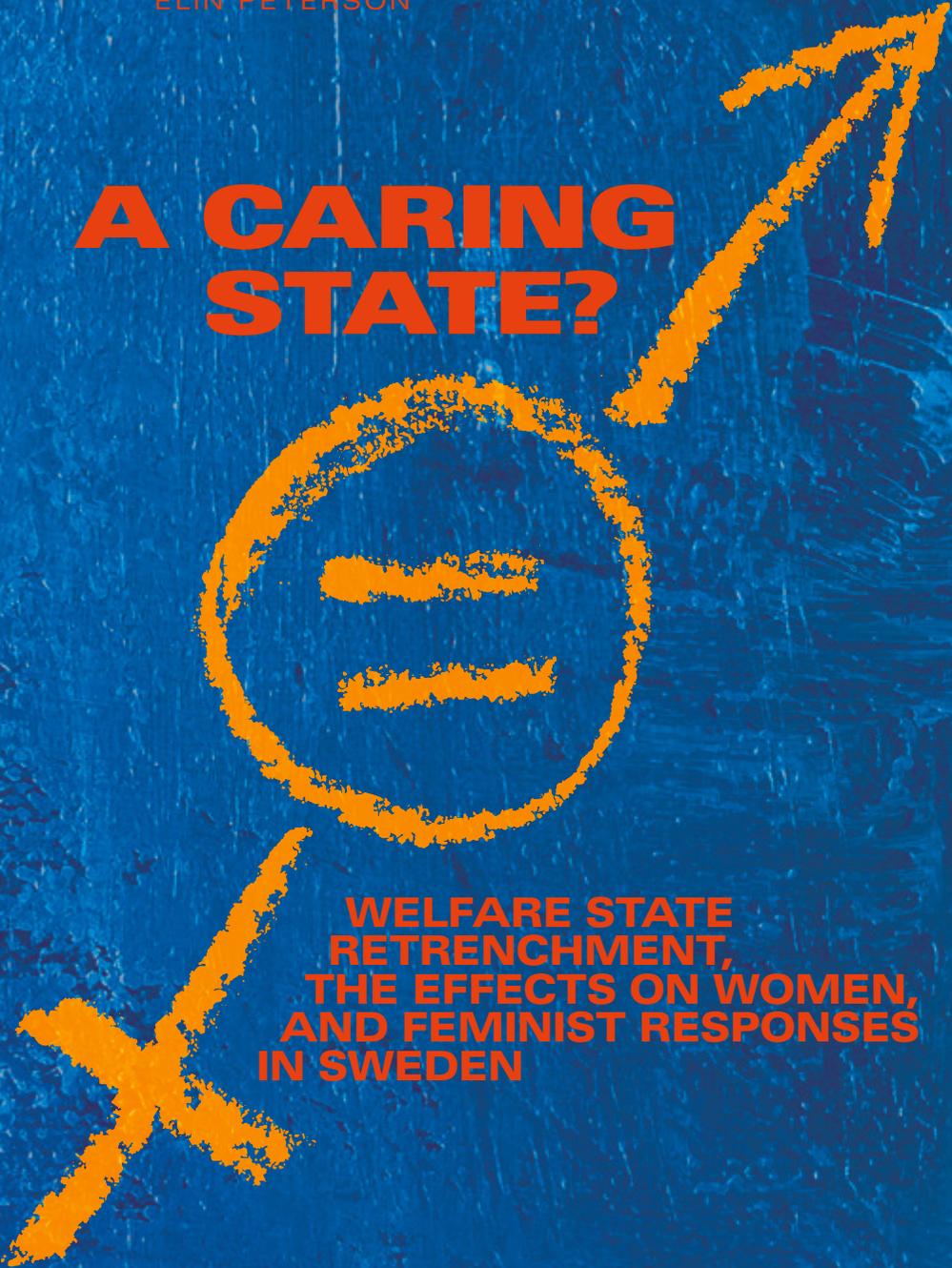


**ROSA LUXEMBURG STIFTUNG**  
BRUSSELS OFFICE

ELIN PETERSON

# **A CARING STATE?**



**WELFARE STATE  
RETRENCHMENT,  
THE EFFECTS ON WOMEN,  
AND FEMINIST RESPONSES  
IN SWEDEN**

EN

# ELIN PETERSON

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# PREFACE

Ask just about anyone pretty much anywhere in Europe which country they consider the most gender-equal or “women-friendly” one, and there’s a very good chance they will say it is Sweden. Governments of different political leanings in Sweden have successfully framed the country as a feminist state, so much so that “state feminism” has become not only a figurehead in Swedish domestic politics, but also in its international image.

Sure enough, Sweden has been at the forefront of countries introducing progressive family and social policies since the 1970s, in particular benefitting families with small children and granting heterosexual mothers freedoms unknown elsewhere back then. Women’s political and workforce representation in Sweden (alongside the country’s Nordic neighbours) has long been unparalleled. The ensuing romanticisation of the Swedish welfare system and its positive effects on gender equality persists until this day. However, this is notwithstanding the substantial dismantling of the welfare state in recent decades in the country and Sweden’s drop in gender equality rankings.

The present study sets the record straight on this idealised image. It provides a comprehensive analysis of Sweden’s care policies and their effects. Elin Peterson goes far beyond discussing childcare and parental leave policies, which are indeed comparatively generous, or the gender pay gap, around which “liberal feminism” builds its agenda. The author sheds light on the intersecting inequalities experienced by, among other groups, working daughters caring for their parents, migrant women, and domestic workers. Owing to both sectoral and occupational segregation of the labour market, and the persistent gendered division of reproductive and care work, women are particularly at risk of being negatively affected by the ongoing transformation of the Swedish welfare state.

Irrespective of differences in timing and context, the effects are very similar to those seen in other European countries, as a related series of Rosa-Luxemburg-Stiftung publications on “Austerity, Gender Inequality and Feminism after the Crisis” demonstrates ([www.rosalux.eu/austerity-studies](http://www.rosalux.eu/austerity-studies)). From Ireland to Croatia, from Poland to Spain, governments pursued politics of austerity in response to the economic crisis of the late 2000s. In contrast, Sweden’s welfare retrenchment and marketisation reflect a long-term policy response to the earlier recessions of the 1990s and 2000s.

By embedding her analysis in the political context of neoliberal reforms against the backdrop of shifting discourses, the author offers particularly interesting insights. Marketisation, she demonstrates, has permeated political thinking about care in most areas. Neoliberal concepts of individual choice for caregivers as well as those cared for, economisation of care, and care entrepreneurship prevail, superseding a rights-based approach. Crucially, this has left women shouldering the ever growing load of paid and unpaid care needs.

The analysis shows how this affects the entire social system, such as with the creation of a market for low-skilled labour, undermining the universalism of earlier policies and successfully reframing equality from a neoliberal perspective. Ever since the Social Democrats laid the foundation, nearly all political parties - bar the Left Party - have taken the same line.

However, not all is doom and gloom in the present study. The author deserves great credit for her portrayal of feminist actors, potential allies and political agendas, framed in feminist terms. The feminist agency vis-à-vis the state is based variously on working within the state (e.g. framing that is in line with state feminist goals), with the state (for instance through the salience that feminist agendas have at times acquired in tripartite negotiations), or from outside the state (for example, through pressure from below). It appears, then, that the legacy of the early institutionalisation of “state feminism” still offers entry points for feminist agendas.

This publication offers more than just an analysis of the status quo and it goes beyond the case of Sweden. The author combines policy analysis and the mapping out of feminist resistance with recommendations for the development of specific political, social and economic measures. Thereby, this study contributes to the exchange of experience and discussions across political contexts among activists and decision-makers.

One of the key takeaways from the study is that the previously institution-alised feminist agendas could uphold normative underpinnings of equality in care and thereby protect specific areas of welfare from retrenchment. The author emphasises the importance of engaging with existing and shifting discourses to reverse the liberal reinterpretations of equality, universalism, and sustainable care. Finally, it becomes very clear how important it is to work together among and across movements and to build alliances in order to address intersecting inequalities comprehensively.

With this publication, we at the Rosa-Luxemburg-Stiftung Brussels aim to support left-wing and feminist actors and policy-makers to do just this.

Ada Regelmann,  
Rosa-Luxemburg-Stiftung Brussels Office

# INTRODUCTION

From an international perspective, the Nordic model can easily be seen as an ideal welfare state. Additionally, more than any other welfare state model, the Nordic model is not just a label applied by welfare state analysts; it has also been used with pride by Nordic governments and citizens (Lister 2009). The striving for equality and the high degree of universalism have been regarded as proof of the superiority of the Nordic model (Anttonen 2002). The concept of universalism is associated with the development of comprehensive social insurance schemes and general access to education and healthcare (Anttonen et al. 2012). Another central aspect of Nordic universalism is the development of comprehensive publicly funded, mainly publicly provided, high-quality care services available to, and used by, citizens of all social groups (Vabø / Szebehely 2012).

In Sweden, the idea of universal service provision was brought into the public political discourse at the beginning of the 20th century. The Social Democratic Party (*Sveriges Socialdemokratiska Arbetareparti*, SAP) was the main force behind social reforms (Anttonen 2005). With the expansion of the welfare state, care services became a citizen right, closely connected to the promotion of both class solidarity and gender equality. Care was effectively transformed from a private matter for families to a public matter for the state. Further, the process of de-familialisation facilitated the reconciliation of employment and care and increased women's economic independence (e.g. Ulmanen 2017a). This development towards universalism explains why the Swedish – and Nordic – welfare state has come to be defined as “caring” (Leira / Saraceno 2006; Daly 2001) and “women-friendly” (Hernes 1987).

Policy reforms and welfare state retrenchment in recent decades challenge these ideas. Overall, there has been a shift in care policies, away from egalitarian ideals and towards a focus on freedom of choice (Peterson / Brodin 2021). The process of care “going public” has to a certain extent been reversed by welfare state cutbacks. For example, a process of re-familialisation is evident in care for older people and privately funded help has increased among more affluent older adults (Ulmanen / Szebehely 2015).

The Swedish welfare state has indeed gone through far-reaching changes inspired by the global wave of New Public Management (NPM), which has strongly reshaped the organisation and provision of care. In order to increase efficiency and productivity, market-inspired logics have been introduced and public organisations have become more businesslike. In this vein, there has been an increasing reliance on the market and a focus on competition between public and private providers (Szebehely / Trydegård 2012). Care work in the eldercare sector has become increasingly governed by detailed regulations, and control has been strengthened. Coinciding with retrenchment, this has resulted in increased workloads, work intensity and stress among care workers (e.g. Stranz / Szebehely 2018). Such problems have intensified with the outbreak of the COVID-19 pandemic. Women are particularly affected by the changing conditions of care work since care work is a female-dominated occupation, in Sweden as in other countries. Overall, these developments in the Swedish welfare state shape women's lives, as users of care services, unpaid family carers and paid care workers.

The changes in care-related policies and practices have occurred in a context of increasing economic inequalities. Although starting from an initially low level, economic inequality has increased faster in Sweden than in most countries (SOU 2020). Income distribution has gone back to the levels of the 1940s, and wealth distribution has worsened even more, resulting in the most uneven pattern in Western Europe. The pension system has produced a higher degree of relative poverty among Swedish pensioners than the EU average (Therborn 2018), and the differences in relative poverty between older women and older men are among the greatest in the OECD. In addition, the foreign-born and the oldest-old are particularly vulnerable to poverty (NBHW 2020a).

