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Managerialism and the care of older people: The Swedish example

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Managerialism and the care of older people: The Swedish example

Reforms and new organizational ideals

On a general level, change in the social care of older people in Sweden during the 1990s is linked to the decentralization of the welfare state and those altered organizational ideals that, during the 1990s, amounted to a new feature and driving force in this development. With regards to the care of older people, a number of reforms during the 1990s contributed in different ways to a shift in the responsibility for welfare delivery from the state (national) towards a greater reliance on the local municipalities (Blomberg, Edebalk & Petersson, 2000). The breaking up of the public monopoly of the production of welfare services and the possibility of freer forms of organization within the public administration are examples of reforms that have created new conditions for and contributed to the development of new forms of organizing, controlling, and steering within the municipal administrations (Blomqvist, 2004). In a reflection on the organization of the welfare state, Premfors (1998) has also argued that the development can be characterized as a trend towards increased independence/autonomy amongst those organizations that together make up the public sector (i.e., the state). Further, during the 1990s, public services and other operations within the public sector were increasingly forced, or chose to regard themselves as free-standing organizations (Brunsson & Sahlin-Andersson, 1998; Premfors, 1998). This opened up for diversity among municipalities. However, as will be explained later in this paper, diversity was not to become the general trait in the organization of social care for older people in Sweden.

This renewal and change of welfare production in Swedish municipalities is closely connected to an international trend (i.e., new public management [NPM]). With its focus on developing new and more effective forms for the organization of public sectors and management, NPM has since the beginning of the 1980s dominated the reform agendas in many of the Western industrialized nations (Hood, 1995; Christensen & Laegreid, 1996; Blom, 2001; Pollit & Bouckaert, 2004). Contracts, competition, and management/control make up the three core elements in NPM (Vabö, 2005). In different ways, these

ideas have been made concrete in the organizational changes that have taken place within the care of older people in Sweden during the 1990s (Blomberg, 2004). The idea of *contract*-governing can be seen in the introduction of different forms of purchaser/provider-models. In many municipalities, public care of the elderly has been exposed to *competition*. Private provision of care services is one example (The National Board of Health and Welfare, 1996, 1999, 2004). Trydegård (2001) assigned the breakthrough to the years 1991-95, and thereafter this private/public mix has been established. Another feature of the idea of competition is the implementation of different types of models for customer choice (Edebalk & Svensson, 2005). However, when speaking of privatization in the Swedish context, it is important to keep in mind that social care of older people is still financed with local taxes and that the exercise of authority, such as the assessment of need, is a municipal responsibility. The impact of *management* ideas in the municipal care of older people is more abstract, but is in line with the notion that administrations should (and could) be conducted as any company on a market (Bejeroth & Hasselbladh, 2002; Petersson, 2006).

In this paper we focus on the last of the core elements presented i.e. the process in which the administrative practices adapt to new ideas of managerialism. We argue that this development comes about through an interplay between driving forces working both on an organizational and political level as well as through local and global mechanisms³. In general the process of change is characterized as a passive adaption rather than a matter of active choice. The meaning of this, which we will argue, is that we are witnessing the incorporation of new global administrative standards rather than a change reflecting local political ideas.

Methods and materials

Two studies will serve as the empirical base for our argumentation. The first is an analysis of the diffusion of the care manager reform in Sweden (Blomberg, 2004). The second is also a study conducted in Sweden on how priorities are formed within the social services (Petersson, 2006). Both studies were conducted in eight Swedish municipalities and could be viewed as collective case studies (Stake, 1993; Yin, 1994). The case study design matched the formulation of research questions in terms of *How?* and *Why?* It

³ One must have in mind that this is an analytical understanding which is not directly evident from an empirical investigation i.e. aspects of reality is intervened in a more complex way

was preferable due to the fact that the phenomenon of interest in the study represents an uncontrolled course of events (i.e., a process) and that the case study design allowed for a study of that process in its real context. Thus, a collective case study will generate rich over-all information of the phenomenon of interest, such as the implementation of the care manager reform, as well as more detailed knowledge and insights about that phenomenon from a number of different local contexts. Obviously, a case study cannot serve as a basis for empirical generalizations. But, and this is a very important point, the knowledge and insights that a case study produces could be generalized analytically in relation to the overriding purpose of the study and/or theoretical reasoning.

