# What's the problem with older people? : a policy analysis of selected Finnish reports and documents on ageing, care and digitalisation

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# WHAT'S THE PROBLEM WITH OLDER PEOPLE?: A POLICY ANALYSIS OF SELECTED FINNISH REPORTS AND DOCUMENTS ON AGEING, CARE AND DIGITALISATION

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Equal Care - Alone but connected? Digital (in)equalities in care work and generational relationships among older people living alone

Joint Programming Initiative More Years, Better Lives (JPI MYBL)
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# 1 INTRODUCTION

This project report derives from the 'Equal Care - Alone but connected? Digital (in)equalities in care work and generational relationships among older people living alone' (EQualCare), that is part of the Joint Programming Initiative More Years, Better Lives (JPI MYBL) funding programme. To quote from the original project proposal:

> "EQualCare aims to further understanding of, and policy development on, the intersections of digitalisation with intergenerational care work and care relationships of older people living alone, and to contribute to reducing inequalities through collaboration and co-design. EQualCare interrogates inequalities by gender, cultural and socio-economic background both between and within countries, with their very different demographics and policy backgrounds." (Equal Care - Alone but connected? ..., 2020, p. 2)

The background to the project concerns the recognition that digitalisation has brought significant changes to perceived and enacted care relationships in terms of distance and proximity between people. Whilst the digital age adds new cultural expectations of care, collaboration and mutuality, it also has the potential to perpetuate inequalities between generations, income groups and countries. This is due at least in part to the care resources and infrastructure that are readily available. Moreover, as people live longer, seek more autonomous living, do not tolerate unsatisfactory family or household relationships, and are obliged for various reasons to live alone, either temporarily or on a more permanent basis, living alone has become a central theme to understanding later life. Living alone raises further specific challenges to care work and on- and off-line care relationships, particularly in contexts and situations where tensions with close or immediate hands-on physical caring, as well as caring responsibilities involving younger generations, arise. Thus, the relation of (self)care and digital webs of caring work towards and from family members, friends and indeed wider circles of neighbours, acquaintances and those of similar service or mutual co-operation organisations and networks is of great empirical, policy and societal interest. (Equal Care - Alone but connected? ..., 2020, p. 2)

These questions are the focus of EQualCare. In addressing them, the project seeks to cut across several conventional boundaries. First, it is not a methodologically nationalist project, but rather is cross-cultural comparative and collaborative, with two countries, Finland and Sweden, relatively advanced in the digitalisation of civic and private life, providing a contrast to Germany and Latvia that are at different levels of digitalisation (Brants, 2022). Second, the project and the project consortium are also strongly

multidisciplinary, bringing together experienced researchers in anthropology, business, organisation and management studies, cultural studies, education, gender studies, psychology and sociology. Third, EQualCare is a multi-method project, bringing together: i) a review of social policy documents and legislation in terms of care-responsibility and digitalisation for each country; ii) quantitative analysis of existing national and EU data sets (e.g. EU-SILC) to draw together comparative information on living conditions, income, health and care work for different age segments in the 60+ age group; and iii) qualitative research, specifically a participatory action research (PAR) approach. In sum, the model employed in EQualCare is a participatory policy-making approach, seeking to contribute to the reduction of social inequality at the local level, but also, when combined with the work done by other research groups in the project, aiming to lead to wider changes at regional, national or supranational levels.

The aim of this project report is to critically review some of the most central social policy documents for Finland, in order to: i) better understand the political aims that affect planning the living conditions and care for older people in Finland; ii) understand how age is constructed in policy, and what kinds of connotations there are to ageing; and iii) better understand how digitalisation affects older people in Finland. The Finnish healthcare and social service system is undergoing change. The EQualCare project takes place during times of large-scale institutional changes (SOTE) in the health care and social services fields in Finland. The analysis in this project report begins by setting out the demographic situation in Finland, as well as providing statistical information on the relevant age groups, and presenting the Finnish work and welfare context. Following this, the policy analysis draws on Bacchi's (1999, 2018) approach for conducting WPR research (What's the Problem Represented?). The main body of the report is completed with some key concluding remarks, before three appendices on methodological matters.

## 2 FINLAND IN NUMBERS

The Finnish national statistics have been retrieved from Statistics Finland.[1]

## 2.1 Demographic information

The Finnish population numbers about 5.5 million people. The gender structure in the country is quite balanced with 49.9% of the population being men and 50.1% women. The main languages are Finnish and Swedish. Most of the population are Finnish-speaking (86.9%), around 5.2% of the population speak Swedish, and 7.8% of the population another language. Sámi is spoken by approximately 10,000 persons. Almost half of the Finnish population is

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[1]     https://stat.fi/en/database-tables?statistic=tjt

single (48.9%), while the numbers for married persons and divorced or widowed are 35.3% and 15.8% respectively.[2]

The age group of over 60-year-olds makes up 29.4% of the population.[3] The average pension age is 65 years, and it is estimated that the retirement age will rise as life expectancy increases, which currently is 79.2 years for men and 84.5 years for women.[4] Finland is geographically sparsely populated, with 30.8% living in the Southern area of the country, and the rest of the population spread out over a larger area[5].

## 2.2 Income and living conditions

In 2020, 559,321 persons over the age of 60 lived alone (35.9% of all 60+ year olds and 10,2% of the whole population).[6] Almost twice as many women as men are living alone.[7] Of people over the age of 65,[8] 13.6% belong to the lowest income group in Finland. Around 21.8% over 65-year-olds live in material deprivation and 3.3% over 65-year-olds face a risk of poverty and/or social exclusion.[9]

## 2.3 Digital service-use among older persons

The use of digital services and tools varies among the age groups 65-74-year-olds[10] and 75-89-year-olds. In a recent survey conducted by Statistics Finland (2021d), it was found that 65-74-year-olds use the internet and social networks much more than 75-89-year-olds (Table 1).

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2       Statistics Finland 2021a.
3       https://www.tilastokeskus.fi/tup/suoluk/suoluk_vaesto.html
4       Työeläke 2021.
5       Statistics Finland, 2021a.
6       https://www.stat.fi/til/asas/2020/asas_2020_2021-05-20_tau_002_fi.html
7       Statistics Finland, 2021c.
8       The age groups for living conditions are presented with different categorisations in the national statistics, and therefore also here.
9       Statistics Finland 2021b.
10      Statistics for information and communication technology use is presented differently by age group, merging 55-64-year-olds, 65-74-year-olds and 75-89-year-olds into specific groups

Table 1. Use of information and communications technology 2020 (%-share of population) according to age group[11]

| Age group | Using the internet during the past 3 months (% of group) | Using the internet several times a day (% of group) | Online shopping during the past 3 months (% of group) | Making internet calls during the past 3 months (% of group) | Social network activity during the last 3 months (% of group) |
|---|---|---|---|---|---|
| 65-74 | 88 | 62 | 25 | 55 | 46 |
| 75-89 | 51 | 30 | 8 | 19 | 16 |

In a follow-up during 2021 investigating slightly different uses of technology, it is apparent that information and communications technology use decreased with age (Table 2).

Table 2. Use of information and communication technology in 2021 (%-share of population)[12]

| Age group | Using the internet during the past 3 months (% of group) | Using the internet several times a day (% of group) | Online shopping during the past 3 months (% of group) | Bought and ordered food from restaurants during the past 3 months (% of group) | Seen inaccurate or suspicious content on news sites and/or on social media during the past 3 months |
|---|---|---|---|---|---|
| 65-74 | 85 | 66 | 33 | 4 | 46 |
| 75-89 | 57 | 27 | 11 | 0 | 21 |

It is, however, to be noted, that many basic services, both public and private, are also being transferred to the internet. One central example in the Finnish context is banking services, which today often require internet-use or alternatively a physical in-person visit to the bank. The booking of Covid-19 vaccines was also mostly conducted online, making some of the people perhaps most in need of it excluded from fast and easy bookings – if they could not access the internet.