While inequalities are increasing, important shifts have occurred in the perception of social rights and paid work. Like the other Nordic countries, Sweden has historically been highly work-oriented, but the workfare element of the Swedish welfare state has become stronger. This has resulted in "an increased requirement to take up wage labour at whatever pay is offered" (Hort 2014, quoted in Nordberg 2019: 56). Neoliberal

discourses have legitimised a shift in focus from citizen rights to citizens' obligations (Dahlstedt / Neergaard 2019). Additionally, a cost discourse has become prevalent in social policy (e.g. disability care policy), focusing on what can be afforded rather than on social rights (Norberg 2019). The growing inequalities, the focus on citizens' obligations and the cost discourse shape the lives of many women in vulnerable positions, for example those in precarious work or unemployment, living with disability or affected by illness.

Without a doubt, the Swedish welfare state has many strengths, and women and men generally benefit from universal services and citizen rights. Nevertheless, the idea of Sweden as a women-friendly and caring welfare state can be, and has been, questioned. When we take intersecting inequalities and vulnerability as the starting point, the harmful effects of welfare reforms and retrenchment become especially visible. Following from this, the present report adopts a critical approach as it examines welfare state change and the effects on women and gender equality in Sweden.

# OUTLINE

This report deals with welfare state reforms and retrenchment in Sweden, the effects on women and gender equality, as well as feminist responses. The gender perspective adopted pays attention to intersecting inequalities and vulnerability in different contexts and in relation to different welfare issues. The critical importance of the distribution, organisation and valuation of care for women's lives and gender equality motivates the focus on changes in care policies and practices, including care for children, older people and people with disabilities, paying attention to paid as well as unpaid care and domestic work.

In the **first** part of this report, I provide a brief introduction to the political context and the shift away from a focus on equality.

The **second** part outlines key reforms and developments in relation to care. It shows how certain areas have been prioritised over others and how local austerity measures have affected care services. It also highlights driving actors and discourses underpinning policy change.

The **third** part delineates how welfare state change and retrenchment have shaped paid and unpaid care, focusing on the working conditions in paid care work, women's care entrepreneurship, re-familialisation and the growth of the domestic service sector. Care policies and practices are interconnected with the traditional welfare areas of employment and income security.

The **fourth** part of the report describes how paid work, wages and pensions are gendered, pointing at persisting inequalities and gender segregation in the labour market. Immigration is here linked to problems of income insecurity and poverty.

The **fifth** part focuses on feminist agendas and responses to welfare retrenchment. I first describe the role of feminists in the state. I then outline current feminist agendas and resistance to welfare state retrenchment and NPM-inspired reforms, focusing on struggles articulated surrounding work and care. Key actors, issues and debates are identified and discussed. The debates regarding gender-based violence are also briefly discussed, since this problem has become a central issue on the feminist agenda and in gender equality policies.

The **sixth** part concludes with ideas for advancing feminist and “caring” futures, including potential feminist allies and recommendations for left actors.



# **THE POLITICAL CONTEXT**

Universalism and the striving for social equality is historically associated with post-war social-democratic politics. For a long time, the SAP was the most successful of all the world's labour and social-democratic parties. Between 1932 and 1988, it won over 40 percent of the votes in every election, compared with 28 percent in the 2018 election. The SAP governed Sweden from 1932 to 1976, and then again from 1982–91, 1994–2006 and from 2014. The SAP governments of 1932–76 carried out far-reaching social reforms that promoted social equality. Overall, Sweden moved towards full employment, a prosperous, open and internationally competitive economy, a generous welfare state and a largely egalitarian society. By 1980, Sweden had the lowest rates of income and gender inequality in the world (Therborn 2018).

Nonetheless, while the Swedish welfare state was indeed successful in generating social equality, especially seen from an international perspective, it is important to recognise that inequalities related to gender, class, ethnicity, etc. have always existed, even in the “golden years” of welfare state expansion (see, for example, Lundqvist / Roman 2008). In addition, social and economic inequalities began to increase again as Sweden turned towards neoliberal economics. In the 1980s, the SAP started prioritising marketisation and inflation control, and deregulated Sweden's credit and capital markets. The financial crisis at the beginning of the 1990s ended the period of full employment. Both SAP and centre-right governments have been part of promoting privatisation, marketisation and NPM in the last three decades (Meagher / Szebehely 2019; Therborn 2018). In this vein, Therborn states that: “The bourgeois [centre-right] and SAP-led coalitions that have alternated in power since 1991 have operated as relay runners in the promotion of inequality and profiteering” (Therborn 2018: 8).

*Forbes* magazine affirms that Sweden has achieved a top position on the list of Best Countries for Business, coming second after the UK and before Hong Kong (Forbes 2019). Meanwhile, wealth inequality has increased, resulting in the most uneven pattern in Western Europe, similar to those of Brazil, South Africa or the USA. Whereas Sweden's top one percent owned 18 percent of all household wealth in 2002, this figure had rocketed to 42 percent by 2017. Additionally, income distribution has gone back to

the levels of the 1940s (Therborn 2018). Overall, economic inequality has increased faster in Sweden than in most countries (SOU 2020).

The centre-right governments in power in 1991–94 and 2006–14 were not particularly concerned about the growth of social inequalities. Under these governments, policymakers cut business taxes, abolished the property tax altogether, restricted access to unemployment and sickness benefits, promoted further marketisation of social and health care services, facilitated the entry of private for-profit companies into the welfare sector, and introduced a tax credit on domestic services. Despite a change back to the SAP in 2014, the trend of increasing inequalities has not been reversed.

A minority left coalition took over after the centre-right Alliance in 2014, and after the 2018 election, the SAP and the Greens formed a government reliant on the support of two market-liberal parties: the Centre Party and the Liberals. This arrangement was considered by the centre-left as an important step to keep out of government a centre-right coalition (comprising the two liberal parties with the conservative Moderate Party and the Christian Democrats) that would have relied on the support of the extreme-right Sweden Democrats. The January Agreement negotiated between the Social Democrats, the Green Party, the Liberals and the Centre Party set out the terms of the new government. Under this arrangement, the SAP-Green coalition agreed to carry out several market-liberal reforms, while also excluding the Left Party from political influence. Given the alternative, the Left Party accepted the new government as long as the reforms did not involve their key concerns regarding the labour market and the rental market.

A government crisis occurred in June 2021, when the Left Party withdrew its support because of the government's policy proposal on market rents. Prime Minister Stefan Löfven lost the vote of no confidence, but as the centre-right failed to mobilise sufficient support, an SAP-led government was formed, this time without the support of the Liberals. After Prime Minister Stefan Löfven's resignation in November 2021, former Minister of Finance Magdalena Andersson was elected Prime Minister - the first

female PM in the history of Sweden. Since the Green Party has left the government coalition, Andersson is currently leading a minority government with only Social-Democratic Ministers.

Figure 1 presents the political representation in the Swedish Parliament (Riksdag) 2018-22, with 349 Members of Parliament (MPs).

### POLITICAL REPRESENTATION IN THE SWEDISH RIKSDAG 2018-22

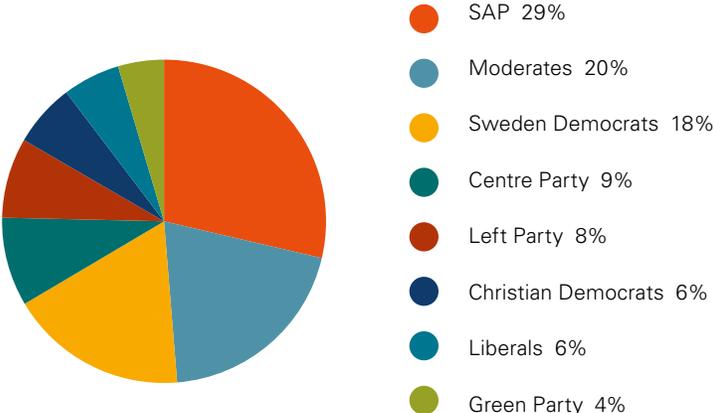


Figure 1, Source: Swedish Parliament (n.d.).

In recent years, the Left Party has acted as a left social-democratic force and has mobilised growing support, commanding 8 percent of the vote in the last election and higher levels of support in the bigger cities. At the same time, the weakening of the SAP and the social-democratic project has coincided with the rise of the Sweden Democrats. This extreme-right nationalist party has mobilised great support in recent years, accounting for 18 percent of MPs in the last election. The party has strongly promoted the narrative that Sweden is a society threatened by immigration. Surveys show that citizens today consider immigration and integration to be among the most urgent problems facing Swedish society (Novus 2020).

Law and order also features high on the list of most important issues, and such matters are often associated with immigration in political debates, particularly among right-wing political actors. The Sweden Democrats have also addressed welfare issues, claiming for example that resources for Swedish pensioners are inadequate because of the money allocated to immigrants, particularly refugees.

There can be no doubt that the developments towards a more unequal society question the idea of equality as a political priority in Sweden. At the same time, reports show that citizens consider social welfare as a key political question, with issues such as healthcare, education, eldercare, pensions and social protection all figuring on the top-ten list (Novus 2020). In the context of the ongoing pandemic, it is not surprising that healthcare and eldercare are currently perceived as burning issues. While social welfare issues have been utilised by the far right, these questions primarily mobilise feminists and left actors striving for equality, as we will see in the part on feminist agendas and resistance to welfare state retrenchment.



**CARE POLICIES:  
PRIORITIES, REFORMS  
AND RETRENCHMENT**

# CHILDCARE – UNIVERSAL RIGHTS, UNEQUAL PRACTICES

## **PARENTAL BENEFITS**

Parental benefits and the expansion of public childcare are central aspects of the Swedish earner-carer model, where both women and men are earners and carers. The discourse on shared parenthood emerged strongly in the 1970s, attributing responsibility to both mothers and fathers in caring for children (Lundqvist / Roman 2008).

In 1974, maternity leave was replaced by a gender-neutral earnings-related parental leave. This parental leave could be shared between the parents as they saw fit. However, the introduction of the gender-neutral parental leave did not significantly change the distribution of caregiving between mothers and fathers. In order to advance gender equality, one “daddy month” was introduced in 1994, a second in 2002 and a third in 2016 (Duvander / Ferrarini 2013). Consequently, each parent has a three-month, non-transferable right to parental leave. If one parent does not take the earmarked months of parental leave, these months cannot be used by the other parent.

The parental leave has gradually been extended and today the total leave period is 16 months. An earnings-related benefit covers 13 months, paid at 80 percent of previous gross income. The remaining three months are covered by a minimum-level flat-rate benefit. Parents also have the right to leave of absence without pay up to a maximum of 25 percent of working hours. Additionally, parents are entitled to an income-related temporal parental leave offered to care for a sick child under the age of 12 up to 60 days per year (Ulmanen 2017a). This right has played a key role during the COVID-19 pandemic. The benefit was extended to parents whose children stayed at home due to local school/preschool closures or quarantine. Teleworking parents are allowed to use the benefit if they do not combine caring with paid work during the benefit days.

