Housing with Care: Terminology Traps

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The next two papers in this symposium report on preliminary results of research that addresses the contribution of adult social care to the quality of life of residents in Housing with Care settings. The project is funded by the NIHR School for Social Care Research at the LSE and is officially called Adult Social Services and Environmental Settings, ASSET for short.

One of the early tasks was, unsurprisingly, a literature review. A long list of key terms was used to identify sources in a range of data bases. As the published review pointed out (Evans et al., 2012): “One of the challenges of the review was the differences in the terminologies used to describe Housing with Care. In exploring the international literature for relevant documents we needed to expand our terms in an effort to include equivalent forms of housing” (p.3). This search, reasonably enough, was confined to articles in the English language and did not include books or conference papers. The suggestion was made that a limited scrutiny of literature by scholars from a few countries where English was not the first language could be illuminating.

Before turning to the issue of how this limited scrutiny was undertaken, it should be further emphasised that the definition of Housing with Care in the UK context has itself needed to be addressed. Early on, I was intrigued to come across a reference to an international translation chart which turned out to be an appendix to a report by the Australian Housing and Urban Research Institute called Service Integrated Housing for Australians in Later Life (Jones et al., 2010). This chart focused on the varying terminologies used in Australia, New Zealand, Canada, America and the UK. In a subsequent article in Ageing & Society, the authors (Howe et al., 2013) noted that the issue of diversity of terms and meanings relating to housing with services for older people confounded systematic analysis. This echoed remarks by Noel Whiteside (2005), a former colleague at Bristol, now at Warwick, who commented: “Comparative analysis is plagued by problems of similar policies disguised by different terminology and different policies, agencies and instruments that possess almost similar labels. Words get in our way”. The issue of what is meant by Housing with Care underpinned, perhaps, undermined, the attempt at what was only a limited scrutiny of relevant literature from Scandinavia.

Two existing networks of academics were used. One included Kevin McKee, now at Darnala University in Sweden, previously at Sheffield University and heavily involved in the EVOLVE project on evaluating the design of older people’s housing (Lewis et al., 2010; Orrell et al., 2013). The other was the French funded project LIVINDHOME led by Tine Rostgaard (Aalborg). It examined reforms in home care in nine European countries. Both networks covered academics in Scandinavia and beyond. For current purposes, I illustrate the language issues with brief examples from Finland, Norway, Denmark and Sweden.

Finland. In Finland there are what they term service housing units with intensified services catering for people needing 24 hour care because of physical frailty and/or dementia...“These facilities are sometimes referred to as nursing homes” (Helsinki City College of Health and Social Care, 2003, p.30). Why? Because the increase in service housing units was in part based on the renaming of old residential homes (Kroger, 2009, p.5).
Norway. In a personal communication with Mia Vabo (NOVA, Oslo) she stated that "service housing" is often labelled "care homes". She commented that service housing can be very similar to traditional nursing homes (Vabo, 2011, p.210).

Denmark. From the 1990s new nursing homes were not built and existing ones were closing or converted to individual dwelling units, often for people suffering from dementia. At the same time, most local authorities merged their home help service, district nursing service and staff of nursing homes into one system (Gottschalk, 1995, p.37). This illustrates the importance of understanding the way local services for frail older people are constituted and also how arrangements may have altered over time.

It was whilst searching for sources for Denmark that I came across an informal network of reflective practitioners and other experts interested in the notion of integrated service areas (ISAs). The idea of ISAs is a strategy to help older people to live independently in a "normal" residential area as long as possible. The purpose of the network was to scrutinise best practice in relation to the national context, to encourage mutual learning, to stimulate innovation and to publicise the results of their work on their website (www.isa-platform.eu).

Sweden. One early source of information for Sweden (and Finland) was a report published by the Anchor Trust in the late 1990s. It was called Broadening our Vision of Housing and Community Care for Older People: Innovative Examples from Finland, Sweden and England, edited by Judith Phillips and three other editors-cum-authors, one of them being our first speaker today, Robin Means. He has already emphasised the importance of studying the history of policies in order to understand the current situation.

Like Denmark and Finland, at the end of the 20th century, there were no longer nursing homes or care homes in Sweden. Residential care is conceptualised as "special housing". But the definition covered old age homes, service apartments, small group homes and longterm care units (Lundin and Turner, 1995). It meant that residents had to pay rent "even if their so-called housing in some cases consisted of sharing a four-bed room with three other persons" (Trydegard, nd, p.12). In 2008, the government appointed a Senior Housing Commission which proposed that clarification of terms was required. "Residential care homes" was the term suggested to replace the previous concept of "special housing", as 24 hour care was being provided. This Commission also identified a new kind of housing need. A distinction was drawn between assisted living with 24/7 staff care and what was called safe-haven residence (or safety housing) where there were communal spaces for meals, socialising and recreation and where non-resident staff were available at "certain specific times" to support residents. At least one potential resident had to be aged 70 or over.

All this agonising over terminology is a familiar dilemma for the comparative social researcher. Textbooks and handbooks address the notion of equivalence, whether conceptual, measurement or functional. This limited attempt to identify Housing with Care literature from Scandinavia was firmly in the functional equivalence court. Yet, despite this specific focus, the problem of translation is ever present. That branch of interpretive policy analysis which addresses translation research insists that "appropriate" translation needs to take into account social and cultural contexts. "It takes us well beyond issues about languages; it is a broader research agenda with sensitivities to culture, context, diversity, inequalities, ethics and politics" (Lendvai and Bainton, 2013). Attempts to overcome the limitations of monolingualism (beyond the complexities of various Englishes) seem to require a level of resources beyond that of a standard literature review.

Not only was my scrutiny limited. Respondents from Sweden and Finland (as well as from the German Centre for Gerontology in Berlin) commented that there was little by way of research on the contribution of adult social care to the quality of life of residents in Housing
with Care. They also queried what was meant by "adult social care". If this term covers the physical adaptation of the built environment to the benefit of frail older residents in terms of, for instance, access to social facilities, then the research by people such as Susanne Iwarsson and Catharina Nord is highly relevant. Iwarsson and her colleagues research supportive environments for activity and health of older people at Lund University. Catharina Nord is a leading member of the National Institute for the Study of Ageing and Later Life (NISAL) at Linkoping University. Her recent publications (Nord, 2011a; 2011b) include the influence of physical design on care practices in assisted living settings.

The outcome of the limited scrutiny in practice was identification of a few articles written in English and no serious attempt to pin down relevant publications in Danish, Finnish, Norwegian or Swedish. There were too many barriers in the way. The version of the literature review published on the ASSET website had a total of 57 sources, five of which were focused on "European" studies. However, assuming that colleagues from Sweden and Finland are right that (like the UK) there was little by way of research on the contribution of adult social care, that is some consolation and underpins the importance of the ASSET project.

Bibliography