Apart from statistics noted above, THL, the Finnish Institute for Health and Welfare, has also reported on the digital service-use among older persons.[13] People who belong to the age-group of 70+ use digital services and tools far less than younger age groups (THL, 60/2021). Highly educated persons use the internet more but with age the use still decreases despite educational level (THL, 60/2021). Heponiemi et al. (2022) reported on similar results, with showing that a higher age decreases the likelihood of using online services. The authors explain how good digital competence can function as a

11      Statistics Finland 2021d.
12      Statistics Finland 2021e.
13      An investigation on the digital services of social and healthcare services will be conducted until 2023 with financing from STM (the Finnish social and health ministry) and after that potentially by THL.

hindrance, with age-related decline in use, but only up to the age of 80 years.

Older age groups further do not perceive the benefits of using digital services to the same extent as younger age groups. Among 60-69-year-olds 57%, among 70-79-year-olds 67% and among those 80+ 83% did not perceive digital social services as beneficial. When looking at healthcare the numbers were a bit lower, with the respective percentages of 53%-63%-76% (THL, 63/2021.) A recent study conducted by Kyytsönen et al. (2021) also showed how up to 79% of the whole population worry about the use of digital tools in health and social services – even though most have the skills needed for their use. Digitalising of health and social care services can in turn risk marginalising different groups and creating digital exclusions (Heponiemi et al., 2022).

# 3 CONTEXT: THE FINNISH WELFARE SYSTEM

To provide a broad understanding of the Finnish context, the following three sections (3.1, 3.2 and 3.3) outline the organisation of work and welfare, the Finnish policy structure, and the practical organisation of care services for older people.

## 3.1 Work and welfare structure

### 3.1.1 History

Finland is a large and sparsely populated Nordic republic. Finland's geopolitical history is distinct from that of Scandinavia, having been part of both the Swedish and Russian Empires, subsequent independence from the latter in 1917, and predominantly non-Scandinavian language and culture. Industrialisation occurred relatively late, and the country shifted almost directly from an agricultural society, where all worked, to a modern service (Rantalaiho, 1997) or post-industrial society (Husu and Niemelä, 1993), led by information and communication technologies (Heiskanen and Hearn, 2004). Digitalisation is well advanced in all societal spheres. The modernisation of the welfare system in Finland has been through a social-democratic model. It can thus be said to have developed as a 'partly egalitarian patriarchy' (Schunter-Kleeman, 1992, p. 145) or through 'dual role contract' rather than a clear 'equality contract' (Hirdman,1988; Bradley, 1998). The Finnish welfare state has, in recent decades, been transformed as a result of many factors, among them, neo-liberal economic reforms, together with the impacts of globalisation, the development of information technology, the recession of the early 1990s, unemployment, EU membership, and the European Monetary Union, and recent increases in immigration. The Finnish welfare system is still relatively strong compared to most other countries.

## 3.1.2 The Finnish welfare system today

Finland is a relatively well-resourced, high-income society, with relatively small income and gender gaps, as assessed by the World Economic Forum, United Nations Development Programme, Gini index, and similar rankings (see, for example, *Global Gender Gap Report*, 2022; UNDP, 2022). The Finnish system has a strong full-time working norm for all adults. Welfare and family support are well-developed, with universal rights to childcare. The country is often seen as an exemplary 'Nordic welfare state' model, based on notions of gender equality and social justice; however, this classification oversimplifies the national context. Following high unemployment in the early 1990s, the Finnish welfare model was moderately reformed via neo-liberal influences, including pressures for privatised health and welfare reform. A related area of tension, especially in business sectors, lies between national welfare conditions and increased tendencies towards transnational capitalism. Digitalisation is now an established part of welfare state provision, for example, in the operation of health and medical services. Additionally, Covid-19 has not only brought various societal disruptions, but it has also probably assisted moves towards neo-liberal structuring and digitalisation of welfare, so adding to the speed of change.

## 3.2 Organisation of policy structure

As with other Nordic nations with relatively small and rather homogenous populations, even with Finnish Sami and Romany minorities, Finland developed a form of democracy involving a specific positive relation of 'the citizen' and the state, and relatively fluid boundaries between the state, the private sector, civil society, and family. Thus, state and civil society merge much more closely in Finland than in much of the rest of Europe: '(p)eople are used to organising but their idea is to act on behalf of their issues through the state, to pressure "the state to do something"' (Rantalaiho, 1997, p. 23).

Finland, like the other Nordic countries, predominantly represents a public care regime (Pfau-Effinger 2005), even if Finland is said to be receding from this due to reforms in social policies. The recession years and high unemployment rate in the early and mid-1990s led to a more family-centred welfare model (see, for example, Julkunen 2002), and now more recently a more hybrid welfare model, combining public, private and family provision.

The formal SOTE welfare reforms, including, organisational and regional elements, were enacted by Parliament in 2021. After regional elections, the political management and steering of the new counties[14] responsible for welfare services have been established. These reforms have already, for several years, been affecting the organisation and delivery of health care

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14    The official name/translation is wellbeing services counties.

and social services. Additionally, new legislation about tendering has affected the structure and extent of potential service producers, thus making for a more hybrid welfare model, combining public, private, third sector, and family provision.

## 3.3 How care and related services for older people are organised

There are national level laws[15] and guidelines[16] for organising and providing different services for supporting older people living alone. Healthcare and social services are offered at a municipal level but also from the private and third sector. Looking at municipal healthcare, it includes the access to free of charge or low-cost healthcare services. Social services include home services, informal care support, services supporting mobility and institutional care.[17] All Finnish citizens also have the right to monetary assistance after retirement, which is paid in different forms of pensions.

### 3.3.1 Housing allowance and care allowance

In Finland, people have the right to receive care and/or housing assistance either in their own home or outside their home. The municipality's services provided at home and services that can be purchased from private companies or non-governmental organizations can help them to do so.

Housing allowance is a form of monetary assistance paid to pensioners permanently living in Finland with a low income and a pension that entitles the person to housing allowance. The allowance is available for both permanent rental and owner-occupied homes, and both for persons living alone and with someone else.[18] In 2020, 213,183 pensioners received Kela's housing benefit.[19]

The care allowance is a form of monetary assistance that allows an older person to buy services needed. The care allowance is intended for pensioners with a lowered functional capacity, a disability and/or a chronic illness. A care allowance for pensioners can be awarded to persons aged 16 years or over who live in Finland and who receive, for instance, an old-age pension, disability pension, rehabilitation subsidy or surviving spouse's pension from Finland or from abroad.[20] The entitlement to the allowance is determined by the need of assistance, guidance and supervision. Kela assesses the need of assistance or guidance on the basis of the application. Granting

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15      980/2012 Act on Supporting the Functional Capacity of the Older Population and on Social and Health Services for Older Persons.
16      STM 2020.
17      STM 2021a
18      Kela 2021b
19      Kela 2021a
20      Kela 2021c

of the care allowance presupposes that the person needs help with personal activities, such as washing, dressing, communication, guidance, and supervision, as well as the need for reminding, supporting and looking after in daily activities. The care allowance for pensioners is payable at three different rates: care allowance at the basic rate, care allowance at the middle rate, and care allowance at the highest rate. The rate of allowance that is to be granted is affected by the person's need for assistance, guidance and supervision.[21]