While there are equal rights, sharing is still unequal. Women continue to take the majority of parental benefit days, but men's use has increased since the introduction of the gender-neutral parental leave. The daddy months have had an effect. Men took an average of 0.5 percent of the parental benefit in 1974, 20 percent in 2006 (Swedish Social Insurance Agency 2020a) and 30 percent in 2019 (Statistics Sweden 2020). When it comes to the temporary parental benefit for the care of sick children, paid at the same level as parental leave, mothers also dominate in the use of benefit days. In 2019, 61 percent of the benefit days were taken by women and 39 percent by men (ibid.).

The majority of parents meet the requirement of having worked for 240 days before going on parental leave and can therefore claim earnings-related benefits (Duvander / Ferrarini 2013). Parents who do not meet the requirement receive a low flat-rate benefit of SEK 250 (approx. €25) per day (Swedish Social Insurance Agency 2020b). On average, men receive considerably higher benefits per day than women. Among some groups of women, the share receiving benefits at flat rate is particularly high. These include groups of immigrant women with low employment rates and high poverty risks (Duvander / Ferrarini 2013). For instance, among immigrant mothers born in Sub-Saharan Africa, two thirds receive the flat-rate amount. A reform recently limited the parental benefit for parents who migrate to Sweden with children. The main reasons cited were migrant women's risk of exclusion due to long parental leaves, and the importance of a more rapid establishment in the Swedish labour market (SOU 2016). Hence, while Sweden has moved towards equal sharing between women and men, vulnerable groups of women are not able to use the more generous, income-based parental leaves.

Citing freedom of choice as a central argument, a centre-right government introduced a flat-rate care allowance for parents in 2008. The parties on the left were critical, arguing that it reinforced gender inequality, and subsequently abolished the reform in 2016. Nevertheless, the allowance is one example of how the right-wing parties have pushed for a family policy framed in terms of choice rather than gender equality (Duvander / Ferrarini 2013; Ulmanen 2017a).

## **PUBLIC TAX-FUNDED CHILDCARE**

Public tax-funded childcare has been expanding in Sweden for decades. Childcare became an important issue on the political agenda in the 1970s, and since then the trend has been towards increasing universalism (Ulmanen 2017a). Before the 1970s, few children were eligible for publicly funded childcare, but since 1995, all municipalities are required to provide full-time childcare to all children aged one to 12. At first, the guarantee included children whose parents were working or studying. It was later extended to include part-time care for children with unemployed parents and with parents on parental leave with a younger sibling (ibid.). As a result, the proportion of children in childcare increased and the differences in access between social groups decreased (Szebehely 2005). Another reform that promoted universalism in childcare was that of maximum fees, introduced in 2002 (Ulmanen 2017a). This meant that a cap was set on user fees at the national level. The childcare fee is income-related, but currently the maximum fee for full-time care is SEK 1,425 (approx. €143) for one child per month.

Swedish childcare include preschool centres (previously called daycare) for children aged one to five, and after-school centres for children aged six to 12. Just over 85 percent of children aged one to five are enrolled in preschool, with the highest level of participation among four- and five-year-olds. In these age groups, the preschool attendance rate is 95 percent of children (SNAE 2020). While there is an increasing variety in the forms of childcare, including cooperatives and private for-profit preschool centres, these are all publicly funded and follow centrally set curricula (Duvander / Ferrarini 2013). Moreover, several reforms have increased the pedagogical ambitions of preschool centres, with a focus on “educare”, i.e. combined education and childcare (Ulmanen 2017a). Currently, 69 percent of the staff have relevant professional training, such as a university education in teaching and learning or an upper-secondary education in working with children (SNAE 2020).

Welfare state retrenchment has led to reduced childcare financing but the cuts have not resulted in a reduction of the number of children in public childcare. Nevertheless, during the economic crisis of the 1990s, austerity measures implied a deterioration in the quality of care, particularly in terms of staff/child ratio. This development has had a more long-term effect on after-school centres than on preschool centres (Ulmanen 2017a).

Overall, there is broad political consensus on the need for universal, tax-funded, good-quality childcare. A variety of different discourses have legitimised a strong universalism in childcare services. As shown by Ulmanen (2017a), the gender equality discourse has strongly emphasised the importance of universal childcare for working mothers, facilitating the combining of employment and care. However, as Duvander and Ferrarini (2013) underline, the most consistent aim of Swedish family policy over time has been to encourage employment more generally. The idea that childcare is in the best interest of the child has also been central for promoting the extension of childcare. From this perspective, childcare is a democratic right of the child and the combination of educational activities and care promotes child development (Szebehely 1998). Another argument has focused on social equality, stressing that childcare promotes welfare and tackles inequalities between children with different socio-economic and ethnic backgrounds (Björnberg 2002). The discourses that link childcare to employment, gender equality and children's rights and well-being most likely account for the limited retrenchment in childcare. The same discourses may also explain why Sweden has not closed down childcare as a strategy in fighting the pandemic, as many other countries have.

# ELDERCARE – MARKET-ORIENTED REFORMS AND RETRENCHMENT

## UNIVERSAL CARE SERVICES

*The development of municipal home-care services in the early 1950s was an important step in the building of the Swedish welfare state.* The principle of home care was officially recognised in the 1957 policy guidelines on eldercare and the ageing-in-place policy still prevails. Certainly, the association of residential care with its legacy of stigmatised poor relief made home care a more attractive alternative. Further, home-care services represented an individualised alternative to the more standardised forms of care provided in old-age homes (Brodin 2005). Equality was a core value; the services were affordable for the poor and attractive enough to be preferred by the middle class. As a result, home care became a universal welfare service (Szebehely / Trydegård 2012). The golden years of the Swedish welfare state in the 1960s and 1970s saw a major expansion of social care services. By the 1980s, Sweden had achieved a well-developed system of tax-funded care services for older people (Meagher / Szebehely 2013). With the advent of universal, publicly funded care services, eldercare was no longer considered poor relief but a citizen right.

The Social Services Act, adopted in 1982 and amended various times since, guarantees all older people a general right to assistance. Care services should ensure users a “reasonable standard of living”. Swedish eldercare is governed through legislation, state subsidies and supervision at the national level and the regional county councils are responsible for hospital care and the bulk of healthcare. The municipalities are legally obliged to fund and provide social care services. The municipal councils adopt budgets, decide on taxes and establish eligibility criteria, goals and guidelines for needs assessment and user fees. Care managers appointed by the local authorities decide on the distribution of care services for older adults through needs assessment. About 85 percent

of eldercare expenditure comes from municipal tax (Szebehely / Trydegård 2012). Although local authorities decide on income-related user fees, there is a national maximum fee for care services, as in childcare. In 2020, the maximum fee was SEK 2,125 per month (approx. €213). It should be noted that users of residential care pay other costs such as rent and meals on top of this.

Since the adoption of the Social Services Act, Swedish eldercare has gone through significant changes. Two trends stand out: the marketisation of care and retrenchment.

## **MARKETISATION OF CARE**

The marketisation of care has been an intended transformation in Swedish eldercare. Various political reforms have been adopted to this end. The 1992 Local Government Act introduced the option of splitting between purchaser and provider, which made it possible for municipalities to outsource the provision of tax-funded services to non-governmental actors, both for-profit and non-profit. This development was strengthened by the Public Procurement Act (LOU), introduced in 1992 and amended in 2007. The LOU regulates the process of outsourcing through competitive tendering, in line with EU legislation.

The latest in a series of policy reforms that support marketisation of publicly funded eldercare services is the Freedom of Choice System Act (LOV), adopted in 2009. The LOV regulates the conditions that apply when a municipality decides to introduce “customer choice”, that is, to allow older persons to choose their provider of care services (i.e. the organisation, not the care worker) from a list of approved providers (Erlandsson et al. 2013). Choice systems are more common in home care than for nursing homes. Currently, 160 out of 290 Swedish municipalities have implemented choice in publicly funded home care (SKR 2020).

Marketisation and choice policies have been situated within the context of NPM, the global reform agenda that promotes the incorporation of market ideas and practices in the organisation and delivery of public services. Poli-

cies promoting market principles and private providers in eldercare have drawn on arguments about empowering users, improving quality and offering more diverse forms of care. It was anticipated that the customer choice model, which allows older adults to choose their care provider and change their provider if not satisfied, would strengthen user voice and improve service quality through competition. The choice reform was an attempt to make it easier for small care providers, in particular, to enter the care market, in a context where large corporations had dominated private provision. In addition, choice systems have been promoted as a way to adapt to ethnic diversity among the older population, enabling care companies with specific linguistic and cultural profiles to enter the market (Brodin 2017a). Finally, the reform was expected to increase gender equality in the labour market as women would be encouraged to become “care entrepreneurs” (Brodin / Peterson 2019, 2020).

There have been salient changes in the Swedish welfare provider mix since the turn of the millennium as private welfare provision has increased strongly, particularly for-profit. The non-profit share of paid employees in social services has been small but constant, at about 3 percent, while the for-profit share increased from 15 to 25 percent between 2007 and 2013 (Sivesind 2017). There is great local variation, however. In the case of home care, private provision accounts for 59 percent of service hours in the municipality of Stockholm, compared with 23 percent in the country as a whole (NBHW 2019a). Despite the intentions of the choice reform, big companies continue to dominate the home-care market, while small care companies often have a hard time surviving the harsh competition (Brodin / Peterson 2018). As for nursing homes, large international corporations increasingly dominate the market. In 2015, 13.5 percent of all beds were provided by the five largest chains. These chains are also active in other welfare areas, such as healthcare and disability services (Harrington et al. 2017).

The choice reform was formulated, adopted and promoted during a period of centre-right governments (2006–2014). The left-wing parties were critical, but coalition governments of Social Democrats and Greens, in power since 2014, have not made any major reforms. Additionally, the

SAP has only weakly contested the expansion of for-profit care providers, which also occurred when the Social Democrats were in power (Meagher / Szebehely 2019). For-profit eldercare provision received attention in the political debates on possible caps on profits in the welfare sector. Criticism of profits was fuelled by a media scandal revealing mistreatment in nursing homes belonging to a large private corporation (Lloyd et al. 2014). A government commission was set up in 2015 to investigate a possible regulation of profits in the welfare sector, but policy proposals in this direction have not been successful.

## **RETRENCHMENT**

The care needs of the older population have grown faster than the resources allocated to eldercare. This is reflected in the lack of places in nursing homes and relatively fewer hours of home-care services. The proportion of older people receiving home care or residential care increased significantly between 1960 and 1980, but has since declined sharply. In 1980, 62 percent of the over-80s received home care or residential care. Today, this has fallen to 34 percent (Szebehely 2020). Residential care in particular has undergone retrenchment. Between 2000 and 2012, a quarter of residential care beds disappeared (Ulmanen / Szebehely 2015). Home-care services have not been able to make up for this trend. Currently, 8 percent of the over-65s and 22 percent of those aged over 80 receive home-care services (NBHW 2019b), compared with 16 and 34 percent respectively in 1980 (Szebehely / Trydegård 2012). Figure 2 illustrates how the coverage in care services for older people has changed over time in Sweden.

