



# Free choice in residential care for older people – A philosophical reflection

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## ABSTRACT

**Objective:** Free choice in elderly care services is a debated issue. Using the theoretical support of philosophers of free will, this paper explores free choice in relocation to residential care. The three dominant perspectives within this field of philosophy, libertarianism, determinism and compatibilism, are applied from the perspective of the older individual to the process of moving. **Method:** Empirical data were collected through qualitative interviews with 13 older individuals who had recently moved into residential care.

**Results:** These individuals had made the choice to move following either a health emergency or incremental health problems. In a deterministic perspective they had no alternative to moving, which was the inevitable solution to their various personal problems. A network of people important to them assisted in the move, making the choice possible. However, post-move the interviewees' perspective had changed to a libertarian or compatibilist interpretation, whereby although the circumstances had conferred little freedom regarding the move.

**Conclusions:** The interviewees reported a high degree of self-determination in the process. It appeared that in order to restore self-respect and personal agency, the older individuals had transformed their restricted choice into a choice made of free will or freer will.

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## Introduction

Old age may be accompanied by new needs and older people make a lot of choices intended to meet these needs. Many individuals require increased help with mundane tasks, such as cleaning and food preparation, as they develop disabling conditions which affect their everyday life. They might then have to choose between the services available to older people and decide whether a public or private care provider should be entrusted to provide these services. A choice of substantial significance is leaving the home where they may have lived for a long time. Older people may choose to move to a smaller, more easily managed house or to a residence that is adapted to the elderly in various ways (Abramsson & Andersson, 2012). A choice with huge emotional and practical implications is the decision to

move to a form of housing in which a high level of care services is offered, such as residential care (Peace, Holland, & Kellaher, 2006).

Free choice regarding services and housing for older people has gained momentum in recent decades and is a priority in government elderly care politics in Sweden. Recently, the *Act on Free Choice Systems* (LOV, 2008:962) was passed by the Swedish parliament. It stipulates that an individual should be free to choose between the different care providers of home services and residential care that municipalities have purchased. The humanist argument for this is that giving older people choice can be expected to empower these older individuals, increasing the quality of the services provided and, ultimately, the satisfaction of the care receiver (Rostgaard, 2006b). The rational, economic arguments for the free choice system involve promoting entrepreneurial activities and employment opportunities (Anttonen & Meagher, 2013), developing alternative

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payment sources for elder care (Meagher & Szebehely, 2010) and increasing the efficiency of public sector providers (Brown & King, 2005). The introduction of free choice in services is expected to contribute to the rectifying of the welfare state's short-comings (Rostgaard, 2006a). However, the free choice to implement this system may soon not be an option for municipal councils in Sweden, which are the body responsible for services to older people. A recent government report suggested legal changes in order to make the system mandatory (SOU, 2014:2). A similar trend can be discerned in a number of other European countries and is part of the marketization of former public services, including a stronger view of older people as customers (Clarke, 2006; Glendinning, 2008; Meagher & Szebehely, 2013). A top-down approach by government to impose choice systems on local actors is also found in the UK (Brown & King, 2005).

However, all these choices that older people have to face are not always easily managed. An evaluation of free choice pilot projects in greater Stockholm in Sweden indicated a number of problems as regards older people's capability and possibility to choose home services (Hjalmarsson, 2003a). A later research project identified a number of cognitive and somatic obstacles to choosing services among those who could have benefitted most from the services, namely the oldest and most fragile (Meinow, Parker, & Thorslund, 2011). Older people seem to prefer less choice than younger people (Reed, Mikels, & Simon, 2008). Psychological changes related to ageing make it increasingly difficult to access information that supports choices, thus making it more difficult to choose (Mather, 2006). It has been argued that certain situations are not appropriate for care service choices, such as the stressful state of being ill (Mol, 2008). The possibility to change provider if the older person is unsatisfied with the care provided is limited due to the fact that the need for care cannot be postponed until a new provider is in place, or for the simple reason that there are few other providers to choose between (Rostgaard, 2006a). Nonetheless, it is contended that individual choice is an important component in the area of services to older people. If choosing is a challenge in old age, this might be more of a question of optimising the options available to choose between and the way in which choice-making is organised (Glendinning, 2008). However, studies in Sweden show considerable difficulties in organising free choice in practice in elderly care (Hjalmarsson, 2003b). In light of these controversies, questions arise concerning how free choices actually are.