 Older persons can also receive care and housing assistance from informal caregivers, much of which is given without compensation. However, informal caregivers of older people may receive support and other assistance from municipalities.[22]

### 3.3.2 Pensions

Older people have the right to monetary assistance that are paid in forms of pensions. The Finnish pension system is an important element in providing income security. The numbers for pension recipients are presented in Tables 3 and 4:

Table 3. Pension recipients[23]

| Pensioners (old age) | %-share of all pension recipients |
|---|---|
| Men | 45.1 |
| Women | 54.9 |
| 65+ | 93 |

Table 4. Pension recipients by age group and gender in the total population[24]

| Pension recipients by age group | Total population (%) | Men (%) | Women (%) |
|---|---|---|---|
| 65-69 | 6.4 | 3.1 | 3.3 |
| 70-74 | 6.6 | 3.1 | 3.5 |

There are different types of pensions for older persons. Pension security comprises work pensions, the national pension and guarantee pension (see descriptions below). It is to be noted that pensions can also sometimes be received at a younger age.[25]

 **National pension**: Minimum pension security for those who have not accrued an earnings-related pension, or if it is small. The retirement age in Finland is 65 years for receiving the national pension. The application for old-age pension can be postponed, in which case the pension will increase.

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21  Kela 2021c
22  Suomi.fi 2021
23  Eläketurvakeskuksen tilastoja 2021
24  Eläketurvakeskus 2021
25  STM 2021b

Each month that is brought forward will permanently reduce the pension.

**Guarantee pension**: Pension benefit guaranteeing everyone a minimum pension larger than the national pension.

**Earnings-related pension**: Pension accrued from wages or self-employed earnings. Pension accrues also for unpaid periods of earnings-related social security benefits, periods of home care of one's own children under the age of three, and studies leading to a degree.

Earnings-related pension and national pension benefits include old age pension, work disability pension, rehabilitation benefits, and family pension:

*Old age pension:* a pension benefit enabling one to retire from work partially or fully.

*Work disability pension:* this pension compensates for loss of earnings resulting from long-term work disability.

*Rehabilitation benefits during rehabilitation:* a person who is temporarily incapable of work and whose handicap or illness is expected to improve through rehabilitation is granted rehabilitation benefits during the rehabilitation period.

*Family pension:* this pension can be paid to widows/widowers and their children.

The *earnings-related pension* also includes part-time pension, partial old-age pension and years-of-service pension, which enables an older person in work to retire partly before they retire completely.[26]

The pension system directly affects the income of an older person. The income level is often defining fees for public care, but also further affects the individual's capabilities to access care and supporting services at older age. Those with more socioeconomic resources have more abilities to choose from and buy services than those who do not. Older persons are not only recipients of care services, but also consumers (e.g. Anttonen & Häikiö, 2011).

# 4 CRITICAL ANALYSIS

This part of the report presents a critical analysis of selected policy documents on care, older persons, and digitalisation.

## 4.1 Methodology and methods

The policy analysis is conducted in accordance with Bacchi's (1999, 2018) guidelines for conducting WPR research (What's the Problem Represented).

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26      STM 2021a

## 4.1.1 Methodology

In assessing the policy documents, it is important to recognise that concepts used in these and similar documents do not have fixed meaning. Thus, it is necessary to "consider the meanings of concepts *in terms of the specific projects to which they are attached.*" (Bacchi, 2018), as expressed in in the WPR approach to analysis. Bacchi (2000, p. 48) elaborates on this as follows: "… thinking of policy as discourse entails moving past the idea that governments simply respond to problems, to viewing problems as shaped in the very policy proposals that are offered as solutions. … it helps to explain why governments (and other actors) adopt a particular way of looking at an issue while ignoring others …" (pp. 47-48). Concepts thus need to be understood in their own context, both nationally and in the written texts themselves. This is even in addition to noting questions of translation, in this case, from Finnish or Swedish to English.

Rather similarly to the WPR approach, Dombos and colleagues (2012) write of the critical frame analysis (CFA) of policies and policy documents as "the study of how "public policies rest on frames that supply them with underlying structures of beliefs perceptions, and appreciation" (Fischer, 2003, p. 144). More specifically, one of the leading proponents of the CFA approach, Verloo, has defined a policy frame as an "organizing principle that transforms fragmentary or incidental information into a structured and meaningful problem, in which a solution is implicitly or explicitly included" (2005, p. 20). Many of the questions raised in CFA (see Appendix 2) and WPR are rather similar: *What is the problem to be solved? Who is affected …? Who/what causes the problem to appear or reproduce? What is the objective? What needs to be done? Who should do it? What references are used to support the claims?*

So, returning to the WPR approach, Bacchi wrote of "policies as constituting competing interpretations or representations of political issues". Analysis can thus consider how a 'problem' or issue is represented: "What presuppositions are implied or taken for granted in the problem representation which is offered; and what effects are connected to this representation of the 'problem'?" (Bacchi, 1999, p. 2). Taking up this approach in the comparative analysis of anti-violence policies, Hearn and McKie (2020, p. 137), have commented, "Given this backdrop to problem representation and policy, Bacchi (1999) argues for analysis that incorporates 'practices with material consequences', as well as ideas and ways of talking about a 'problem'. The 'what's the problem' approach proposes analysis of discourses as practices, to include not just what is said or practiced but who is silenced, and what is not considered."

To sum up, Bacchi (2018) has clarified some differences of emphasis in these approaches, particularly between WPR and CFA as follows:

- first, there is a focus on "... "problem representations" in WPR, as opposed to "problem definitions" ...";

- second, in contrast with some approaches to framing (CFA), "... "problem definitions" and "frames" become competing interpretations of an issue or problem, interpretations mounted by diverse social actors. By contrast, a WPR analysis interrogates how "problems" are conceptualised within policy texts"; and

- third, "... WPR offers a study of knowledges rather than of language use (see Bacchi and Bonham, 2014)", as in some linguistically orientated uses. Thus, the focus of WPR can be characterised as focused on problem representations; the conceptualisation of problems in policy texts; and knowledges, and thus knowledge construction.

## 4.1.2 Method

In sum, WPR emphasises: *problem representations; how problems are conceptualised*; and *the study of knowledges*. This is in keeping with an historical, material understanding of discourse, with material effects – "what the subject is able to say, and what the subject is permitted to say" (Bacchi, 1999, p. 41) – rather than a primarily linguistic understanding.[27] In this context, investigating digitalisation connected to older people living at home, we ask the following overarching questions in conducting our analysis:

   a) What is the problem the policy targets?
   b) What assumptions underlie this representation?
   c) How has this representation come about?
   d) What is not mentioned? What are the silences? Contradictions in policy?
   e) What effects are produced by this problem representation?
   f) How can this representation be challenged?

To answer these questions, we approach the selected document through more specific analytic categories (Table 5).

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27    We have also assembled short summaries with further quotes and selected references from Bacchi and related research, and key questions from Dombos et al., 2012.