## PERCENTAGE OF POPULATION AGED 80+ RECEIVING CARE SERVICES

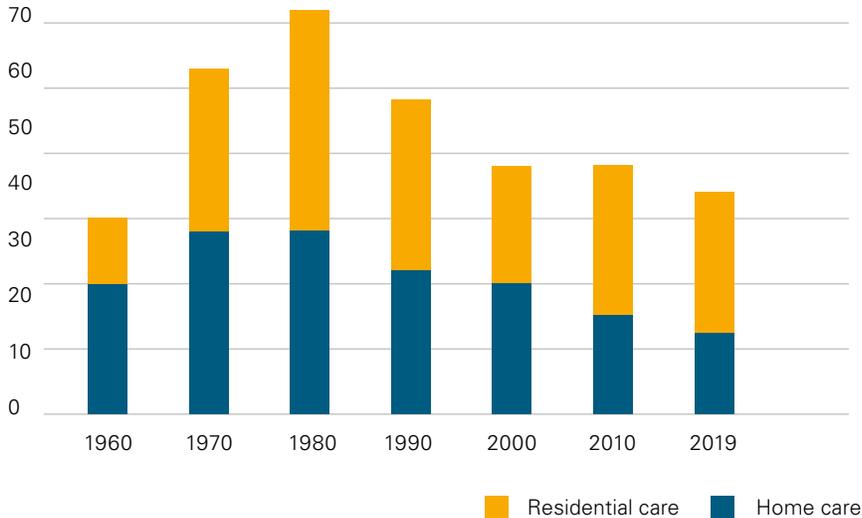


Figure 2. Source: Szebehely 2020, p. 60.

Declining coverage is a consequence of increased targeting of those with the greatest care needs. A smaller proportion of older people receive more intensive care in their homes, and even severely ill older adults receive home care instead of assistance in a nursing home (Brodin 2017). Since users of home care have more complex care needs, they often require health care in the home as well (NBHW 2020a). Cutbacks in eldercare have gendered implications given that women more often need care services. Among women aged 80+, 20 percent received residential care and 36 percent received home care in 2018, compared with 13 and 27 percent of men respectively (SCB 2020).

These changes in Swedish eldercare are not the result of any national reforms aimed at reducing coverage. Since 1990, expenditure on eldercare has been declining, relative to the proportion of older people in the population (Meagher et al. 2016). The de-universalisation is an effect of austerity measures implemented at the local level.

There is a tension between the principle of universalism and equality set out in national legislation and that of local self-determination. The Social Services Act is a goal-oriented framework law and does not confer specific rights. Municipalities are often restrained by predominant cost concerns and the principle of local self-government gives municipalities extensive freedom to interpret older people's needs and the meaning of "reasonable standard of living". Local politicians and senior managers often accentuate the need to stick to the municipal budget and restrictive eligibility guidelines. In addition, local politicians have to prioritise between different welfare areas, and strengthened legal rights in childcare and disability care are liable to have contributed to a lower priority given to older people's care needs (Szebehely / Trydegård 2012).

While declining coverage has not been an explicit goal or intended change, the question of sustainable financing of welfare services has persistently appeared on the political agenda. This discourse legitimises retrenchment in care services. Advocates of increased private funding in eldercare highlight that the quantity and quality of eldercare will have to increase in the future, but tax revenues cannot (Meagher / Szebehely 2010). Private funding can rise through, for example, increased user fees, private insurance or the consumption of private domestic services. Various influential stakeholders, including both public organisations and private-sector actors, have presented arguments for increased private funding. One example is the Swedish Association of Local Authorities and Regions (SALAR), a politically controlled employer organisation for municipalities and county councils, and a key actor in eldercare. Support for solidaristic funding remains strong among left-wing actors. For example, Sweden's largest pensioner organisation, PRO, associated with left-wing political ideas, has been a strong critic of the idea of private funding (ibid.).

## **ELDERCARE AND THE COVID-19 PANDEMIC**

The outbreak of the pandemic brought eldercare to the top of the political agenda, as older people in residential care made up a large proportion of COVID-19-related deaths. A special Coronavirus Commission has been set up to investigate the effects of the pandemic on older people in need of care ([www.coronakommissionen.com](http://www.coronakommissionen.com)). Although it has not yet concluded its work, the Commission has underlined that Sweden's strategy for dealing with the pandemic has failed to protect older people.

The eldercare system was largely overlooked in the initial phase, in spite of the fact that people living in Swedish nursing homes are among the most vulnerable groups in society. As they need extensive close-contact care, they often meet many different care workers. Sweden is far from the only country where older people receiving care services have been severely affected. International organisations, including the World Health Organization (WHO), have stated that the pandemic has shed light on structural problems in eldercare worldwide. However, from a Nordic perspective, Sweden stands out. The pandemic has definitely shone a spotlight on structural and long-standing problems in the Swedish eldercare system, such as insufficient funding, problematic working conditions, the undervaluation of care work and the need for more qualified care workers (Szebehely 2020). The conditions of paid care work are discussed in part 3.

# DISABILITY SERVICES – STRENGTHENED RIGHTS VS RETRENCHMENT

## **STRENGTHENED RIGHTS FOR PEOPLE WITH DISABILITIES**

The most significant Swedish welfare reform for people with disabilities is the Disability Act of 1993. A centre-right government was in power at the time and Sweden was in the middle of a serious economic crisis. However, the disability rights movement had long pushed for reform. Actors who advocated for the recognition of people with learning disabilities were particularly influential. In addition, the Independent Living Movement, which advocated primarily for the rights of adults with extensive physical disabilities, was an important player (Meagher / Szebehely 2013).

The Disability Act encompasses the Act Concerning Support and Service for Persons with Certain Functional Impairments (LSS) and the Assistance Benefit Act (LASS). The legislation confers specific and absolute rights on persons with certain extensive functional impairments. Three groups are covered: (1) persons with a learning disability, autism or autism-like conditions, (2) persons with a significant and permanent intellectual impairment after brain damage in adulthood and (3) persons with other lasting physical or mental disabilities (not due to normal ageing) if these disabilities cause significant difficulties in daily life requiring extensive support (ibid.). The legal framework obliges local authorities to ensure that disabled persons have “good living conditions”. Disabled people who need extensive help with basic needs may be entitled to personal assistance. The state covers the municipality’s costs for assistance exceeding 20 hours per week (ibid.). People with disabilities who are not covered by the LSS may seek assistance under the Social Services Act.

In contrast to the Social Services Act, the Disability Act confers rights to services, not just the right to needs assessment and appeal. Given that the legal framework on disability clearly specifies who is entitled and what support they should receive, local authorities have less scope for interpretation than under the Social Services Act. The LSS has higher ambitions than the Social Services Act, as the norm is a “good” rather than “reasonable” standard of living (Erlandsson 2014). This difference has been reinforced since “reasonable standard of living” has come to be interpreted as a maximum level to be provided under the Social Services Act rather than a minimum (Szebehely / Trydegård 2014).

Services according to the LSS entail a strong focus on user influence and participation, and on enabling a life comparable to that of people without disability. Personal assistance is a form of care that aims to empower individuals to shape their own life situation and the help and support they receive. Users receive an allowance based on a set number of hours of help, as determined by a needs assessment. They can contract a personal assistant of their own choice, or contract the services from public or private (profit or non-profit) providers. In contrast to services under the Social Services Act, LSS services do not involve user fees (Erlandsson 2014).

Disability policies have been shaped by the normalisation discourse, emphasising that services should enable people with disabilities to lead a “normal” life, like anyone else. The idea of normalisation has been criticised, among other things, for focusing on the individual rather than structural conditions and for reinforcing gender stereotypes, but it has contributed to an emphasis on the right to equal participation and good living conditions. Perceptions of what is a normal life are linked to age. Younger people are expected to be active citizens, which legitimises the idea that support for them is more extensive than for older people (e.g. Erlandsson 2014; Järkestig Berggren et al. 2019).

## **RETRENCHMENT, BUREAUCRATISATION AND VULNERABILITY**

Services and resources directed to people with disabilities have expanded since the introduction of the Disability Act. The trend has therefore been quite different from the trend in eldercare. However, the fact that more and more people are receiving LSS interventions can partly be explained by the fact that the population is increasing. In the 0–6 age group, the proportion receiving LSS interventions has actually decreased in the last decade (NBHW 2020b). Furthermore, in 2017, the proportion of persons applying for personal assistance for the first time who were rejected for support was 85 percent, compared with 54 percent in 2011 (Järkestig Berggren et al. 2019). Remarkably, economic vulnerability is increasing among people with disabilities, a group with a high prevalence of long-term means-tested social assistance (NBHW 2020b).

While the legal framework on disability remains strong, retrenchment has occurred through an increased bureaucratisation of disability-related services and benefits, and an increased reliance on medical assessments. The Swedish welfare state tends to conflate disability with illness, and eligibility criteria for disability-related social services and support have been increasingly medicalised (Norberg 2019). Retrenchment has not been related to any political reform, but retrenchment in personal assistance has been driven by individual cases in the courts (*ibid.*). Additionally, local authority officials implement austerity measures in needs assessments for personal assistance, prioritising cost-cutting goals (Järkestig Berggren et al. 2019).

Being a disabled person in Sweden entails having a close engagement with welfare bureaucracy. Norberg's (2019) qualitative study on the effects of austerity on people with disabilities shows that disabled people experience stigma, precariousness and discrimination, and that welfare bureaucracy has a significant impact on their lives. This is particularly the case for those who cannot access out-of-pocket resources in the private service market. Norberg argues that an important effect of austerity in disability services is increased bureaucratic power. At the same time, the

emerging cost discourse characterises disabled people as too costly for society and justifies the intensification of austerity measures.

Overall, studies have shown a gendered distribution of resources among people with disabilities. Compared with men, women are more likely to be unemployed, they live in more economically precarious conditions, experience more health problems and have more difficulties in accessing rehabilitation and advanced technical assistance (Hugemark / Roman 2007). In 2019, women constituted 40 percent of individuals granted LSS interventions (NBHW 2020). Gendered interactions between public-service workers and people with disabilities have been suggested as one explanation for why women generally access resources to a lesser degree than men do. For example, women may be expected to manage domestic work and care for small children by themselves, in spite of their impairments. Although access to welfare resources is gendered, what have traditionally been considered women's issues have not been high up on the agenda within the disability movement (Hugemark / Roman 2007).

## **SUMMARY**

The development of the Swedish welfare state varies across different care sectors. Universalism has been strengthened in childcare services, a development that has been legitimised by discourses that link childcare to employment, gender equality and children's rights and well-being.

By contrast, eldercare services have undergone a process of retrenchment and marketisation of care. Marketisation, supported by a discourse on freedom of choice, has involved a growing presence of private for-profit providers, including large corporations. While retrenchment has particularly affected residential care, home care has been impacted too since a smaller proportion of older people receive more intensive care in their homes, and even severely ill older adults receive home care.

No national reforms have aimed at reducing coverage; retrenchment is primarily an effect of economising at the local level. Additionally, the discourse on sustainable financing draws on the assumption that the eldercare system is unsustainable and promotes increased private funding as a solution in the context of an ageing population.

The Disability Act strengthened the rights of adults with certain extensive disabilities. Younger people are expected to be active citizens, which legitimises the idea that assistance is more extensive for them than for older people in need of help and support. Nevertheless, retrenchment has occurred through an increasing bureaucratisation and medicalisation of disability-related services and benefits. The cost discourse characterises disabled people as too costly for society and justifies cutbacks.

In summary, retrenchment in the Swedish welfare state has particularly affected users of eldercare but also users of disability services. We will now turn to the effects of welfare state change on women's paid and unpaid caregiving work.



