen, K., Jacobsen, F. F., & Trøttestad, H. D. (2013). Marketisation in Norwegian eldercare: preconditions, trends and resistance. In G. Meagher, & M. Szebehely (Eds.),

Cite this book chapter as:

Munkejord M.C., Schönfelder W., Eggebø H. (2019) Voices from the North: Stories About Active Ageing, Everyday Life and Home-Based Care Among Older People in Northern Norway. In: Naskali P., Harbison J., Begum S. (eds) *New Challenges to Ageing in the Rural North*. International Perspectives on Aging, vol 22. Springer, Cham., pp. 193-206. DOI https://doi.org/10.1007/978-3-030-20603-1_12

Marketisation in Nordic eldercare:: a research report on legislation, oversight, extent and consequences (pp. 163-202). Stockholm: Department of social work, Stockholm University.

VID, & Kaupang, A. (2016) 'Heløgn omsorg - kommunenes dekningsgrad. Færre institusjonsplasser. mer omfattende hjemmetjenester.'. Oslo: KS-rapport R9342.

Ward, D., Drahota, A., Gal, D., Severs, M., & Dean, T. P. (2008). Care home versus hospital and own home environments for rehabilitation of older people. *Cochrane Database Syst Rev*, 8(4). doi:10.1002/14651858.CD003164.pub2.

White-Chu, E. F., Graves, W. J., Godfrey, S. M., Bonner, A., & Sloane, P. (2009). Beyond the Medical Model: The Culture Change Revolution in Long-Term Care. *Journal of the American Medical Directors Association*, 10(6), 370-378.

¹ By frail, we mean 'weak, infirm and in need of regular care'.

² The project is financed by the Regional Research Programme of Northern Norway (RFF Nord) for a period of three years (2016–2019), project number 257019.

³ Additionally, as part of the larger study, we also interviewed some younger relatives, employees of the municipal home-care service, leaders of the care services, and representatives from the voluntary sector who were involved in organising meeting places and activities aimed at retirees in the two municipalities. These other interviews are not directly referred to in this chapter, but their data constitute relevant background against which the voices of our participants have been analysed.

⁴ This last citation «Whenever they [the home carers] are here to help me wash and dress...» is also used in the article Eggebø, Helga; MC Munkejord and W Schönfelder: "Who we are and what we need: Older people's stories about meaningful activities and social relations in later life". In review in *Journal of Aging Studies*.