Table 5. Questions from Bacchi, 2018

| Area of analysis | | | | | |
|---|---|---|---|---|---|
| People living alone | Older people living alone | Older people and care of older people | Older people and digitalisation | Digitalisation | Digitalisation **and people living alone** |
| Who are "people living alone"? What is the problem and how can it be understood? What assumptions underlie this representation? | Who are "older people living alone"? What is the problem and how can it be understood? What assumptions underlie this representation? | Who are older people in the policies? What is care and care systems of older people according to policy? What is the problem and how can it be understood? What problem do care systems represent? What assumptions underlie this representation? | What is digitalisation related to older people and older people's needs? What is the problem and how can it be understood? What assumptions underlie this representation? | What is digitalisation? What is the problem and how can it be understood? What assumptions underlie this representation? | What is digitalisation related to people living alone and how can it be understood? What assumptions underlie this representation? |
| What is not mentioned? | What is not mentioned? | What is not mentioned? | What is not mentioned? | What is not mentioned? | What is not mentioned? |
| What effects are produced by these representations? | | | | | |
| How have these representations come about and how can they be challenged? | | | | | |

## 4.2 Documents chosen and descriptions of their content

We now move on to describe the chosen Finnish documents. We have carefully chosen documents from each of the following areas: a) care; b) later life and living alone; and c) digitalisation. The selected documents for the policy analysis vary in terms of their focus and scope, and vary from more national levels of governing to regional and local ones. By analysing who is responsible for executing the possible actions the document recommends, a fuller understanding of how the documents and different levels of governance interact, or indeed do not interact, can be derived.

In total seven documents and one website were selected for analysis. We have identified four different types of documents in searching for policy documents:

1) National policies and regulations (1 document)
2) Guidelines (1 document and 1 website)
3) Acts and laws targeting the older population (1 document)
4) Reports targeting older people, care and digitalisation
(4 documents)

We first briefly introduce the documents selected before analysing them with the methods outlined above.

### 4.2.1 National policies and regulations on ageing

**Document 1: The Finnish national programme on ageing[28]**

The first document, the Finnish national programme on ageing, is a report published by the Finnish Ministry of Social Affairs and Health at the end of 2020. The document is described as an action plan and a cross-administrative programme that will be implemented by the state, municipalities [and thus now countries], the third sector, and the private sector. The report describes what kind of measures the Finnish government will be implementing during the current national governmental term (2020-2023) and future terms (until 2030).

The report lays out six impact objectives/key aims to be reached by 2030 (p. 28):

- Voluntary work becomes more established within Finland
- Older people retain capacity for a longer time
- Work abilities of older working-aged people are improved, and careers are longer in duration

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28      http://urn.fi/URN:ISBN:978-952-00-8431-8

- Digitalisation and technologies increase well-being
- Housing and living environments are age-friendly
- Services are implemented in a socially and economically sustainable manner

To achieve these, concrete examples of different operational programmes are presented together with responsibilities (p. 26). The report also lays out factors related to ageing and the anticipated impacts of these factors.

## 4.2.2 Guidelines on digitalisation

The Finnish Institute for Health and Welfare (THL),[29] the Ministry of Social Affairs and Health (STM),[30] and The National Pension, Health Insurance and Social Security Fund (Kela)[31] are organisations that provide information and support for the Finnish population. In relation to ageing, THL provides general information on caring for older persons and ageing, STM information on healthcare and social services for older persons, and Kela information on social security and monetary assistance for older persons. These organisations primarily provide information on their websites; an exception here is Kela, which also has offices for visiting if assistance is needed.

In our analysis, we focus on analysing online content, that can be found on organizational websites. Instead of analysing these websites in their entirety, we decide to analyse parts of the content on the websites that could be seen as most relevant to digitalisation and later life.

### Website 1: The Finnish Institute for Health and Welfare (THL)

The Kati-programme[32] is a new programme aimed to help persons living at home with technology and digitalisation. The programme aims to implement more technology within older persons' homes to increase older persons' capabilities and well-being, their safety and to decrease the work-burden of potential home-care personnel.

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29      https://thl.fi/fi/web/ikaantyminen https://thl.fi/fi/web/ikaantyminen/muuttuvat-vanhus-palvelut
30      https://stm.fi/iakkaiden-palvelut https://stm.fi/terveyspalvelut https://stm.fi/sosiaalipalve-lut
31      https://www.kela.fi/web/en/pension
32      https://thl.fi/fi/tutkimus-ja-kehittaminen/tutkimukset-ja-hankkeet/kotona-asumisen-te-knologiat-ikaihmisille-ohjelma-kati-?redirect=%2Ffi%2Ftutkimus-ja-kehittaminen%2Ftutkimuk-set-ja-hankkeet%2Ftutkimukset-ja-hankkeet-aiheittain%2Fikaantyminen-tutkimukset-ja-hankkeet

**Document 2: Digitalisation to support health and well-being – guidelines on digitalisation until 2025[33]**

The second document is a report published by the Ministry of Social Affairs and Health that describes possibilities of digitalisation in the development of different health and social services.

## 4.2.3 Legislation targeting the older population

**Document 3: 980/2012[34] Act on Supporting the Functional Capacity of the Older Population and on Social and Health Services for Older Persons**

The third document is a legislative document, inscribed in the Finnish law, describing how older persons should be supported in their everyday lives. The document brings up the need of regular time assessments of older persons' functional capabilities and different local authorities' responsibilities in supporting and evaluating older persons.

## 4.2.4 Reports targeting older people, care and digitalisation

**Document 4: Ageing report - Overall assessment of the effects of ageing and the adequacy of preparation for demographic changes[35]**

The fourth chosen document is a report published by the Finnish Prime Minister's Office in 2009. Even though published more than a decade ago, the report is still relevant, as it outlines central directions for policies concerning the ageing population in Finland, that are repeated in the reports published in recent years.

**Document 5: Quality recommendation to guarantee a good quality of life and improved services for older persons 2020–2023: The Aim is an Age-friendly Finland[36]**

The fifth document is a report that provides tools for developing, evaluating and implementing services for older persons. The report is directed towards decision-makers and managers in municipalities (p. 10). Key themes are: a) increasing voluntary work; b) using technology and digitalisation; c) de-

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33      https://julkaisut.valtioneuvosto.fi/handle/10024/75526
34      https://finlex.fi/en/laki/kaannokset/2012/en20120980?search%5Btype%5D=pika&-
search%5Bkieli%5D%5B0%5D=en&search%5Bpika%5D=980
35      https://vnk.fi/julkaisu?pubid=3734
36      http://urn.fi/URN:ISBN:978-952-00-8427-1

veloping housing and residential environments; d) organising services; e) providing guidance and coordinating services for clients; f) ensuring skilled personnel; and g) ensuring quality of services.

**Document 6: Services supporting older people living at home in the future 2021-2023: Objectives and projects[37]**

The sixth document is a report with guidelines on how to develop services for older persons living at home. The report is targeted towards municipalities and the counties responsible for welfare services, as they plan and develop services supporting people living at home.

**Document 7: IKÄPIHA – Harmonising long-term services for older people in the provinces[38]**

The seventh and final document provides an insight on how long-term services for older persons are organised within different areas in Finland. It further provides a future scenario of how services could be organised in a more consistent and equal manner.

## 4.3 Analysis

We now analyse the documents with the first four of Bacchi's questions:

a) What is the problem the policy targets?
b) What assumptions underlie this representation?
c) How has this representation come about?
d) What is not mentioned? / What are the silences? What contradictions in policy are there?

We will return to the remaining two questions, e) What effects are produced by this problem representation? and f) how can this representation be challenged? later on, in 4.3.2.

37    http://urn.fi/URN:ISBN:978-952-00-7169-1
38    https://julkaisut.valtioneuvosto.fi/handle/10024/161988

## 4.3.1 The texts

In this sub-chapter, we first analyse the documents one by one, before tying the analysis together.