**GENDERED CHANGES IN  
PAID AND UNPAID CARE**

# PAID CARE WORK IN ELDERCARE

## **CARE WORKERS: PREDOMINANTLY WOMEN AND IMMIGRANTS**

Worldwide, care work for older people is a highly feminised profession. Swedish eldercare is a strongly female-dominated sector, where nine out of 10 employees are women, although male workers have increased slightly in residential care in recent years (NBHW 2019). While care work is clearly gendered, it is also interconnected with migration/ethnicity. Swedish eldercare relies increasingly on foreign-born care workers. Currently, 32 percent of care workers (including assistant nurses and care aides) are foreign-born, of whom two thirds were born in Asia, Africa or Latin America (Statistics Sweden 2019). In Stockholm and other bigger cities, the proportion of foreign-born care workers is much higher than the national average. Given that recruiting and retaining qualified staff is a challenge, there have been several government and local initiatives to train and recruit recently arrived migrants to work in eldercare (Storm 2018).

## **THE CHANGING ORGANISATION OF CARE WORK**

The character and conditions of care work have changed over time, partly as a result of welfare state reforms, cutbacks and the reorganisation of service provision. When home care first emerged, care work for older people was not considered a profession. Work in home-care services was associated with the unpaid activities of housewives, hence the salary was considered pin money and no specific education or training was required (Szebehely 1995). It was also quite common to employ family members (Ulmanen 2013). Professionalisation of care work became a political issue in the 1980s, as a strategy to improve the status of workers and make it easier to recruit staff in the sector. Home-care workers gained more rights with the support of the Municipal Workers' Union (Kommunal).

Requirements on formal education in eldercare were part of a strategy to make the work more attractive. This generated a certain division of labour between the two types of care workers: assistant nurses and care aides (Szebehely 1995).

Sweden was the first of the Nordic countries to introduce NPM-inspired reforms in eldercare in the early 1990s. These reforms led to a focus on efficiency and productivity and entailed changes in the organisation of care services and day-to-day care work. In home care, there was a shift from a person-centred organisational model, in which care workers were responsible for a small number of users each, towards a Taylorised “assembly-line” model. In this model, a number of care workers jointly performed specific tasks for a larger number of clients (Szebehely 1995). With the outsourcing of care services to private providers, the distance between the assessment of needs and the provision of care increased. This change required increased detail in needs assessment, for example by connecting work tasks to a standardised time frame, such as 15 minutes for help to use the toilet or 30 minutes for a shower (Meagher et al. 2016).

The compensation paid to home-care providers is often linked to a digital time registration system, with home-care staff logging each visit in an app on their mobile phone (Brodin / Peterson 2018). Local authorities remain responsible for financing, assessing and meeting the needs of older people, even when services are outsourced to private providers. The marketisation of care has generated control systems and detailed regulations, which constitute ways for municipalities to monitor the outsourced care provision. Altogether, the development has limited job discretion and workers’ capacity to meet older people’s shifting needs (Vabø / Szebehely 2012).

Home-care services encompass a variety of tasks, ranging from personal care such as bathing, dressing and moving around, to household tasks like cleaning, shopping, laundry, cooking or delivering ready-made food. Emotional and social support are also an important aspect of care work. Basic medical tasks, such as handing out medicine, may be included as

well. With retrenchment, decreased coverage and increased targeting, a smaller proportion of older people receive more intensive care. Older people with great and complex care needs who previously would have lived in nursing homes now receive home care. Consequently, home care has changed from mainly entailing help with domestic tasks (e.g. cleaning) to involving significant help with personal care and tasks with nursing/medical components (ibid.).

## **CARE WORKERS' EXPERIENCES**

Care work has been shown to be one of the most demanding fields in the labour market, both physically and mentally. There is strong evidence that working conditions in eldercare have deteriorated over time in Sweden.

A survey study shows that the work situation of care workers worsened between 2005 and 2015 (Strandell 2020; Szebehely / Stranz / Strandell 2017). In 2015, home-care workers reported a heavier workload, more intensive work (e.g. more focused on personal hygiene) and an increased number of users per day. They also reported being more mentally exhausted than in 2005. The intensification of daily practice is reflected in the number of visits per day, the average being 15, with half of these lasting only 15 minutes or less. Care workers experienced reduced job autonomy and support, and an accumulation of work-related problems. The work also involved increased administrative tasks and documentation (Strandell 2020).

Likewise, the workload has increased significantly in nursing homes, and a greater proportion of workers felt physically and psychologically exhausted after a day's work in 2015. In both home care and nursing homes, a greater proportion of workers stated that there was a "shortage of staff practically every day" in 2015 (Szebehely / Stranz / Strandell 2017). As for nursing homes, there are some indications that private for-profit companies have lower numbers of employees per resident (Harrington et al. 2017).

Given this development in the conditions of care work, it may not come as a surprise that assistant nurses in home care and nursing homes are on sick leave on average twice as much as other employees (NBHW 2020a). In 2015, 46 percent of care workers in home care and 50 percent of workers in residential care reported having seriously thought of leaving the profession, and these thoughts were linked to the experience of problematic working conditions (Szebehely / Stranz / Strandell 2017). Without a doubt, retrenchment and NPM-inspired reforms have led to a deterioration in working conditions in this welfare area.

# WOMEN'S CARE ENTREPRENEURSHIP

Marketisation of care has been connected to gender equality. Policy-makers, and particularly centrist and right-wing politicians, were optimistic that outsourcing and opening up the market to small-scale care companies would advance entrepreneurship among women and immigrants. Policy reforms aimed to encourage women employed in health and social care to become care entrepreneurs.

While care for older people is an undervalued female-dominated occupation, supporting women's entrepreneurship was expected to raise the status of the eldercare sector and to increase gender equality in the labour market. As mentioned previously, introducing customer choice in home care has also been articulated as a way to adapt care services to ethnic and cultural diversity, facilitating the entry of small companies with specific linguistic and ethnic profiles.

While many women and foreign-born care entrepreneurs have indeed entered local home-care markets, there is little evidence that the policy reform has favoured women's small-scale business or contributed to gender equality. Home care is still dominated by a few large corporations and small-scale care companies face great difficulties surviving the competition (Erlandsson et al. 2013; Brodin / Peterson 2018).

Research on home-care entrepreneurship in Stockholm shows that women own and lead the majority of micro and small home-care companies, while men own and lead larger companies. At the same time, key actors in the field of eldercare, including policymakers and authority officials, tend to frame big care companies as "serious" business. By contrast, small-scale care entrepreneurship undertaken by women and immigrants is often perceived as second-rate. Research also indicates that women entrepreneurs experience unfavourable treatment by local authority officials compared with their male counterparts. Immigrant

women in particular reported that they met with distrust and were subjected to more checks than entrepreneurs born in Sweden. In short, gender and ethnic stereotypes tend to be reproduced as home-care entrepreneurs are evaluated based on their characteristics rather than on the care they deliver (Brodin / Peterson 2019, 2020).

# RE-FAMILIALISATION OF CARE

In Sweden, adult children are not legally obliged to provide care for, or economically support, their aged parents. Despite this fact, informal help from relatives and friends is common. From an international perspective, informal family care is still less intensive and more equally distributed in Sweden than in other welfare state models (Rodrigues / Huber / Lamura 2012). In Sweden, older people very seldom live in intergenerational households, not even those aged 80 and over (*ibid.*). Accordingly, informal care is most often provided by a cohabiting partner or non-cohabiting family members.

Retrenchment and declining coverage in eldercare has resulted in an increase in family care. As a consequence of the cutbacks in eldercare in the 2000s, informal family care increased in all social groups, and among both sons and daughters of older adults (Ulmanen / Szebehely 2015). When it comes to non-institutionalised older adults in need of practical support, help from family members and friends increased from 48 to 63 percent between 2003 and 2010. However, gender and class inequalities are a central aspect of this re-familialisation. Over time, family care has been more common among people with lower levels of education than among older people with higher education. By contrast, older people with higher levels of education tend to turn more often to the private service market for extra help (e.g. cleaning) than older people with lower levels of education. While informal family care is most common in the working class, the category of informal caregivers who have been most affected by the eldercare cutbacks is working-class daughters (*ibid.*).

Swedish eldercare policy was designed to meet the needs of older people and to reduce class inequalities among them, but not to meet the needs of their family members. The ability of working mothers to reconcile work and family life has been a central issue in Swedish gender equality discourse. By contrast, working daughters' capacity to combine employment and care for aged parents has long been an absent issue (Ulmanen

2013). Historically, the expansion of the public eldercare system contributed greatly to the increase in women's labour market participation. In spite of this, eldercare services have not been part of the gender equality discourse in the way childcare has. The difference explains to some extent why access to childcare has become universal over recent decades, but eldercare services have decreased. The change in eldercare has occurred despite the emphasis on public responsibility in legislation and policy documents. Ulmanen (2017a) describes the consequences of eldercare expansion and retrenchment: "Support for working daughters via de-familization<sup>1</sup> of eldercare appears to have been an unintended consequence of the expansion of home care services, rather than an explicit ambition. In a similar vein, re-familization of eldercare appears to be an unintended consequence of the declining care services" (Ulmanen 2017a: 255).

Immigrant women are sometimes assumed to be more family-oriented than Swedes. This perception may involve an expectation that they should care for their older relatives on an unpaid basis, particularly when unemployed. In other words, ideas about immigrant care cultures risk informing municipal practices in a discriminatory manner, if local civil servants expect immigrant women to care for their aged parents or relatives, with or without pay (Brodin 2006). In recent years, the employment of family carers within publicly funded home care has been a phenomenon connected to care for foreign-born older people. Accepting employment as a family caregiver can be an income strategy, but this kind of employment is generally associated with low wages, insecure employment conditions, risks of isolation and poor access to the regular labour market (Brodin 2017). Local authorities decide on whether to allow family care employment and Stockholm has, for example, prohibited this form of care.

Informal family care is also important for people with disabilities, not least for those who fall outside the scope of the Disability Act. There has been an increase in family care for people with disabilities with fewer care needs since the introduction of the Disability Act. Only among people with

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1 The words "familization" and "familialisation" are different versions of the same concept; they have the same meaning.

extensive disabilities has there been an increase in formal care services, specifically among those covered by the personal assistance scheme (Meagher / Szebehely 2013). People whose applications are rejected or who lose the personal assistance increasingly need to rely on care from family members, or else manage with restricted home care (Järkestig Berggren et al. 2019). Among family members of children with neuropsychiatric disabilities, sick leave due to fatigue syndrome is very common (NBHW 2020).

Informal family carers commonly report that providing extensive help and support has negative effects on their health, work and finances. Overall, women more frequently report such negative effects of informal care than men do (Szebehely et al. 2014).

# INCREASE IN PRIVATE DOMESTIC SERVICES

## THE TAX DEDUCTION ON DOMESTIC SERVICES

The Act on Tax Deduction on Domestic Services (also called “RUT services” – an acronym for Cleaning, Maintenance and Laundry in Swedish) was introduced in 2007. Under this legislation, taxpayers can deduct 50 percent of the cost of domestic services from their taxable income, up to SEK 75,000 (approx. €7,500) per person per year. The tax rebate is most commonly used for cleaning but the tasks can involve both care and household tasks.

