

外国語要旨

Care relationships with home help services from the perspective of elderly people and helpers

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Introduction

Since the long-term care insurance (LTCI) system was introduced in Japan, the welfare policy for the elderly has been transformed, and decision-making process has changed from “making judgments by the government” to “self-determination by the elderly.” As a result, a new research agenda has emerged for investigating how elderly people and service providers have adjusted their relationships under the new circumstance. However, as yet, only a limited number of studies have investigated the provision of home care from the perspectives of elderly people.

The objectives of this study were twofold: to describe the reality of how elderly people and service providers negotiated care services from the perspectives of both parties, and to explore factors influencing the negotiation, not only at the micro-level (relational), but also at the meso-level (organizational), and the macro-level (systemic). To achieve these objectives, I examined the home help service by developing the following research questions.

- (1) What are the similarities and differences between the ideas of elderly people and helpers about “care” under the LTCI system?
- (2) How do elderly people and helpers manage the processes of coordinating the service in relation to job responsibilities and relationships within the context of home help services?
- (3) How does the nature of help providing organizations influence the elderly-helper interactions and relationships?

Methods

Semi-structured interviews were conducted. Participants were elderly people (n = 12) and helpers (n = 12) and managers of help providing organizations (n = 6), which included public, semi-public, for-profit, and nonprofit types of help providers.

Results

Responses to research questions:

Ideas about “caring” for elderly people differed depending on the care-level that was required. Helpers found it difficult to achieve the idea of “client centered care.” Elderly people and helpers had different priorities regarding home help services; the elderly people regarded the home help service as “a part of their life,” whereas helpers considered it as their “professional work.”

The process of coordinating the service also differed depending on the required care-level. In low care levels situations, the elderly and helpers attempted to coordinate and achieve a level of “appropriate service” to suit each other’s needs. The elderly people compared services provided by different helpers. They indicated that differences in services arose mainly as a result of differences in the professional experience of individual helpers, their personality, and differences in the organization of care providing service. In high care level situations, not only dyadic relationships, but also multiple relationships, including those with family carers and other helpers became important. Moreover, helpers in general found it difficult to standardize their work, although permanent helpers could standardize care provision, including informal aspects of the service. Furthermore, family carers played an important role in providing care, and therefore, helpers attempted to replicate the type of care provided by family carers. There were expectations of “private relationships” in low care level situations, which differed depending on the informal network of the elderly person. Helpers typically attempted to maintain a “worker-client relationship,” but when it did not impact their work, they also accepted “private relationships.” In high care level situations, the elderly people expected “private relationships” only from permanent helpers. Helpers believed that they had to develop a social connection with elderly people under their care, and therefore, they attempted to develop “private relationships.”

The organization of help providing services, which could be categorized as “standard,” or “flexible,” also influenced the elderly–helper relationship. The flexible model met the needs of the elderly people and their families, but had the risk of engaging in endless and unpaid work. The standard model protected workers (helpers) rights and met the needs of the elderly and the family to a limited extent.

Factors influencing care relationships:

At the micro-level, the care level of the standard model affected the adaptation of elderly people to care, as well as the attitude of the helpers in their relationships. At the meso-level, the informal network of the family carer and the formal network of the care providing organization affected care relationships. At the macro-level, the LTCI system affected job responsibilities and relationships.

Conclusions and Implications

Firstly, this study contributed to the development of sociological research on “care relationships” that have multiple realities, from the perspective of care receivers and carers. Secondly, this study examined practical models of communication by home-helpers. Thirdly, it suggested the importance of formalizing informal aspects in the provision of home help services, as well as the importance of care for family carers.