### Document 1: The Finnish national programme on ageing[39]

a) In the first document, the policies are targeted towards the problems that may come with ageing:

> "The challenges posed by the ageing of the population are complex and interdependent. We need to find solutions quickly because ageing is progressing rapidly. However, no single entity is responsible for solving the challenges associated with this phenomenon. Several administrative branches are examining the topic from their own perspectives without a shared vision, coordination and cooperation. The issues related to the ageing of the population will also not be solved during a single government term; instead, managing them requires long-term cross-administrative commitment and development." (STM, 2020a, p. 13)

> "Ageing also extensively affects public health. The challenges that should be prevented include lack of physical activity, nutritional problems for older people, such as overweight and underweight and undernutrition, and substance abuse, mental health problems and loneliness." (STM, 2020a, p. 17)

> "While age does not in itself cause limitations to people's functional capacity, there are more prevalent in older people as a result of many diseases increasing with older age, especially memory disorders." (STM, 2020a, p. 18)

> "As people age, their functional capacity is limited in various ways due to illnesses. Functional capacity is divided into physical, psychological, cognitive and social dimensions." (STM, 2020a, p. 30)

Ageing is, however, framed as both a challenge and resource:

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39      http://urn.fi/URN:ISBN:978-952-00-8431-8

"The growth in the population aged over 64 is both a resource and a challenge for both society as a whole as well as the organisation and provision of social welfare and health care services. The need for regular support and services only begins to grow more after a person reaches the age of 75." (STM, 2020a, p. 19)

b) In terms of the kind of assumptions that underlie this problem representation, first, it can be noted that the idea of ageing is widely represented as equivalent to decline in individual capabilities. Older people are framed as fragile individuals who are in need of care and services, while studies show that a significant decline in different capabilities tends to occur at a much higher age (Erhag et al., 2022). A paradox in the report is that older persons are at the same time framed as capable individuals, who will be able and willing to be active and healthy, as well as able to work longer at an older age – which in turn relates to the concepts of successful and active ageing (Timonen, 2016; also see Katz & Calasanti, 2015, and Hearn & Parkin, 2021, for critical commentaries).

c) Representations in the policy document can be related to historical events and societal changes, but also dominant discourses on welfare, neoliberalism, individualisation, health and ageing.

d) When exploring what is not mentioned, silences and contradictions, many examples can be noted. One central contradiction/paradox is how older persons are represented as a passive and fragile group, but at the same time as active and resourceful for Finnish society.

Furthermore, older persons are framed as a homogenous group, hence, not taking into account differences within the group of older persons. One could, for example, consider socio-economic differences, other social categories intertwined with ageing, and the impact of different backgrounds that create certain possibilities but at the same time limitations for different people within the wider group of older persons.

**The Kati-programme**

a) The problem that is represented in the Kati-programme is the inability and/or unawareness of using technology and digital devices at an older age. Older persons are framed as a group that cannot use technology in a sufficient way.

b) The representations underlying this problem are related both to the importance of technological development and older persons' use of technology. The implementation of further technology use and increased digitalisation

within the Finnish society is represented as especially important. The increased use of technology is represented as not only improving well-being through making different services more efficient, but also increasing the value and branding of Finnish innovations and companies, at both a national and international level. Older persons are seen as people who need extra help with technology and digitalisation, due to their inexperience in using these technologies.

c) The development of these representations can be related to the broader technological developments in western industrialised countries, the changing structuring of welfare states, and stereotypes and assumptions about older persons' technological skills. Furthermore, presenting digitalisation as a goal as such relies on a neoliberal assumption of efficiency as a positive goal without fully attending to possible downsides.

d) When analysing silences, contradictions and what is not mentioned, several different aspects can be identified. One problematic aspect is that older persons are treated as a homogenous group that do not know how to use technology properly. Some might, however, have an educational- or work-related background that supports them in using technology and digital devices. For example, memory disorders might decrease the ability to use what were previously familiar technological and digital devices. Furthermore, socio-economic differences affecting the use and purchase of technology are not addressed. Not all people can afford to invest in technological and digital devices – which can lead to the marginalisation and exclusion of some groups within wider the group of older persons. The fact that technologies do not always work effectively is neither discussed; the responsibility is put on older persons in using technology and digital devices – but the problem is not always about these persons' agency but rather the technological functions of the devices have. Strives towards efficiency through technology and digitalisation can be a form of silencing of the problems behind system designs and the invisible time consumption for individuals, and their possible kin and/or carers in seeking to work around these problems and shortcomings, thus decreasing the effectiveness and efficiency of digitalisation.

**Document 2: Digitalisation to support health and well-being – guidelines on digitalisation until 2025[40]**

a) This document frames the need for more online and digitalised social and healthcare services (STM, 2016, p. 4). The problem is perhaps related to an increased need for social and health services (that come with a higher age) in relation to the workforce getting smaller.

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40      https://julkaisut.valtioneuvosto.fi/handle/10024/75526

b) Different assumptions can be seen to underlie this representation. First, older people are treated as a large vulnerable group that will be in increasing need of healthcare and social services. Second, technology and digitalisation within healthcare and social services are seen in themselves as good things that will promote efficiency of these services.

c) The strong push for implementing technology within healthcare and social services can be related to different assumptions related to the need for these services, the strong and positive innovation and technology-discourse in society as well as individual/neoliberal discourses that transfer the responsibility for health more to individuals themselves. This includes the idea and practice that people have to use technology – and in turn have to make changes themselves.

d) When it comes to exploring silences, what is not mentioned, and contradictions in the report, we can identify a number of different aspects. In the document, the inclusion of different stakeholder groups in the planning and evaluation of services is seen as important (STM, 2016, p. 26), but how these stakeholder groups will be approached and included in practice is not mentioned. Furthermore, socio-economic differences in having technology at home is not discussed thoroughly. It is mentioned that technological tools can be provided at public sites, such as libraries (STM, 2016, p. 26), but problems related to functional mobility, sickness (such as Covid-19 or other health issues) or loneliness (not wanting to get out of the house), are not discussed.

## Document 3: 980/2012[41] Act on Supporting the Functional Capacity of the Older Population and on Social and Health Services for Older Persons

a) When analysing the third document, the problem represented is older persons. To ensure sufficient support for older persons and their functional capacities through social and health services, an act of parliament has been enacted.

b) Older persons are framed as people in need of increased help, service and care. The strong focus on care can be related to broader thinking about welfare and the welfare state system.

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41      https://finlex.fi/en/laki/kaannokset/2012/en20120980?search%5Btype%5D=pika&-search%5Bkieli%5D%5B0%5D=en&search%5Bpika%5D=980

c) The representation concerned in the document can be understood as a representation related to the Finnish welfare system. There is a strong focus on taking care of the older population: as they have paid taxes through working, they are now allowed assistance in both monetary and service-related ways.

d) There is a paradox in defining the target group: The legislation is described as targeting the older population, in this context retired people. Older persons are, however, described as persons with physical, cognitive, mental or social functional capacity impairments. This leaves unstated who it is who decides when these people cross the line of not having full functional capacity.

## Document 4: Ageing report - Overall assessment of the effects of ageing and the adequacy of preparation for demographic changes[42]

a) The main problem with ageing is described in relation to different fiscal and social sustainability issues that come with ageing. Finland has for long been a country with an established welfare state that provides its citizens with different income transfers, mostly financed by taxes. As the older groups are growing in number in comparison to the employed groups, issues relating to fiscal and social aspects seem to grow, as less people are employed, more need healthcare and social services, and issues and needs related to health increase with age. The country needs to develop policy responses that raise the employment rate, enhance public service efficiency and improve health and functional ability among citizens. These are targeted at the whole population (STM, 2009, p. 15.)