The tax deduction on domestic services emerged as a controversial policy issue in the 1990s when the policy proposal was first formulated. In the ensuing discussion, which became known as the “maid debate”, the motivation and arguments have shifted over time. One of the central arguments in favour of the tax deduction has been that it helps to support career-oriented parents who work full-time to juggle the various aspects of their life. Another argument in favour is that it creates a formal market for domestic services and thereby increases declared employment in the sector. Critics have stressed that it is mainly well-off households that benefit from the tax deduction and that the initiative is creating a labour market for low-skilled and low-paid jobs (e.g. Duvander / Ferrarini 2013; Peterson 2011).

In the beginning, the debate reflected a clear left-right divide, with the right-wing parties pushing for a reform and the left-wing parties criticising the proposal. However, since the adoption of the reform, the tax rebate and the employment of domestic workers have become less controversial and more accepted in Swedish politics and society. The left-wing parties strongly criticised the policy for a long time, and yet the tax deduction is still in place today under the Social-Democratic–Green government.

## **OLDER PEOPLE AND DOMESTIC SERVICES**

Advocates of the tax deduction have also argued that the tax rebate increases older people's freedom of choice, enabling them to use private domestic services as an alternative to home care, or to top up their needs-assessed care services. The tax deduction is not formally considered part of eldercare policy but it is definitely interconnected. Older people predominate among those who buy domestic services. The 85–95 age cohort makes greatest use of the tax deduction; about 20 percent of the service consumption lies within this group (Brodin / Andersson 2017). Grown-up children can also contract services to be carried out in their parents' home. Among home-care providers, only private providers are allowed to offer users additional tax-deductible services (Erlandsson et al. 2013). In this sense, the tax deduction reinforces private care provision in eldercare.

Because user fees in eldercare are both income-related and dependent on the number of hours of help, for older people with higher incomes and smaller care needs, privately purchased domestic services can be cheaper than needs-assessed home care. Use of the tax deduction has recently increased among older people in general, and more among older people with higher incomes. As mentioned above, older people with lower incomes tend to turn more often to the family for help and support (Ulmanen / Szebehely 2015). Researchers in the field of eldercare emphasise that the tax deduction and the increase in private service consumption among older people pose a challenge to equality. If publicly funded care services are perceived as insufficient support or of low quality, more affluent older people will be incentivised to top up their needs-assessed care, or to opt out altogether. Such a development may mean better services for those who can afford private services but meagre basic services for the rest, thus threatening the norm of universalism (e.g. Szebehely / Meagher 2018; Ulmanen / Szebehely 2015; Vabø / Szebehely 2012).

The trend towards increased consumption of private domestic services has gendered implications for older people given the differences in

incomes between women and men. Studies confirm that the tax deduction is being used primarily by high earners (Brodin / Andersson 2017; Gavanas / Callerman 2013; Ulmanen / Szebehely 2015). At the same time, poverty affects a greater proportion of older women than of older men (see section on pensions). Poorer pensioners cannot easily choose to consume private domestic services when needs-assessed care services are perceived as insufficient. In sum, the decline of tax-funded eldercare services has differentiated consequences for older people and their families.

## **PRECARIOUS FEMALE-DOMINATED WORK**

Like eldercare, domestic service work is a female-dominated profession. In 1930, domestic work was the most common profession for women (Calleman 2007). Historically, work in domestic service has not been considered a “real job”. Domestic workers were situated outside of all collective negotiation and were separated from regular labour law. The Act on Domestic Work adopted in 1971 aimed to modernise the regulation of domestic work employment (ibid.). Establishing rules on working hours in the sector, it granted domestic workers an eight-hour working day, making them the last professional group in Sweden to benefit from this working time limit.

With the expansion of the welfare state, the public care sector created work opportunities for many women and domestic work employment in private households declined. Employment in the public care sector entailed better social protection and working conditions and was therefore more attractive (Platzer 2007). Paid domestic work re-emerged in Swedish homes in the 1990s. At this time, the public sector had gone through cutbacks and unemployment was increasing. Development in the industrial sector had slowed down and the private services sector was deemed significant for employment and growth in the future. Overall, the expansion of the domestic service market in Sweden has occurred in the context of retrenchment and growing unemployment among women immigrants

with low levels of education. Further, the demand for domestic services grew as income differences increased (Gavanas / Calleman 2013).

Domestic workers can be employed by home-care companies as well as companies offering only private domestic services. Both sectors are characterised by precarious employment and working conditions. There are few studies on the employment and working conditions in the domestic service sector, but these indicate that the conditions are even more insecure and precarious than in home care (Brodin / Andersson 2017). Home-care companies can outsource cleaning services to companies specialised in these services. Given the low remuneration that municipalities offer providers, such contracts most likely push down the salaries of workers in domestic service companies.

The degree of unionisation among domestic workers is especially low compared with other sectors. Some of the companies have collective agreements negotiated with Kommunal. In other cases, working conditions are dependent on the individual relationship between employer and employee; Sweden has no regulation of minimum wages. The majority of the workers employed in domestic service are women, and many are foreign-born, especially in the bigger cities. Foreign-born workers are generally unionised to a lesser extent than Swedish-born workers, which is one explanation for why unionisation is so low. Migrant status and knowledge of Swedish shape domestic workers' positions and influence whether they have formal employment or work in the underground economy (Gavanas / Callerman 2013).

## SUMMARY

Welfare retrenchment and NPM-inspired reforms have significantly affected women as paid workers and unpaid carers. Paid care work for older people is a female-dominated occupation characterised by weak institutional recognition and low pay, in Sweden as well as globally. A growing part of the work involves care for people with great and complex needs, and therefore qualified care workers are vital. However, professionalisation remains a challenge in a context where working conditions have deteriorated.

In the context of the marketisation of care, many women and foreign-born have become home-care entrepreneurs, but there is little evidence that women's small-scale business has contributed to gender equality. Rather, gender and ethnic stereotypes tend to be reproduced in the care market.

The process of re-familialisation in eldercare has affected women more than men, and the category that performs most unpaid care for older relatives is working-class women. Historically, the issue of working daughters and their ability to combine unpaid care with employment has been absent from Swedish gender equality policies and debates.

Unpaid family care is also widespread in the field of disability. For example, people whose applications for personal assistance are rejected and those who lose their right to assistance often rely on family members for help and support, as the alternative is depending on restricted home-care services.

Since the introduction of the tax deduction on domestic services, privately funded help has increased in Sweden, particularly among more affluent groups. Certain characteristics in the eldercare system have favoured the consumption of these so-called RUT services among older people with higher incomes. Older people with lower incomes tend to turn more often to the family.

Gendered differences can be assumed since women more often than men belong to the category of poor pensioners who are not very likely to consume private services. Furthermore, the female-dominated domestic service sector is characterised by highly precarious work.



# INEQUALITIES IN PAID WORK

# EMPLOYMENT AND INCOMES

## SWEDISH WORKFARE

Sweden, like the other Nordic countries, is highly oriented towards work and employment. In this vein, the Swedish welfare state can be characterised as a form of workfare. Participation in paid work is largely considered a goal in itself. Having a job is seen as the key to autonomy, independence and emancipation, which are central values embedded in the Swedish national identity. Policies on education, childcare, taxation, social assistance and healthcare all have the aim of enabling citizens to participate in the labour force. Additionally, the most generous benefits are income- and work-related: parental leave, unemployment benefits, sickness benefits and earning-related pensions (Kvist et al. 2012; Norberg 2019).

Neoliberal discourses have increasingly accentuated citizens' obligations over citizens' rights and social solidarity (Dahlstedt / Neergaard 2019). As the workfare element of the Swedish welfare state has become stronger, the focus has fallen on the obligation to take up wage labour to support oneself (e.g. Norberg 2019). While unemployment benefits are relatively generous, claimants have to interact with employment agencies, social workers and doctors, and recipients have to accept activation or work offers. Claimants who do not comply with the requirements may lose their benefits (Kvist / Fritzell 2012). The growing focus on obligations has implications for vulnerable groups, with weaker positions in and relation to the labour market.

## GENDER EQUALITY AND LABOUR MARKET PARTICIPATION

In Sweden, gender equality has been framed mainly in terms of women's participation in the labour force (e.g. Peterson 2011). Overall, welfare states with earner-carer models have considerably higher levels of female employment than familialistic welfare states. The number of women in the Swedish labour force increased dramatically during the 20th century,

especially after 1960. Working women are certainly not a modern phenomenon in Sweden (Stanfors / Welander Tärneberg 2020). However, women's labour market participation was crucial for establishing women's work as paid and connected to pension rights and other social benefits. As such, work meant greater economic and social independence for women. Formal differences in men's and women's work disappeared during the 1960s and 1970s (ibid.). Additionally, a key reform that reinforced women's labour market participation was the introduction of individual income taxation in 1971. Individual taxation in combination with a progressive tax system made it economically beneficial to have two lower incomes in a household, rather than a single higher income (Duvander / Ferrarini 2013). Thus, the dual-earner model was strengthened over the male-breadwinner model.

## **GENDER AND CLASS-RELATED INEQUALITIES**

While the proportion of men active in the labour market has been consistently high, the proportion among women increased sharply between 1970 and 1990, from 59 percent to 84 percent. The economic crisis of the 1990s saw the upward trend reversed, and by 1998 women's labour force participation had fallen to 74 percent. After the crisis, the upward trend resumed (Stanfors / Welander Tärneberg 2020). Today, women's labour force participation is high; in 2019, labour force participation rates were 90 percent for men and 85 percent for women (aged 20–64) and the employment rates were 84 percent for men and 80 percent for women. The overwhelming majority of men work full-time, but full-time work has also increased among women (SCB 2020). The unemployment rates in 2019 were 5.9 percent for both men and women (ibid.). While unemployment increased in Sweden with the outbreak of the COVID-19 pandemic, the trend has now been reversed.

Employment among working mothers is high in Sweden. For women with small children under the age of seven, the employment rate has been even higher than the average for all women (Stanfors / Welander Tärneberg 2020). In addition, employment rates for women aged 55–64 have

increased steadily over time, but particularly so after 2010. Labour force participation among women in this age group increased from 70.4 percent in 2010 to 79 percent in 2019 (OECD 2020). When it comes to these categories of women, Sweden stands out internationally. However, the level of education matters for labour force participation; differences between women and men are smallest among those with higher education and greatest among those with pre-secondary education (Stanfors / Welander Tärneberg 2020).

Great gender differences remain in the distribution of paid work and unpaid care and domestic work. The gendered division of labour means that many women work part-time and are away from work for various reasons, not least due to childcare. Women's share of part-time employment is 60 percent (OECD 2020). The probability of actually being at work is less for women with small children (under the age of seven) compared with other women. By contrast, for men with small children, this figure is even higher than for men without children (Stanfors / Welander Tärneberg 2020). Of all part-time working women, 20 percent work part-time due to care responsibilities for children and/or adult relatives; the corresponding figure for men is 8 percent (Stanfors / Welander Tärneberg 2020). Part-time work is much more common among working-class women than among middle-class women. For women in working-class occupations, the main reasons for working part-time are: 1) they are not offered a full-time job, and 2) the work is too demanding for full-time work. By contrast, childcare is the most common reason among women in white-collar occupations (Lorentzi / Vedin 2019).