Figure 1: Municipalities studied

| Municipality | Number of inhabitants | Implementation of the reform (year) | Local political majority at the time of implementation (right wing/left wing and the dominating coalition party) |
|---------------------|------------------------------|--|---|
| Helsingborg | 119 300 | 1993 | Right wing coalition. The conservative party |
| Gislaved | 30 000 | 1993 | Right wing coalition. The conservative party |
| Ludvika | 26 000 | 1997 | Left wing. The social democratic party had its own majority |
| Sunne | 13 600 | 1998 | Right wing coalition. The centre party, a party with its roots in the political organisation of farmers |
| Gävle | 91 300 | 1999 | Left wing coalition. The social democratic party |
| Hagfors | 13 800 | 2000 | Left wing coalition. The social democratic party |
| Kristianstad | 74 900 | 1997- 2001 | Right wing coalition. The conservative party |
| Lund | 100 500 | 2001 | Right wing coalition. The conservative party |

As shown in the chart, the municipalities studied implemented the care manager reform at different points in time. They also differed with respect to the number of inhabitants, socioeconomic structure, and geographic location. Decisions to implement the care manager reform were taken under the left wing local government, as well as the right wing local government. Those differences were, however, not strategically chosen independent variables in the selection of municipalities, but the observation was not trivial and was

useful in the analysis. These differences were also used in the study of how priorities in the social services took form. In the analysis used in that study there were no claims for empirical generalizations due to the small number of cases. However, differences and similarities that showed up were carefully examined. In the case where different municipalities behaved similar there were tendencies that could be perceived to have a congruency that pointed to a common development and views, the pattern of which were analyzed. The main examination in this study was to understand why different municipalities behaved similar as well as why similar municipalities behaved differently. The general conclusion was that there was a strong case for the convergent forces in the study. This will be drawn on in the forming of the conclusions in this paper.

The municipalities were strategically selected in an earlier study, but since the study of the municipalities at that time generated the research issues that came into focus, we considered it as clearly legitimate to continue studying the same municipalities in depth. Moreover, since the point of departure in the studies mainly was on understanding why different municipalities acted in a similar way and not a systematisation of casual connections between similar municipalities acting similarly, the differences, and variation at large, among the studied cases was an advantage. That the selection of cases in another respect could be regarded as opportunistic stands for what it is (Buchanan, Boddy & McCalman, 1988). The actual possibility of access and the possibility to take advantage of strenuously elaborated relations with people in the municipalities also became an important circumstance.

Figure 2: Interviews: type and number

| Municipality | Politicians | Heads of the administration | Care managers | Union representatives | Pensioners' organizations | Local press |
|--------------|-------------|-----------------------------|---------------|-----------------------|---------------------------|-------------|
| Helsingborg | 1 | 3 | 3 | 3 | 1 | 0 |
| Gislaved | 1 | 3 | 3 | 2 | 1 | 1 |
| Ludvika | 1 | 2 | 2 | 3 | 2 | 1 |
| Sunne | 1 | 3 | 2 | 3 | 1 | 1 |
| Gävle | 1 | 2 | 3 | 3 | 0 | 1 |
| Hagfors | 2 | 1 | 2 | 3 | 1 | 2 |
| Kristianstad | 2 | 2 | 3 | 4 | 1 | 1 |
| Lund | 2 | 3 | 2 | 3 | 1 | 0 |
| | N=11 | n=19 | n=20 | n=24 | N=8 | n=7 |

The empirical material in the studies consisted of strategic interviews and documents. Extensive interviews (n= 89) were held with the local actors involved in the implementation, such as politicians and public servants at different positions in the local administration, e.g., heads of the administration of care services for older people, care managers, and union representatives for the occupational groups involved (i.e., care keepers and assistant nurses, nurses, and civil servants). The composition of respondents was the same in all municipalities. Semi-structured interviews were conducted face-to-face and recorded on a mini-disc. The interviews lasted between 60 and 90 minutes and were all transcribed. The idea behind the low level of structure was to make the respondents themselves present their experiences and perspectives. Though an interview guide was followed, additional questions for validation and clarification were asked (Kvale, 1997). The studies were also based on documents consisting of official local documents, for example budgets, annual reports, goal formulations, protocols from the municipal council and committees, as well as documents produced within or by initiative of the administration of care services for older people. The latter were mainly documents that had been referred to in the interviews, for example, local investigations, consultant reports, evaluations, PMs, and other written material connected to the initiation, discussion, and implementation of the reform.