> "Sudden changes in policy are likely to reduce welfare in many ways (Auerbach 2008). This is why the debate over policy challenges associated with ageing habitually involves the concepts of sustainability of public finances, social sustainability and political sustainability. Generally, the main focus has been on the sustainability of public finances, i.e. confidence in the fact that no sudden increases in taxation or decreases in expenditure will be needed in the future." (STM, 2009, p. 62)

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42        https://vnk.fi/julkaisu?pubid=3734

b) Age is seen in relation to functional ability and health even though a higher age does not equal a decline in health or functional ability (STM, 2009, p. 12) (see Erhag et al., 2022). The goal is to uphold the welfare system: instead of making cuts in social transfers and assistance, alternative ways are considered. Diseases are discussed as being related to age and ageing.

c) This representation can be related to different discourses on health, welfare and neoliberalism. Health is seen to equal functionality. There is a wish to uphold the welfare system – this is however challenged by the neoliberal discourses that put more focus on the individual to take care of themself. Evidence-based policy and measurement of effectiveness are seen as extremely important (STM, 2009, p. 250), and it is also recognised that this approach will slow down implementation.

d) When discussing raising the employment rate, issues related to ageism and work are discussed, but how to solve these problems is not (STM, 2009, pp. 87-120). It is noted that there is a part of the population that will not be active and healthy; however, the different necessary measures are not discussed.

**Document 5: Quality recommendation to guarantee a good quality of life and improved services for older persons 2020–2023: The Aim is an Age-friendly Finland[43]**

a) The problems that relate to ageing, functional capability and well-being are seen as important to tackle (STM, 2020b, pp. 11-12, 15). The main policy targets include promoting living at home as well as designing age-friendly housing and environments, increasing voluntary work, ensuring skilled personnel, developing services, offering guidance and implementing technology.

b) These representations are based on the assumptions that older people need sufficient and good services and are entitled to a good quality of life. Well-being is understood as being measurable by quantifying instruments.

c) Well-being and taking care of older people can be linked to different welfare policies and practices. Perhaps with problems arising in different services for older people, it is seen as important to improve these services and not neglect older persons.

d) The use and implementation of technology in services is addressed but who is responsible for teaching older persons how to use it is not addressed (STM, 2020b, p. 33)

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43      http://urn.fi/URN:ISBN:978-952-00-8427-1

> "Citizens are expected – or even required – to
> have the skills, the willingness and the ability to
> use electronic services. This is why the continuous
> availability of digital support shall be ensured for
> everyone, since elderly people in particular who are
> not involved in digital development are unable to use
> electronic services independently as a whole" (STM,
> 2020b, p. 32)

Furthermore, technology is mainly discussed as a resource and as a possibility: risks and problems that come with technology not functioning and who is responsible for ensuring that technology functions is not discussed (STM, 2020b, p. 32-33).

**Document 6: Services supporting older people living at home in the future 2021-2023: Objectives and projects[44]**

a) The problem is represented as the ageing of the population:

> "This [the ageing of the population] creates chal-
> lenges for the welfare state that require determined
> planning and complying with the needs of an in-
> creasingly ageing population". (STM, 2020l, p. 8).

Therefore, it is seen as important to develop preventive measures and supportive techniques to ensure functional capacity among older persons (STM, 2020l, p.11-12), and to keep them functional and living at home for as long as possible.

b) The assumptions that underlie this representation are that older people want to live at home for as long as possible and that the system will not be able to provide enough care and housing for the whole population outside their homes.

c) The assumptions are grounded in estimations of how much care and housing resources the ageing population would need. A strong focus on older persons being independent or largely independent is valued.

d) Age and health are mostly talked about in relation to capabilities. Technological solutions to be implemented in homes are addressed, but who will be responsible for these functioning, and who will evaluate, install and fix problems related to technology is not addressed (STM, 2020l, p. 15).

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44      http://urn.fi/URN:ISBN:978-952-00-7169-1

**Document 7: IKÄPIHA – Harmonising long-term services for older people in the provinces[45]**

a) The differing content and scope of various services for older people within the country are seen as problematic, as this can lead to unequal access and unequal use of services among older persons.

b) The assumption is that services should be equal but also that it would be economically beneficial for the country to harmonise services.

c) This representation has perhaps come about as it has been noticed that there are differences in provision, access and use of services among older persons within the country. This situation is not compatible with the Finnish laws on provision of care and services for older people. However, the focus here is put on the economic benefits of changes, not on human life.

d) This document focuses on the economic benefits that would come from harmonising services. The question of equal access and use is not developed as clearly and is thus treated as secondary. How to ensure services for those living further away is not mentioned.

**Summary of documents**

If we now return to the table presented in section 4.1.2, parts of the analysis can be illustrated in a table format (Table 6).

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45      https://julkaisut.valtioneuvosto.fi/handle/10024/161988

## Table 6. Bacchi's questions with results from analysis

| Area of analysis | | | | | |
|---|---|---|---|---|---|
| People living alone | Older people living alone | Older people and care of older people | Older people and digital-is-ation | Digitalisation | Digitalisation and people living alone |
| People living alone are in these reports often older persons<br><br>The problems lie in their functional abilities and capacities: related to health, economy, work | Older people living alone are all retired persons<br><br>The problems lie in the increased need for services and monetary assistance<br><br>The group of older persons are homogenised<br><br>Older people are seen as willing to comply with the guidelines offered | Care in relation to people living at home is seen as the best option<br><br>Care includes helping a person with taking care of hygiene and health<br><br>Preventive measures are seen as important, there is a fear of services not being sufficient for all as problems relating to health increase with age | Digitalisation is seen as something that can replace a part of human-care and is seen as assisting persons living at home | Digitalisation is embedded in society, with technology seen as a tool for making healthcare and social services more efficient | Digitalisation is something that will become a part of everyone's life<br><br>Digitalisation can assist persons living alone, especially older persons with healthcare and social services issues and help them out at home |
| Others who live alone<br>Problems like loneliness and isolation, refusing to take part of services<br>Younger people | The variety within age-groups, how many people are active, how many are indeed in an increased need for services<br><br>Freedom of choice<br><br>The partly gendered division of labour which also has implications for pensions etc (see, for example, Hearn & Parkin, 2021) | Differences in access to care, due to mobility, socio-economic issues, housing, network of care (family, relatives, acquaintances etc.)<br><br>Freedom of choice | Who is responsible when technology fails and who will teach users to use the technology<br><br>Problems with mobility, sickness, living far away<br><br>The possibility of technology resistance<br><br>Socioeconomic differences: all might not afford it | How users of technology will be included in the planning and development of tools<br><br>It is much about having skills as well<br><br>Socioeconomic differences: all might not afford it<br><br>Background: use and experience | What happens when technology fails<br><br>Who is responsible for teaching<br><br>Who is responsible when technology does not work<br><br>The possibility of technology resistance<br><br>Studies point to older persons not using online tools (see, for example, Heponiemi et al. 2022)<br><br>Socio-economic differences: all might not afford it<br><br>Backgrounds in work history, experiences of using technology |
| What effects are produced by these representations? | | | | | |
| How has these representations come about and how can they be challenged? | | | | | |

Thus, still the questions of what effects are produced by the representations and how they have come about and how they can be challenged, remains. These questions are addressed in the following section, 4.3.2.