Public policies have been quite successful in supporting women as caregivers and workers, but far less so in avoiding gender segregation in the labour market. The vast majority of women and men work in occupations that have an uneven gender distribution. The gender segregation is found throughout the labour market, but is particularly common in working-class occupations. Here, women work in care, service and sales occupations, while men work in occupations related to construction, industrial manufacturing and transport (Bergold et al. 2020). Assistant nurse (employed in home care, nursing homes or home healthcare) is the most common

profession among working-class women (Lorentzi / Vedin 2019). In this sector, over 90 percent of the workers are women (SCB 2020). While many women have jobs that involve working evenings, weekends and nights, this is especially common among working-class women. Working hours outside office hours makes it more difficult to combine work and care since childcare is only guaranteed during the day and on weekdays (Lorentzi and Vedin 2019).

Overall, there is a clear gender wage gap and there are systematic differences between salary levels in male- and female-dominated occupations (SOU 2020). The average actual monthly salary, taking into account working hours, is SEK 21,000 (approx. €2,100) for women in working-class occupations and SEK 26,800 (approx. €2,680) for men in working-class occupations. For women in white-collar occupations it is SEK 33,000 (approx. €3,300) and for men in white-collar occupations, SEK 42,100 (approx. €4,210) (Lorentzi / Vedin 2019). The gender wage gap has narrowed in recent years. At the same time, rising capital incomes benefit men since they are overrepresented in this type of income. Men also remain overrepresented in the highest income group (SOU 2020).

## **PENSIONS AND POVERTY**

Given the gender differences in work life and unpaid care and domestic work, women's pensions are generally lower than men's. Among the newly retired, women who were employed in working-class occupations have the lowest total pension, an average of SEK 16,100 a month before tax (approx. €1,610). Men who were employed in white-collar occupations have the highest total pension: SEK 33,200 a month (approx. €3,320). In between, we have men who were employed in working-class professions and women who were employed in the white-collar occupations, with average total pensions of SEK 20,100 and SEK 23,100 respectively (approx. €2,010 and €2,310). Up to 45 percent of women who were employed in working-class occupations receive a guarantee pension, due to their low income pension (Bergold et al. 2020).

In the over-65 age group, 15 percent of women and 7 percent of men fall below the relative poverty threshold. The measure of relative poverty is used by the OECD and refers to an income less than 50 percent of the country's median income. Remarkably, the differences between women and men are among the greatest in the OECD. Women, the foreign-born, the oldest-old and those living in one-person households run a particularly high risk of poverty (NBHW 2020a).

It should be mentioned that the risk of poverty is also higher for households constituted by single parents with two or more children. "Low economic standard" refers to households with a disposable income lower than 60 percent of the median income in the country. The occurrence of low economic standard is high for single parents with several children; in this group, 35–40 percent live in households with low economic standard. Among foreign-born single mothers, this figure is over 50 percent (SOU 2020).

# IMMIGRATION AND EMPLOYMENT

## IMMIGRATION AND POLICY REFORMS

Migration to Sweden has followed several waves, from mainly labour force migration coming from European countries (i.e. Finland, Germany and Greece) in the 1960s and 1970s, to principally refugees coming from non-European countries and the former Yugoslavia in more recent years. Migration for family reunification has taken place in connection with both labour and refugee immigration (Aldén / Hammarstedt 2014). While Sweden has long been a country of immigration, the trend has accelerated in recent decades. Since 2000, the proportion of foreign-born in the population has increased from 11 percent to close to 20 percent (SOU 2020). Sweden is among the European countries with the highest proportion of foreign-born citizens in its population, both in total and in terms of non-EU migrants (Dahlstedt / Neergaard 2019). Men predominate among immigrants who have come as refugees or labour migrants, while women predominate among those who have come for family reunification.

In 2008, a policy reform on labour immigration granted citizens from countries outside the EU the right to labour and residence permits, on condition that they had found employment. Nonetheless, labour immigration constitutes a relatively small part of Sweden's immigration (SOU 2020). Sweden's asylum and refugee policy was fairly non-restrictive in a European context until the refugee crisis of 2015. Since then, new restrictive policies have been adopted (Act 2016), favouring the use of temporary rather than permanent residence permits, abolishing state subsidies to applicants with legally binding rejections, facilitating their rapid expulsion, and curbing family reunifications by linking them to economic self-sufficiency (Dahlstedt / Neergaard 2019). The immigration reform limited the entry of asylum seekers as well as immigrants coming for family reunification. In addition, the COVID-19 pandemic has currently led to reduced immigration (SOU 2020).

## **DIFFERENT EMPLOYMENT PATTERNS**

There is an obvious relationship between how long immigrants have lived in Sweden and the likelihood of them being employed. Additionally, education (such as Swedish-language education) positively affects the individual's opportunities in the labour market (Aldén / Hammarstedt 2014). At the same time, there is ample evidence of discrimination against foreign-born people in the Swedish labour market. From a comparative perspective, Sweden is doing poorly when it comes to labour market participation of racialised persons with a foreign background (Dahlstedt / Neergaard 2019). The position of foreign-born individuals on the labour market has gradually worsened in recent decades, in Sweden as in other OECD countries. Foreign-born have a weaker connection to the Swedish labour market; they have lower employment rates and higher rates of unemployment. This is particularly true of foreign-born persons with an African and Asian background. For these groups, the problem of high unemployment is not limited to people with low levels of education. Those with high educational levels have disproportionately high rates of unemployment and are more likely than others to have jobs requiring lower competencies than their formal educational level (Aldén / Hammarstedt 2014).

As we have seen, employment rates are generally higher for men than for women, but the employment rate for native-born women is significantly higher than for foreign-born women. The level of education marks an important difference, however. Similarly, employment rates vary significantly between native-born and foreign-born men. Nevertheless, foreign-born men have a higher labour market participation rate than foreign-born women. Table 1 displays these differences.

## EMPLOYMENT AMONG PEOPLE AGED 25-64 AS A PERCENTAGE OF THE POPULATION (2019)

LEVEL OF EDUCATION	EMPLOYMENT RATE NATIVE-BORN	EMPLOYMENT RATE FOREIGN-BORN
<b>WOMEN</b>		
Pre-secondary education	62%	38%
Secondary education	83%	65%
Post-secondary education	92%	77%
Information lacking	31%	34%
Total	87%	66%
<b>MEN</b>		
Pre-secondary education	78%	61%
Secondary education	90%	79%
Post-secondary education	92%	83%
Information lacking	42%	73%
Total	90%	78%

Table 1, Source: Statistics Sweden 2020, p. 56

Employment rates are particularly low among refugees and immigrants who obtain residence permits as relatives of foreign-born residents (Aldén / Hammarstedt 2014). There appear to be some gender differences when it comes to integration services. Studies show that public authorities do not treat newly arrived women and men equally, with women receiving less support than men (SOU 2020). One explanation is that case managers at the Swedish Public Employment Service draw on stereotypical notions of foreign-born women and men. When it comes to immigrants from non-EU countries, it takes much longer for women than for men to get into employment. Not until 10 years of living in Sweden do women and men reach similar employment rates (ibid.).

## **IMMIGRATION AND POVERTY**

Immigration is linked to a higher risk of poverty as high unemployment among immigrants is only partially compensated for by welfare provisions. Further, the growing informalisation of work is a problem that particularly affects immigrants, resulting in precarious situations and limited access to social rights and pensions (e.g. Dahlstedt / Neergaard 2019). Economic inequalities lead to housing segregation, particularly in the bigger cities. In some areas characterised by social exclusion, three quarters of the population has a foreign background (SOU 2020). While the risk of poverty is higher for households with children than for other types of households, there are large differences in disposable income between households with Swedish-born and foreign-born parents. Foreign-born single mothers have the lowest disposable household income (SOU 2020). Older late-in-life immigrants also constitute a vulnerable group. In recent years, a growing number of late-in-life immigrants have come as refugees or for family reasons. Many of them do not find jobs in Sweden and consequently receive very low old-age pensions (Gustafsson et al. 2019).

## SUMMARY

The Swedish welfare state can be characterised as a form of workfare and policies generally aim to enable citizens to participate in the labour market. The workfare element has been reinforced over time, emphasising individual obligations over social rights.

Gender equality has largely been framed in terms of women's participation in the labour market. From an international perspective, women's employment rates are very high, and this includes the categories of working mothers and middle-aged women, the latter being the category that is most likely to perform informal care for aged parents or relatives.

Nevertheless, women work part-time and take time off work due to care responsibilities more often than men. Women in working-class occupations are the category that most often works part-time. The labour market is highly segregated according to gender, and eldercare is the most female-dominated work sector. Overall, there is a clear gender wage gap and there are systematic differences in salary levels across male- and female-dominated occupations. Gendered practices regarding paid and unpaid work and care have resulted in significant differences in relative poverty between older women and older men.

As in many other countries, foreign-born have a weaker connection to the labour market than native-born. Foreign-born generally have lower employment and higher unemployment rates, but foreign-born men have a significantly higher labour market participation rate than foreign-born women. Employment rates are particularly low among refugees and family immigrants.

While economic inequalities in Sweden have increased in recent decades, relative poverty rates have also augmented. Immigration is linked to a higher risk of poverty, and foreign-born single mothers are the category with the lowest disposable household income.



# FEMINIST AGENDAS AND RESISTANCE

# FEMINIST ACTORS IN THE STATE

Feminist actors have been highly influential in putting women's rights and gender equality on the political agenda in Sweden. These include the women's movement and autonomous civil society organisations, as well as women in the political parties. While the 1960s and 1970s saw a fundamental political transformation with the rise of the autonomous women's movement, women also became increasingly engaged in mainstream politics to gain political power and improve women's conditions (Ekberg 2019). As in the other Nordic countries, women in the state have constructed a kind of state feminism in Sweden, which has been key in the struggle for gender equality. State feminism has been closely connected to the welfare state, implying a focus on social and economic policy as well as on women's political participation (Borchorst / Siim 2008). Historically, Swedish social reforms have drawn on government commissions with academic experts studying social conditions and suggesting reforms to increase class and gender equality. In recent decades, though, the role of social scientists in family/gender equality politics has shifted from that of social engineers to critical voices (Lundqvist / Roman 2008).

Sweden has the most institutionalised gender equality approach among its neighbours (Borchorst 2009). A specialised public authority, the Gender Equality Agency, has a coordinating role, with the objective of contributing to the strategic and long-term governance and effective implementation of the national gender equality policies. At the same time, gender mainstreaming is a central strategy for achieving the national gender equality policy objectives, meaning that decisions in all policy areas and at all levels should be permeated by a gender equality perspective. This involves making gender equality an integral part of day-to-day activities where decisions are made, resources are allocated and norms are created (Government Offices of Sweden 2020). Overall, gender equality has been constructed as part of the Swedish national identity, also with a view to setting an example for other countries and the EU (Townes 2002). In

this vein, the red-green governments in power since 2014 have widely promoted the idea of a feminist foreign affairs strategy.

The Nordic countries have for many years been in the world's top five in terms of women's political participation (Borchorst 2009). In Sweden, there has been broad agreement among political parties that gender equality should be a political goal. Problems that were previously understood as women's issues or family matters became gender issues in the 1960s and 1970s, and by then mobilised broad political support. In recent years, feminism has also become a recurrent notion in Swedish politics. The concept, articulated within the autonomous feminist movement, has thereby been introduced and adopted (or co-opted) within the formal political sphere (Stensöta Olofsdotter and Karlsson 2018). None of the Swedish political parties openly question the norm of gender equality, but it is primarily the parties on the left – the SAP, the Left Party and the Greens – that use the label feminist. The Centre Party and the Liberals refer specifically to liberal feminism. The Sweden Democrats reject feminism and support essentialist notions of gender. As for individual MPs, 44 percent of the female members of parliament define themselves as feminists, compared with 19 percent of men (*ibid.*). Feminist Initiative, a feminist party founded in 2005, has not mobilised sufficient support to enter Parliament, but it is present in local governments.