This paper explores the issue of free choice among the elderly, with the aid of the philosophical principles of free will. Turning to this particular field within philosophy seems relevant, since free choice is linked to free will in the eyes of many lay people (Monroe & Malle, 2010). One could say that choosing is an expression of free will. The fact that many people have a solid recognition of the existence of free will, which seems to be innate (Rakos, 2004), implies that older people might be positive to making choices. The Swedish government report on free choice in care provision cites studies investigating free choice which show that older people are positive to this (SOU, 2014:2). People with restricted freedom, such as criminal offenders, do not lose their notion of the existence of free will while incarcerated, although this is more marked in adults than adolescents (Laurene, Rakos, Tisak, Robichaud, & Horvath, 2011).

Even if choice of residential care home is framed in a rational choice discourse, a review of the literature shows that choosing a residential care home is a complicated issue (Edwards, Courtney, & Spencer, 2003). Undertaking a move and making all the associated decisions is a very heavy and difficult process, full of emotional and practical obstacles (Ekerdt, Sergeant, Dingel, & Bowen, 2004; Marcoux, 2001). The decision to move may well have been preceded by worries about losing independence (Bland, 1999) or about personal safety (Lee, Woo, & Mackenzie, 2002). Two scenarios are common in the decision-making process; a prolonged period in which increasing frailty is a major motivating factor, or a traumatic crisis, for example hospitalisation or some other life crisis such as a spouse's death (Freudenberger Jett, Coward, Schoenberg, Duncan, & Dwyer, 1996). In both scenarios, the decision to move might be based more on necessity than the feeling that the move is desirable, or at least legitimate. Thus the older person might have had very little influence on the decision. In the worst case, the decision may have been taken without any involvement at all by the older person concerned (Chenitz, 1983; Nolan et al., 1996). Many scholars have shown that the involvement of the older person in decision making concerning moving house is often weak (Castle, 2003). This might be an undesirable side-effect of the fact that it is difficult for them to carry out a move without the support of their family (Davies & Nolan, 2003; Montgomery, 1999) or that of a professional such as a social worker or nurse (Chenitz, 1983; Morgan, Reed, & Palmer, 1997; Nolan et al., 1996) or a doctor (Johnson, Schwiebert, & Rosenmann, 1994). All these circumstances blur the free choice ideology. While in the best of worlds a decision to move would be an autonomous choice, in reality it may be determined by a number of factors and the older individual's independence might be substantially circumscribed or even frustrated.

### Free will

Choice of housing and services for the elderly presupposes an autonomous agent and free will as the basis for these choices. However, free will has long been a contested and debated issue within philosophy (Russel & Deery, 2013). There are three dominant perspectives within the philosophy of the free will; libertarianism, determinism and compatibilism.

*Libertarianism* claims the existence of free and unrestricted will, choices and acts. A decisive condition for an act to be considered free in this view is that there were other alternative routes to follow or other acts that could have been made at the time of the act (Ginet, 1995). *Determinism* holds a totally contrasting view, arguing that there is nothing like free will, i.e. there are always restricting conditions determining human free will and choices. There is also a trait of inevitability in determinism, in that when certain restricting conditions are present, the event they cause will occur (Kane, 2011). *Compatibilism* is a middle road between these two contradictory views, suggesting that there is free will, implying a capability to choose and act, although surrounded by delimiting circumstances. Free will is, hence, compatible with determinism. The crucial aspect and basis for this free will is people's capability for self-conscious reflection (Strawson, 1998, 2011).

Another important dimension in the philosophical debate is the libertarian argument claiming that free will, emanating from an autonomous and self-authored human, is a

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