

TRAPPED INSIDE A DOUBLE CHEESEBURGER

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Dr. Zofia Szweda-Lewandowska of the Warsaw School of Economics discusses the situation of the elderly and their caregivers in Poland.

ACADEMIA: You have just completed the first stage of research into senior care in Poland. What did the project look like?

ZOFIA SZWEDA-LEWANDOWSKA: We conducted interviews with seniors who needed assistance, despite having no cognitive impairments caused by various diseases, and with their relatives who provided such support.

Where did the respondents live?

We restricted ourselves to two cities: Łódź and Warsaw. The former could be treated as a demographics lab, because the city's population is aging very rapidly. At the same time, it is dominated by women, and many of Łódź's female inhabitants have never started families, so they have no relatives who might serve as sources of such support.

Warsaw, in turn, is interesting in that despite a relatively large influx of migrants it is possible to find places inhabited by one generation, people who moved in after the war and aged together with their districts or tenements. Here, there are people who are better educated and earned more money when they worked, so they can now take better care of their health – it's easier for them to buy medicines or take advantage of rehabilitation.

When you say "old age," what do you mean specifically?

Old age is a highly heterogeneous part of life, and it can be divided into several stages. Basically, there's the economic threshold, or the moment of retirement, which means 60 or 65 years of age. We were interested in a group whose members were more likely to need assistance, so we surveyed people at the

so-called fourth age, which we defined as starting at 75 years.

What kind of lives do such people lead?

Some of them live with their relatives, which is obviously very comfortable. It's easier for them to receive quick support from their children or grandchildren, who live just on the other side of the wall or in the same house and don't have to travel from the other end of the city. But sometimes sons or daughters look after their parents from a distance, for example because they live in Britain. For that matter, that's one of the growing problems caused by the migrations following Poland's accession to the EU.

There's a stereotype that it's daughters who tend to their aging parents.

That's no stereotype, that's reality. I previously conducted studies among individuals waiting for places in residential care homes in Łódź, and it turned out that they were overrepresented by parents of sons.

The group I studied this time is strongly female-dominated, with women in both generations accounting for around 70%. We also know that if a woman responsible for an elderly person decides to work, the person who takes care of the elderly person on her behalf is also a woman. In my opinion, that's not only because certain qualities are culturally ascribed to women, who are believed to be better caregivers, but also because such occupations are not well-paid or prestigious.

Speaking of which, how important is money in senior care?

Among the respondents, 8.5% said they supported an elderly person by providing financial help, for example

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by paying caregivers, buying medicines, and paying rent. Of course, it's always possible to ask social services for help, but that only applies to those who meet the income criterion. If a person's income exceeds 2,000–2,200 zlotys (depending on the administrative area), there's no reimbursement for care services.

Does this apply to the income of the elderly person?

No, to the household income. For example, if an elderly person receives a small pension but lives with a son who earns 10,000 zlotys, it is necessary to cover all the costs.

When Prof. Zbigniew Religa held office as health minister, there were some ideas for how the system of elderly care should be reorganized. In the following parliamentary terms, there were new proposals of how such care services should be paid, for example the introduction of "care vouchers." Unfortunately, the proposed solutions were never implemented. Meanwhile, the consumption of care services is perceived as a growing market.

have to provide on the one hand to their parents and on the other one to their grandchildren. But that's not everything: they sometimes have to look after their grandmothers, elderly husbands who are no longer physically fit, and sometimes adult children disabled by an accident or a disease. They are in the middle of five generations. That's actually starting to resemble a double cheeseburger.

What about non-family sources of support?

Friends and acquaintances might appear to be another important support group. However, it turns out that they rank fifth or sixth on the list of sources of support. Of course, this may result from the fact that they are about the same age as the elderly respondents themselves, so such expectations would be unrealistic. Senior citizens are definitely more likely to receive support from their neighbors than from their friends and acquaintances, which is probably because they live nearby and know their needs.

Moreover, our studies confirmed that non-government organizations and churches were not perceived as potential support: 92% of the respondents replied that they didn't use the support provided by the NGOs.

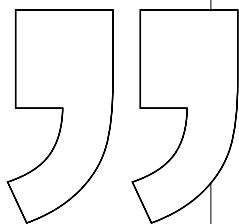
Such findings are sad, because they show that we don't have well-developed civil society organizations. In Warsaw, there are very few organizations that help the elderly or people who are alone. In addition, they chiefly help those who are physically able.

Whether senior citizens are willing to avail themselves of such help is another thing.

We also asked the elderly who they believed should have the duty to support them. The hierarchy is as follows: family first, then neighbors, friends and acquaintances, and finally social care services. However, it's worth saying that those who use the support offered by the social care services are satisfied with their quality. In turn, both the elderly respondents and their families were reluctant to use institutional forms of support, such as residential care homes.

