Abstract

Title: En omsorgstriad – om relationer mellan omsorgsmottager, vårdbiträden och hemtjänstassistenten.
A home care triad – about relationships between home care recipients, home care workers and home care managers.

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Key Words: Direct and indirect home care work, home care recipient, home and care worker, home care manager, relationship, triad, formal and informal functionality, assistance content, assistance execution

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This doctoral dissertation treats the relationship in public home care service. The main objective is to describe and analyse the relationships between home care recipients, home care workers and home care managers. The issues that are being discussed are based on interactional theories and theories on relationship treatment. The analysis includes three main areas:

- Connections between the relationships in the home care work and the formal care.
- Similarities and differences between the relationships in direct and indirect home care work.
- Elements that influence the shaping of a home care relationship.

Theories about triads and human service organizations have constituted the theoretical frames of reference in analysing and interpreting the results. Data have been collected during 1993-1995 by semi-structured interviews with 58 home care recipients, 58 home care workers and 58 home care managers, all in Göteborg. Both a qualitative and quantitative processing of the material have been carried out.

The direct home care work refers to the assistance the home care workers provide the home care recipients. The home care managers’ estimations of the home care recipients need of assistance, the planning of the home care service and professional guidance and supervision of the home care workers are all tasks included in the indirect home care work. Personal feelings are exclusively present in the relationships in direct home care work. The home recipients are partly dependent on the home care worker as a person and trust her on private matters.

Six groups of home care relationships have been distinguished in the direct home care work. These relationships are denominated: task-oriented, mutual friendship, supportive and social, conversation-oriented, unbalanced and unsympathetic. Four of these relationships are formally functional, i.e., the home care recipients are provided with the granted assistance. The formal functionality depends largely on the informal functionality, i.e., how the home care service is provided and by whom. The home care providers’ relationships can be divided into six categories. The majority of the home care providers forms a part of constructive work relationships, that provide the home care workers with fair conditions to carry out their work.

The home care relationships are shaped by the home care provider’s ability to maintain the equilibrium between the organisation and the individual, between friendship and
professionalism and, finally, between responsibility and power. One category of home care recipients would not cope on their own if the home care providers did not take on the responsibility for them. Remarkably few persons in the home care triad perceive the home care providers as either having or exercising any power in relation to the home care relationship.

In the triad alliances are formed between the individuals. As a rule the home care worker forms an alliance with the home care manager in the beginning, since this makes it easier to carry out the guidelines of the organisation. Usually the home care worker later forms a coalition with the home care receiver once they have established a more personal kind of relationship. This creates possibilities for the home care receiver to obtain assistance with matters that are not included in the originally granted assistance and not in accordance with the stipulated guidelines. The home care providers form alliances to provide support and to assist persons who are unable to take responsibility for their own situation. The home care providers sometimes act as intermediaries in the home care triad.