The local diffusion of the care manager model

Blomberg (2004; 2008) put a focus on the diffusion of a new organizational model within the social care services for older people i.e. the care manager reform. In the traditional organization of care for the elderly, needs assessment and provision of care (the actual care work done and the supervision of that work) were integrated functions in a single occupational role. The new model implied a split of assignments i.e. a new division of labour and a specialization of occupational roles within the municipal administrations. The time profile in the studied municipalities corresponds to different problematizations or discourses concerning the advantages of the model.

Figure 3 Take over time profile

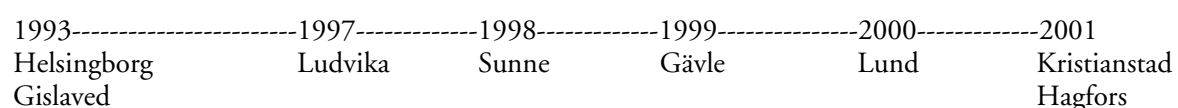
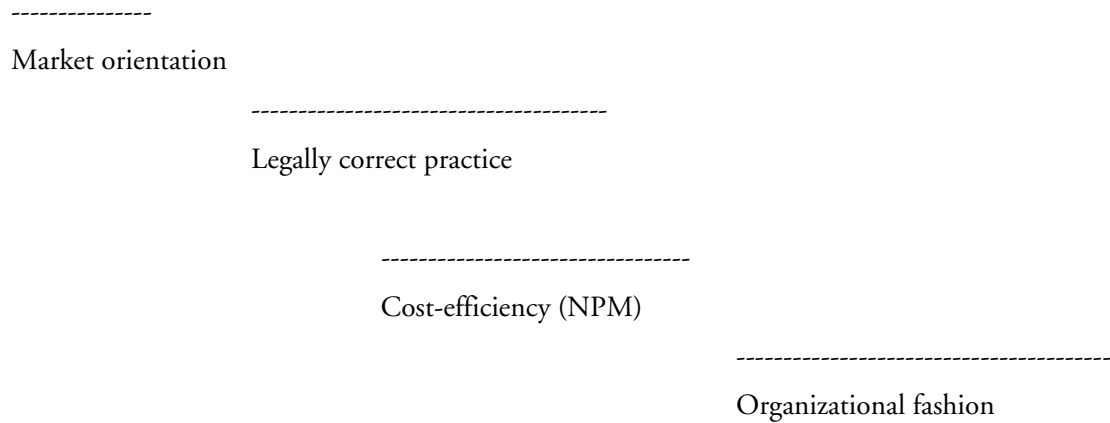


Figure 4 Implementation discourses

1993-----1997-----1998-----1999-----2000-----2001



The first discourse of market orientation is an ideological (neo-liberal) discourse of economic reform, which implies an adjustment of the elderly care system to allow for market provision of care i.e. a quasi-market reform (Le Grand 1993), which in turn requests a purchaser-/provider split. The reform was in this early stage incorporated by those municipalities that had started to break up the public monopoly of provision. These municipalities were generally politically dominated by right wing/liberal majorities. Among municipalities that were characterized by social-democratic majorities, this line of argumentation had no support in favouring the incorporation of the reform. The care manager reform becomes an indirect and necessary component in this new market orientation.

In a second step, the arguments in favour of care management were connected to a discourse of creating a legally correct practice. This attracts some municipalities to incorporate the reform on its own ascribed merits, also favoured by left-wing politicians. It cleared the way for the second wave of incorporation and re-directed the arguments in favour of the reform from the ideological sphere to the realm of administrative considerations.

In the third phase the specialization was presented as a way to be more economically efficient and making stricter application of the rules in the assessment of needs. This meant that model was connected to economic arguments within the reform agenda of New Public Management. One could say that

market style management sneaked in the back door as part of becoming a more efficient organization but with arguments that were ripped off its ideological connotations.

In the last phase, the reform had become the predominant model of organization. The care manager model had been established as a modern, effective, and thus rational principle of organization that no longer could be questioned. We can underline the development with some official statistics. In 1992 only 5 (n=286) municipalities had implemented the reform. Between 1995 and 1999 the number of reforming municipalities increased from 40 to 170 and 2003 the number were 237.