### 4.3.2 Effects produced and challenging representations

If we move on to analysing what effects are produced by the different problem representations on their own and/or together, we can recognise three main points that occur in all documents. Firstly, even if the challenges posed by the ageing of the population are outlined to be complex and inter-dependent, there is a strong tendency to present the ageing population as a homogenous group. This means that, for example, variations by age, such as the older old, as well as health-related, and/or socio-economic differences, are largely ignored, as well as differences in education and work/employment history. Such variations are likely to lead to varying levels of agency for and amongst the target group, and not acknowledging these differences and needs, means playing down the possibilities for different service structures and solutions. Secondly, as digitalisation is presented as a goal, and partly a solution as itself, faith in technology is reproduced, and even strengthened, without acknowledging problems in planner-user-communication, in the worst cases producing systems for the health and social sectors that inhibit contact from health care or social services to individuals, or vice versa. Furthermore, socio-economic inequalities are not acknowledged, nor is how these create uneven capabilities in being able to invest in and update technology, thus sustaining unequal positions for acquiring services, care and advice online. Thirdly, as the goal of increasing efficiency though technology is taken-for-granted, without questioning the neoliberal starting point of the goal, the human aspects of policy, policy implementation and practice are made secondary, as are the consequent effects in the everyday lives of older people.

## 5 CONCLUSION

The policy analysis conducted in this report has shown that age is largely presented as related to the concepts of capability, interdependence and non-dependence. In the Finnish policy documents analysed older persons are often presented as a homogenous group, and while age differences are recognised the intersections of class, gender and ethnicity, as well as differential and shifting relations to digitalisation, are largely ignored. It might be argued that this is partly an example and expression of the widespread official and often bureaucratic discourse of official documents (Burton & Carlen, 1979/2014), including policy documents, within many national, legal and quasi-legal traditions. It could also be related to the notion of citizenship prevalent in Finland, as a country where national citizenship was estab-

lished, in a sense, at one point in history – in contrast to many European countries, where citizenship was gradual achieved across social cleavages, especially those of class and gender.

This notion of Finnish citizenship, as (relatively) one without social division being explicitly recognised, has been discussed in terms of the notion of genderless gender equality and particular form of neutrality that does not strongly recognise gender and gender power relations, in contrast to, say, public ideologies in Sweden (Parvikko, 1990; Ronkainen, 1991; Rantalaiho, 1997). Practices of citizenship, including in relation to care and work, involve widespread assumptions in public debate and amongst policymakers that many inequalities have been overcome. This notion of 'neutral' citizenship can have both positive connotations and implications, in its potential inclusivity, and negative connotations and implications, as in playing down some social divisions and marginalising some citizens or potential citizens (Keskinen et al., 2021; Keskinen, 2022). Such issues have been less discussed in relation to ageing and older citizens. The policy documents focus on the problems that may arise with ageing, even while ageing is not necessarily portrayed as a problem in itself. More specific problems are described in relation to various forms of sustainability: economic (maintenance of services and care), social (provision of services and care), and human (health).

At the same time, the dominant ideology is constructed around healthy lives, successful ageing, non-dependence on outside help, and independence, with the focus towards economic and social efficiency. These different emphases can perhaps be related to wider dominant discourses on neoliberalism, welfare, individualisation, health and ageing. Older people are generally treated as a broadly homogenous group without acknowledging, for example, health-related, and/or socio-economic differences, as well as differences in education and work/employment history, which can affect, for example, risks for marginalisation. Even though monetary security systems, such as the pension-system, and access to public healthcare and social services, the reality of many not being able to afford or access services is largely ignored.

All the documents analysed point out the need for evidence-based policy and measurement of effectiveness. The documents also often repeat themselves and cite previous policy work intertextually. The need for solutions is pointed out, but solutions are generally not brought up at the level of practice. An exception here is to be found in part of the Finnish national programme on ageing (Document 1), which still, however, only describes certain projects to be implemented. The translation of policy documents into implementation, along with likely variations across regions and municipalities, professional practice and everyday interaction and experience is less developed aspect needing important attention.

Many issues are presented in positive way, rather than negatively. Technology is described positively, while risks that come with technology not working in relation to older people are not discussed and are thus silenced. The fact that technology-use needs skills is related to concept of capability (Erhag et al., 2022), and this is not accounted for in the documents, neither for the individual older people, nor the employees or volunteers engaged as service providers. Digitalisation is presented as a goal in its own right, without acknowledging differences in technical and digital skills, keeping up with programmes and applications, problems in planner-user-communication, and risks of marginalisation due to lack of skills and/or support. Socio-economic inequalities in relation to the ability to invest in and update technology are scarcely acknowledged, even if socio-economic inequalities create unequal capabilities for acquiring services, care and advice online. Other omissions include explicit policy discussion on older people who are migrants, Black and minority ethnic, people of colour, non-nationals, as well as LGBTIQA+ people.

Finally, there is the question of how such representations can be challenged. Even with the relatively strong public welfare provision in Finland, the current neoliberal background to the policy landscape needs to be questioned. This is especially so as Covid-19 and the many and various societal disruptions it has brought. The Covid-19 pandemic and its accompanying social lockdown has led to a particular increase in the numbers of older people using mobile technologies to stay in touch with family and friends, but has also probably assisted moves towards neoliberal structuring and digitalisation of welfare, so adding to the speed of change. A more humane way of valuing life, life experience, and diversity, both of the whole population and within different (age) groups, should be more central in planning and implementing age-, care- and digitalisation-related developments. Such societal and policy changes and issues need to be evaluated in a more holistic, interconnected way, not simply in terms of either positive or negative aspects.

## ACKNOWLEDGEMENTS

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# APPENDICES

## Appendix 1a: Further quotes and selected references

Bacchi wrote of "policies as constituting competing interpretations or representations of political issues". Analysis can thus consider how a 'problem' or issue is represented: "What presuppositions are implied or taken for granted in the problem representation which is offered; and what effects are connected to this representation of the 'problem'?" (Bacchi, 1999, p. 2). "Given this backdrop to problem representation and policy, Bacchi (1999) argues for analysis that incorporates 'practices with material consequences', as well as ideas and ways of talking about a 'problem'. The 'what's the problem' approach proposes analysis of discourses as practices, to include not just what is said or practiced but who is silenced, and what is not considered. Discourses have material effects and combined with dimensions of problem representation and resultant artefacts (policies) provide data for analysis ..." (Hearn and McKie, 2010, p. 137).

Swanton (2021, p. 28) writes: "My job as a critical policy analyst is to study [the] hidden dimensions of policy to explore how issues are framed. This task requires an analysis of meaning that goes beyond facts since, as Fraser (2008, p. 68) notes, "disputes about the frame are not reducible to simple questions of empirical fact, as the historical interpretations, social theories, and normative assumptions that necessarily underlie factual claims are themselves in dispute". ... I adopt Carol Bacchi's (2009) ... WPR approach ... a form of discursive policy analysis used to interrogate the way social issues are constructed .... it uses policy as a window through which to explore power relations in society, while simultaneously drawing attention to alternative strategies of progressive change ...". He continues, citing Bacchi (2000, p. 48): "... thinking of policy as discourse entails moving past the idea that governments simply respond to problems, to viewing problems as shaped in the very policy proposals that are offered as solutions. ... it helps to explain why governments (and other actors) adopt a particular way of looking at an issue while ignoring others ..." (pp. 47-48)

Bacchi, C. (1999) *Women, Policy and Politics: The construction of policy problems*, London: Sage.

Bacchi, C. (2000) Policy as discourse: What does it mean? Where does it get us? *Discourse: Studies in the Cultural Politics of Education*, 21(1): 45-57.

Bacchi, C. (2009) *Analysing Policy: What's the problem represented to be?* London: Pearson.

Bacchi, C. (2018) Comparing framing, problem definition and WPR. 2 April. https://carolbacchi.com/2018/04/02/comparing-framing-problem-definition-and-wpr/

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Hearn, J. & McKie, L. (2008) Gendered policy and policy on gender: The case of "domestic violence". *Policy and Politics*, 36(1): 75-91.