Do such solutions have negative associations?

That's because very few people can empathize with caregivers. It's hard to imagine what it means to tend to a person with Alzheimer's, if you haven't experienced it yourself. The result is that people who put their loved ones in residential care facilities are often stigmatized. But they should not be judged under any circumstances. Only 9% of the caregivers we interviewed told us that if the health of the elderly people under their care declined, they would consider putting them in a nursing home. Only 7% of the elderly respondents said that they would decide to live in such an institution. This shows that such thinking is changing very slowly.



85% said they helped because it was their duty to help. The answer "because I love my mother or my father" was indicated sporadically.

There are more and more agencies offering care services.

Yes. But first of all, their services are costly. Secondly, there are plenty of volunteers to take elders for walks or read them books, but it's a lot more difficult to find caregivers for senior citizens who are less independent and, for example, require nursing care. The latter is hard physical work that is also mentally burdensome.

What surprised you about the findings?

Above all, the motives of the relatives. Among the caregivers we surveyed, 85% said they helped because it was their duty to help. The answer "I love my mother or my father" was indicated sporadically, even less frequently than financial considerations – the elderly person supports me, so I reciprocate. Also, caregivers chiefly perform the tasks that require physical engagement – they do the shopping or clean.

How are they coping?

The situation is dramatic: they have no time for themselves. Women aged 45–64 are referred to as the sandwich generation. They are burdened by the care they

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Are senior citizens afraid of the quality of such facilities?

I'd rather say that they are reluctant to use this form of support, because that would mean severing all contacts with their surroundings. There's a fear of loneliness, radical change. Young people are afraid to change jobs, they hesitate before they move their kids to a different school. In this case, we have people who know very well the place where they have lived for years, they know where they can buy their favorite cheese, and they live according to their own rules. Such people are faced with the prospect of living in a strange place, in an institution that requires total obedience to a certain schedule and routine. They know they will have to eat what they are given to eat, at specific hours at that, and live with people they may not like. That's a very difficult change in the final stage of their lives.

On the other hand, those who are in a somewhat better financial situation are reluctant to ask social services for help, because they stigmatize such institutions as places that help the poorest, those who have drinking problems or other issues. If they try to ask for such support, they are told: but you have enough income and your mom has enough income to pay for care services or move to a private residential care home. That's where another problem appears: is that really a residential care home? Is it included in the register maintained by the provincial governor? Does it meet the statutory criteria? It often turns out that there's no supervision, so there's no certainty that the elderly person will receive good care there.

Do the local authorities provide any help?

Above all, they have relatively many tasks and not enough funding to carry them out. In addition, they don't have enough social care workers. That started to pose a really big problem when the minimum hourly pay under civil-law contracts was raised. It suddenly turned out that the local authorities could not pay for all the care services, because they were financially unprepared for the change. Łódź had to scale down care services, but its inhabitants did not suddenly become any fitter. Another thing is that if you pay 8-10 zlotys per hour to a caregiver, you can hardly expect high-quality work.

In addition, the situation is completely different in small towns and in rural areas, where there are no care services, and the inhabitants don't even realize they might make use such support or put those under their care in a residential home, even for a certain period of time. Just imagine that you've spent the past three years taking care of an elderly person who already has certain physical or mental limitations, and you'd like to go on a vacation with your family, but you can't, because you have no idea what you should do with this person.

What is the Polish state doing about that?

Not much, because it doesn't know how to react to various situations. The law doesn't keep up with the changing social reality. Local governments bear the whole of the burden, anyway. It's good that the Center for Social Services was established in Warsaw. It provides information, among other functions. For example, if you go there, you can find out that if an elderly person requires more advanced nursing care, the best solution may be a nursing home funded by the National Health Fund or an adult day care center for people with Alzheimer's disease or other cognitive impairments. I think this is Warsaw's reply to population aging, to the fact that senior citizens are not only active people who go to the university of the third age.

Other good examples are Poznań and Kraków, which have studied the needs of their inhabitants and identified their problems very well. For example, they finance three cab rides a month for senior citizens, who can use them to go to a public office or to the doctor's. They either don't pay anything or pay a very

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small amount for such services. That eases some of the strain on their budget, even for those who receive a pension of 1,500 zlotys. In particular, people who live alone have fixed costs comparable to those of a family – after all, an elderly person also buys medicines and dressings or pays for rehabilitation. Poznań also had a project called Mr. Handyman, because it turned out that households run by elderly women typically lacked any men who could perform small home repairs.

I'd therefore encourage people ahead of the local elections to ask candidates what they have to offer to senior citizens. If there is such pressure, such lobbying in favor of the needs of the elderly, there is a chance for improvement. What today's senior citizens obtain will also serve future generations.

INTERVIEW BY ANNA ZAWADZKA

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