The process of incorporation that has taken place can be summarized and stylized in the following chart. It contains the four different implementation discourses appearing in consecutive order that differ in relation to the arguments (i.e., discourses) offered in favour of the reform:

Figure 5 Characteristics of the implementation discourses

| Implementation discourse | Apprehension of the reform | Status of the reform in the context of overall change |
|---------------------------------|-----------------------------------|--|
| Market orientation | Necessary | Indirect |
| Legally correct practice | Desirable | Direct |
| Cost-efficiency (NPM) | Instrumental | Indirect |
| Organizational fashion | Keep up with time | Direct |

Why different municipalities become similar – the first layer

We should bare in mind that the essence in a diffusion process is a logic of becoming similar with others, a process of convergence. Now, a neo-institutional analysis can provide theoretical support and shed light on processes of diffusion. Firstly the notion of isomorphism (DiMaggio & Powell, 1991/1983) becomes central. Isomorphism (structural similarity) is an effect of a strive for legitimacy. Organizations within a common organizational field becomes increasingly similar as a consequence of their search for legitimizing formal structures among institutions they are dependent on and would like to be compared with. Within

this line of thought organizational change is seen as a passive more or less deterministic adaption to institutional pressures in the surrounding society.

Secondly, the process of incorporation also conforms to the claim from the neo-institutional perspective that organizational change should be understood as a process where a solution i.e. organizational models, looks for problems to underpin it, rather than as in the traditional rational choice approach, where the opposite is believed to occur (i.e. problems seek solutions). In our example it is obvious that the diffusion of the care manager reform is propelled by a continuous ascription of different and new problem-solving features with the laps of time.

In this part the care manager model and its diffusion has been examined. We however claim that this process of diffusion connects to a more general trait of the modern welfare state focusing on the legitimacy issue of the practices in the welfare state. It is difficult to withstand fashions that are travelling around. It is easier to take up than resist, especially when there is an openness for formulating a variety of discourses that support claims for reformation as in the case studied. To look like others also makes you feel safe and modern (Furusten & Lerdell 1998). Røvik (1998) claims that the incorporation of what he calls super standards is a feature of being or becoming a modern organization.

For the remaining part of this paper we will keep one point in mind. What has been described so far is that elements or techniques associated with NPM have been regarded as favourable in the solving of locally formulated problems. The process of diffusion has so far been examined in a local setting but can however also be connected to a broader understanding i.e. through examining the perspective of globalization. This further leaves us to a more focused examination of NPM.

Organizations in a global context

The notion of globalization has become a feature of the modern world that has to be recognized in almost every sphere of transformation of societies - also in social policy. Globalization can be viewed as a complex totality, but it is also possible to look at some of its specific aspects. We will do the latter. Beck (2000) talks of it in terms of globalism, which identifies the economic aspects. The story is that economic forces have become transnational to an extent we have not experienced before. These economic forces make

demand for national transformation to adapt to the general economic reforms of free competition and efficiency, bypassing the national political level.

In this process there are transmitting forces. Altogether the working of these transmitting forces can be characterized as a process of convergence and a pressure for conformity on national policies. It should be seen that it also works within countries. Also on this level, there exist "... a number of mediators of reform ideas and experience such as organizations, consultants and publications" (Sahlin-Andersson, 2000. p 3).

In this aspect of globalization New Public Management (NPM) can be identified as an overall reform agenda for the public sector. NPM "... consists of a cluster of ideas borrowed from the conceptual framework of private sector administration practices" (Power 1997, p. 43). In this process of claim for change the notion "best practice" has become key words. Best practice has number of determining points. It asks for evidence of the performance of social programs to be used. Evaluation becomes a key concept. Best practice also involves reaching goals at lowest costs. Another key concept is "bench-marking" which looks even more closely to the efficient use of resources. Bench-marking aims at creating an awareness of how "alike" actors behave in terms of the use of means i.e. resources. In the Swedish case, social authorities serve local welfare administrations by providing "twin" units which have the same characteristics as to demographic structure, size, taxes etc. Another concept that sets focus on the use of resources and procedures in authorities is systems of quality assurance. The most prominent is Total Quality Management (TQM). But as Tuckman (1995) concludes, the name is a bit confusing since TQM is basically not an evaluation of the quality of a product (the term comes from industrial processing) but of practices and procedures of manufacture and provision. Brought together, these components direct public bodies to focus on means, i.e. resources/procedures, and less on goals/outcome. This is another way of observing that the political sphere (goal formulation) is weakened and technical considerations (means used) strengthened in the public sector.