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## Appendix 1b: Extracts from Dombos et al., 2012

(Dombos, T., with Krizsan, A., Verloo, M., & Zenta, V. (2012) Critical frame analysis. https://cps.ceu.edu/sites/cps.ceu.edu/files/cps-working-paper-critical-frame-analysis-quing-2012.pdf)

1. *Problem oriented.* The document contains an analysis of the current socio-economic
situation and describes how it differs from a desired/ideal situation.
2. *Causalistic.* The document contains an analysis of what leads to the current situation; how the problems identified can be explained; often assigning responsibility to particular actors for causing the problem.
3. *Future oriented.* The document has a vision about the desired/ideal situation with which the current situation is contrasted with. This vision is formulated as objectives.
4. *Practical.* The document describes how the set objectives can be achieved: it proposes a variety of activities to pursue (ends-means logic).
5. *Delegative.* The document assigns or delegates responsibilities in terms of who should pursue what activity.
6. *Targeted.* The document described which social groups are affected by the problem, and activities proposed are also linked to specific target groups.
7. *Budget.* The document provides information on how to finance the activities proposed.
8. *Creating authority.* The document uses references to support the claims it makes. The references can include scientific studies, statistics, legislative and policy examples in other countries, expert opinions or references to binding (international) norms, etc.

When analyzing particular documents these features can be translated to questions such as:
>	*What is the problem to be solved?*
>	*Who is affected by it?*
>	*Who/what causes the problem to appear or reproduce?*
>	*What is the objective?*
>	*What needs to be done?*
>	*Who should do it?*
>	*What references are used to support the claims?*

These and similar questions can be called sensitizing questions (Verloo and Lombardo 2007: 35) that provide a certain interpretative tool when reading policy document in search for policy frames. Issue frames can be identified/constructed by searching for similarities and differences in what documents say about these questions.

Theory-based evaluation or program logic evaluation (see e.g. Chen 1990; Owen and Rogers 1999) provides further such evaluative criteria:

9. *Specificity*. The document does not stop at general problem statements and vague wishes, but gives details both in terms of problems to fight and ways to achieve it.

10. *Consistency*. There is a logical consistency between various aspects of the document: the activities proposed contribute (at least in theory) to the desired objectives and respond to the problems identified; the target groups are in accordance with groups linked with the problem (either as being affected by the problem or causing the problem); the impact mechanism of proposed actions correspond to the causal analysis of the problems.

11. *Comprehensivity*. The document gives a comprehensive account of the problem at hand, and discusses the full range of activities that can lead to the realization of the objectives (and proposes to pursue the best of those).

... based on available literature on democratic theory and gender theory the following further criteria can be adopted, all of which contribute to the likelihood that the gender equality policy is both relevant and the solution feasible.

12. *Inclusive policymaking*. The document makes reference to consultations with a wide range of stakeholders affected by the policy.

13. *Gender-explicitness*. The document discusses the problem explicitly in gendered terms.

14. *Structural understanding of gender*. The document goes beyond mentioning gendered social categories, and has a complex understanding of gender that includes the distribution of resources, relations of power and an understanding of gender norms.

15. *Intersectional inclusion*. The document does not limit the analysis to the question of gender, but looks at how gender and other forms of inequalities (race/ethnicity, sexuality, age, class, etc.) are intertwined.

16. *Commitment to gender equality*. The document explicitly endorses the idea of gender equality and organizes objectives and activities to achieve it.

## Appendix 1c: Comparing framing, problem definition and WPR by Carol Bacchi

Posted on April 2, 2018

I have been asked on several I have been asked on several occasions how WPR is similar to or different from analyses that refer to framing and/or problem definition. I have written on this topic elsewhere and refer you to the sources at the end of this entry if you want to pursue the matter.

It seems important to locate this discussion in relation to views on the meanings of concepts. I argue, in good company, that concepts have no fixed meaning. They are never exogenous to (outside of) social and political practices. Therefore, we need to examine carefully specific uses of terms, including "discourse", "reflexivity", and our topics today, "framing" and "problem definition". It is important to approach such theoretical languages as part of a terrain that needs to be mapped – see if you can identify something of the history of various usages (see Bacchi 2009) and try to ascertain the particular role or function served by the concept/s under investigation. That is, consider the meanings of concepts *in terms of the specific projects to which they are attached.* Following this thinking, you ought not to be surprised to see that "framing" and "problem definition" appear in many different theoretical projects, and with contrasting meanings.

In the main, "frames" are used by scholars who are interested in how social actors manage political arguments. Hence, in the main, they are interpretivists (see Bacchi 2015). As an illustration of this perspective, in the 1970s and 1980s an important group of American political scientists advocated training policy advocates in the skills of "framing" and "problem definition" (e.g. rhetoric). Dery (1984), for example, dedicates an entire book to "problem definition," which in his view requires political scientists to be concerned "with the production of administratively workable and politically realistic ideas for solving social problems" (p. 38). A later development, within sociology, focuses on what is referred to as "strategic framing", the marshaling of particular "problem definitions" to gain political support (see Bacchi 2009).

In these approaches "problem definitions" and "frames" become competing *interpretations* of an *issue* or *problem*, interpretations mounted by diverse social actors. By contrast, a WPR analysis interrogates how "problems" are *conceptualised* within *policy texts*. It starts from proposals within policies to see how they represent the "problem", rather than examining how specific social actors mount their arguments. These contrasting starting points are tied to deep disagreements about the status of the political subject

and the meaning of power, and have implications for political agendas (see Bacchi 2015).

A more recent development in health sociology draws on "discourse analysis" to examine how "problems" are conceptualized (or "framed") *within* policy documents, suggesting a closer link with WPR than previous usages of frame theory (Bacchi 2016). However, the authors associated with this development locate themselves within "the linguistic turn", whereas WPR offers a study of knowledges rather than of language use (see Bacchi and Bonham, 2014). The primary target of these frame theorists is the rhetorical distance between descriptions of "problems" within policies on the one hand and "recommendations" for change on the other hand, which are judged to be limited or disappointing. By contrast, in WPR, the target of analysis is not the rhetorical ploys of governments judged to be reluctant to deliver substantive change, but deep-seated "unexamined ways of thinking" (Foucault,1981/1994, p. 456) that underpin specific policy proposals and shape "problems" as particular kinds of problems.

There is no doubt that the word "frame" is a useful term. At a very general level it means simply the shape or configuration of an argument or stance. For this reason I have occasionally used the term myself – though I now resist doing so to avoid confusion between WPR and frame theory. The emphasis on "problem representations" in WPR, as opposed to "problem definitions", indicates the commitment to subject existing policies to critical interrogation.

I was reminded recently that no concept is "sacred" in some research I have been conducting on Herbert Simon, who wrote in the 1940s and 1950s primarily on administrative behaviour and decision-making (Bacchi 1999: 22-23). In later work Simon uses the concepts of framing and indeed "problem representations" (how disconcerting!). A closer look (Simon 1978: 275-276) clarified Simon's usage of "problem representation".  For Simon a "particular subject *represents* a task in order to work on it" and the "relative ease of solving a problem will depend on how successful the solver has been in *representing* critical features of the task environment in his problem space" (emphasis added). The focus in Simon's perspective, therefore, is on social actors and their relative ability to produce "successful" representations – those that assist in "solving problems". There is no interest in probing critically how "problems" are *produced* as particular sorts of problems. I hope the distance from WPR is clear, despite the overlap in theoretical terminology!

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Bacchi, C. (2009). "The issue of intentionality in frame theory: The need for reflexive framing," in E. Lombardo, P. Meier and M. Verloo (Eds.) (2009) *The Discursive Politics of Gender Equality: Stretching, bending and*

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