There is another aspect to this development which can be connected to Michael Powers discussion of the "Audit Society". The audit society proclaims new and distinct forms of documentation. Documentation is crucial in a development that is characterized by a new steering/control model. Instead

of relying on inspection top-down, this practice claims for proof of accountability from the bottom-up.

The term “excellence“ becomes the attainable idea and should be coined by the organization itself.

The essence of the audit society is found in a weak form of steering from above. Thus, it is related to governance rather than government. Governance as notion is closely linked to this new form of steering and control since, as Power concludes, it is characterized by an “...increasingly prominent role for internal control systems” (ibid, p 41-42). In relation to governmental demands these new control systems create, in a Foucauldian way, a form of self-disciplinary practice (Petersson, 2006). Much pressure is set on the local welfare administrations to explain why they are different from their “alikes”.

To sum up governments have lost capacity to steer but have instead created new forms of control. In this process a weaken steering is exchanged for enhanced control.

Why different municipalities become similar – the second layer

In his study of how priorities are formed within the local social services, Petersson (2006) observes how the new steering and control systems are practiced by local administrations. He finds that comparisons with other municipalities are an important element when decisions on the welfare services are taken. What the comparisons deals with is a rather one-sided inspection of costs, i.e. the means used are primary, while goals come in as a secondary consideration. One example of this logic was evident in an attitude survey of how citizens apprehend different public services, conducted in one of the municipalities. The result that was analyzed by an independent consultative body showed a discontent with the care of older people. The consultants made the point that this was nothing to worry about since discontent with these services are present in most other municipalities. This is one of the elements that underpins a conclusion that the focus on goals is exchanged for a focus on means. There is generally no defence of goals and greater ambitions and advantages of this in relation to others, but a focus on higher costs and its disadvantages. This means that there exists a rhetoric of cutting down rather than sizing up welfare that is hidden in this new systematic comparative routine. The normative side is downplayed. Petersson talks of a new administrative welfare state emerging at the expense of a moral (or normative) welfare state. This leads to the observation that symbolic rationality and instrumental rationality no longer represents separate logics. Rather, the instrumental, means oriented measures, become the symbols for a successful and legitimate

social welfare administration. Comparison of means used is the mechanism that creates similarity on this level.

The de-politization of the welfare state

The consequences of globalization and the creation of a modern society is advocated by neo-liberals. In line with this they are strong protagonists for reforms associated with NPM. They argue for the limitation of government influence which is supported by some observers analysis of the consequences of globalization. For example Hirst & Thompson (1998) maintain that globalization has reduced the capacity of states to act autonomously on their societies” (p. 263). Some neo-liberals would even argue that there is no such thing as society, meaning that there is very little space for collective actions and public arrangements. The role of politicians should be restricted. This point of view is underpinned by neo-classical economists drawing on public choice theory in their critique of politicians. This theory incorporates the idea of rational choice – a cornerstone in the theory both as explanative and normative device – into the political sphere. Politicians maximize votes and are neither at the service of the public nor skilled enough to represent it. There exists a political failure that is more in need to be corrected than the market failures that the first generation of neo-classical economists were dealing with. The fusion of neo-classical economics and neo-liberalism paved the way for a welfare police centred around individualization, privatization and fragmentation.

At political left wing the idea of modernization has been brought forward as a third way politics. This was initially a Clinton idea, but much more strategically practiced by New Labour in Britain which had Tony Blair as the political portal figure and Anthony Giddens as the scientific. The arguments in third way politics are centred around community, opportunity, responsibility and accountability (Le Grand 1998), or responsibility, inclusion and opportunity (Lister 1998) as two among many alternative descriptions (Lewis 2004). The Le Grand vocabulary shows resemblance with doctrines connected to NPM. Modernization became directly tied to marketization (Mooney, 2001). While neo-liberalism uses ideology to shape practice, third way social democracy is letting administrative reform de-ideologize policy.

Why different municipalities become similar – the third layer

The first and the second layers are both located on a local level and together they enhance the two tendencies towards similarity. The process is interactive and focusing on problems as administrative rather than ideological. Now, this process is further boosted by the development on a national and international political level as described above. This reduces the political influence in exchange for the administrative logic of managerialism.

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