# WORK AND CARE-RELATED ISSUES ON THE FEMINIST AGENDA

Left, feminist and trade union actors are key players when it comes to advocacy for gender equality in the Swedish welfare state. Work and care-related matters remain central for Swedish gender equality policies, but the topics and framings have certainly changed over time. In this section, I present key feminist issues and debates regarding work and care, and the actors involved.

## IN DEFENCE OF THE EARNER-CARER MODEL

Although gender issues historically have not been key concerns for Swedish trade unions, recent developments have seen the emergence of “trade union feminism”. Feminists have drawn up strategies to work to advance gender equality and to improve women’s situations from within the trade unions. LO (Landsorganisationen i Sverige), the Swedish trade union confederation ([www.lo.se](http://www.lo.se)), annually publishes a Gender Equality Barometer. These reports outline women’s situations in paid work and unpaid care, and present policy proposals (for 2020 and 2019, see Bergold / Vedin / Lorentzi 2020; Lorentzi / Vedin 2019).

LO emphasises the effects of different family and welfare models on gender equality and proposes policies that reinforce the earner-carer model (Lorentzi / Vedin 2019). The 2019 Gender Equality Barometer argues that, when it comes to gender equality policy, it is possible to talk about three political blocs: a) a left-wing bloc that advocates common solutions that make it easier for all citizens to have a job with a salary they can live on and to combine this with caring responsibilities, b) a market-liberal bloc that advocates individual market solutions where the ability to support oneself and combine this with care responsibilities depends on your wallet, and c) a conservative bloc that advocates solutions, such as childcare allowance and joint taxation, which reinforce a male-breadwinner/female-caregiver

model. Not surprisingly, LO stresses that the political parties that most clearly stand for the earner-carer model are the SAP and the Left Party.

The 2019 report contrasts the earner-carer model with other kinds of family and welfare models. The market-oriented model implies limited public support, market solutions and the use of informal networks to combine work with care responsibilities. The Moderate Party, the Centre Party and the Liberals support major tax cuts and tax deductions for household services, and so tend to focus on private market solutions rather than general welfare. LO warns that an eroded welfare state will reinforce gender inequalities and views the SAP-led government's dependence on market-liberal parties as a problem.

On the other hand, LO stresses that a male-earner/female-carer model is promoted through various policy proposals advanced by the Christian Democrats and the Sweden Democrats. These include the childcare allowance, the removal of the earmarked months for each parent (i.e. the daddy months) in the parental leave insurance, and the return of joint taxation. The women's movement and left-wing politicians have identified the political project of the Sweden Democrats as anti-feminist. In addition to the above-mentioned proposals, the Sweden Democrats have proposed restricting the right to abortion and abolishing gender pedagogy in preschool.

## **INDIVIDUALISED PARENTAL INSURANCE**

In line with the earner-carer model, the SAP, the Left Party and the Greens have agreed on the need to further individualise the parental leave insurance, in order to increase sharing between mothers and fathers. This means extending the earmarked months for each parent (often referred to as daddy months). The SAP ([www.socialdemokraterna.se](http://www.socialdemokraterna.se)) and the Greens ([www.mp.se](http://www.mp.se)) have the same aim: parental insurance that is divided into three parts, one third earmarked to each parent and one third to be shared as they wish.

In a similar vein, the Left Party ([www.vansterpartiet.se](http://www.vansterpartiet.se)) wants to change the legal framework to achieve equal sharing and LO promotes individualisation and increased sharing of care for small children between mothers and fathers (Lorentzi / Vedin 2019). This is a polemic issue in Swedish politics since there are right-wing actors (e.g. Christian Democrats) who are strongly against further individualisation and who stress freedom of choice in the use and distribution of care leaves within the family.

## **EXTENDED CHILDCARE**

Left and feminist actors emphasise that childcare should be available during working hours outside of normal office hours. The Left Party and LO argue that the municipalities should be obliged to offer childcare on evenings, nights and weekends, this being framed as a feminist issue related to both gender and class. The proposal reflects the fact that many women (especially in working-class occupations) have difficulties combining work and care responsibilities, since childcare is only guaranteed during the day and on weekdays.

## **ALLIANCES TO CONFRONT THE GENDER WAGE GAP**

The gender wage gap is a problem that engages a range of different actors. Trade unions, policymakers and feminist civil society organisations advocate equal wages. One example of this advocacy is the campaign #payallday (#lönheladagen), initiated by the Swedish Women's Lobby ([www.sverigeskvinnolobby.se](http://www.sverigeskvinnolobby.se)) and supported by the women's organisations or networks of the SAP, the Left Party, the Greens, the Liberals and the Centre Party, as well as trade unions and numerous autonomous women's organisations. The campaign stresses that if the pay gap between women and men is converted into time, this means that men are paid for their entire working day from 08:00 to 17:00, while women work for free after 16:09. Since the advocacy campaign started eight years ago, the time has been moved forward from 15:51 to 16:09. The campaign highlights that women have higher education but lower wages than men in all sectors and virtually all occupations in the Swedish labour market

(Sveriges kvinnolobby, Dags för #lönheladagen!). The fact that the actors behind the campaign are so diverse, including left and liberal political parties, various women's organisations and unions representing a range of different professions, shows that the gender pay gap is a widely recognised problem and that the issue joins feminists from different strands together.

## **POVERTY AMONG WOMEN PENSIONERS ON THE AGENDA**

Although the political parties vary in their reform proposals, there is currently broad political agreement – among both left- and right-wing parties – that women's low pensions constitute a problem. However, the problem of unequal pensions is definitely not new; indeed, the issue has been on the (left) feminist agenda for a long time.

Numerous actors are involved in the policy debate on women's low pensions. One strong voice in this debate is PRO (Pensionärernas riksorganisation), Sweden's largest pensioner organisation ([www.pro.se](http://www.pro.se)), which is associated with left-wing political ideas. PRO is calling for a reform of the pension system to reduce poverty among older people. The organisation highlights that poverty among older people is increasing in Sweden, especially among women, partly due to an unequal working life and partly because the pension system itself reinforces social injustice. It underlines that the great majority (80 percent) of pensioners who receive only the low guarantee pension are women, many of whom have worked all their lives. The unequal working life is connected to women's part-time and fixed-term employment, poor work environments and low pay in female-dominated occupations. The pension system builds on and reinforces these differences, without creating sufficient basic protection for the most vulnerable and lowest paid groups. Further, PRO points out that poverty is linked to poor health, social exclusion, serious financial problems and gender-based violence. On its website, the director of the organisation, Christina Tallberg, claims that: "Today's pension system may be financially sustainable – but it is not always humanly sustainable" (PRO).

The struggle for gender-equal pensions evidently relates to the struggle for dignified working conditions and higher wages in female-dominated occupations. Gender-equal pensions are promoted both by large organisations such as LO (Bergold / Vedin / Lorentzi 2020) and the Swedish Women's Lobby (Sveriges kvinnolobby, Feministisk ekonomi) and autonomous women's organisations including, for example, Tantpatrullen (an older women's protest group), Fredrika Bremer Förbundet and Kvinnliga Akademikers Förening (Association of Women Academics).

## **TAX-FUNDED DOMESTIC SERVICES AND GENDER (IN)EQUALITY**

In contrast to the gender pay gap and the issue of women's low pensions, there has been no consensus among feminists regarding the tax deduction on domestic services and so-called RUT services. The tax deduction has divided left and liberal feminist actors; while the former generally see the tax rebate as reinforcing inequalities, the latter argue that it increases gender equality. Currently, the Left Party is the only party in the Swedish Parliament calling for an abolition of the tax deduction in their political programme. Even though many women in the SAP have been critical, the tax deduction is still in place under the red-green government. The Centre and Liberal parties, whose support has been vital for the government, are advocates of the tax deduction. At the same time, a recent report by the Swedish National Audit Office finds no evidence that the initiative is self-financing over the longer term, which has been one of the arguments in favour of the tax deduction (Riksrevisionen 2020).

## **ELDERCARE – A GENDER EQUALITY ISSUE**

As we have seen, eldercare was long ignored in gender equality policies and the policy debates on making employment and care responsibilities compatible. More recently, feminist, left and trade union actors have framed eldercare as a gender equality issue. For example, the Left Party argues that good and affordable care for all older people who need help and support is not only a welfare issue, but also a gender equality issue ([www.vansterpartiet.se](http://www.vansterpartiet.se)). The party argues that older women with low pensions

may give up home care and get help from their daughters instead. An expanded and well-functioning eldercare is a prerequisite for women to be able to participate fully in the labour market. Further, they stress that women are overrepresented among family members who care for older relatives, but also among care staff (Vänsterpartiet).

## **IMPROVED WORKING CONDITIONS IN FEMALE-DOMINATED SECTORS**

The poor working conditions in female-dominated welfare sectors is a problem that has become more and more visible. Kommunal ([www.kommunal.se](http://www.kommunal.se)) is Sweden's largest trade union, with over half a million members. Kommunal organises care workers in both privately and publicly provided care (e.g. childcare, eldercare and disability), and advocates better employment and working conditions in the female-dominated care sectors. The trade union also organises other collectives, such as workers in domestic service, transport and agriculture. Nonetheless, eldercare is Kommunal's largest industry, accounting for about one third of its members. The COVID-19 pandemic has severely impacted older people in need of care, in Sweden as in many other countries worldwide, and the problematic working conditions in the eldercare sector has received increased attention in political debates. However, as Kommunal stresses, the current struggle for improved conditions in care work relates to long-standing problems in the sector.

Kommunal has on numerous occasions raised issues related to the overall lack of resources in eldercare and the low status of care work, drawing on surveys of members' experiences and care research. The trade union highlights problems such as lack of time and understaffing. Care workers continuously experience stress as they have too few colleagues, and tough work situations lead to high levels of sick leave. Kommunal calls for more time, higher staff ratios, more qualified care workers and better work environments, as well as higher salaries, full-time employment contracts and an end to the practice of split work days. The union strongly criticises the NPM-inspired minute-steered care that has become so widespread in eldercare, especially home care. They argue that better working conditions

and work environments are necessary not only to improve care workers' health, but also to make them want to stay in the profession. They also emphasise that care workers need flexibility and discretion to be able to give good care, adapted to older people's shifting needs (Kommunal, äldreomsorg).

There are also grassroots initiatives to improve the conditions of care work. Two assistant nurses started the undersköterskeupproret (assistant nurses' rebellion) in 2019, which has mobilised care workers in eldercare in different parts of the country through social media. The movement demands, among other things, an end to austerity, decent working conditions and more qualified care workers, and criticises the fact that poor working conditions are resulting in a high level of sick leave among care workers (SVT 2020).

## **PROFESSIONALISATION OF CARE WORK**

The struggle for recognition and revaluation of care work is linked to the call for professionalisation. Qualified staff have become more and more important as older people who receive care services often have great and complex needs. The COVID-19 pandemic has further spurred debates on and calls for a professionalisation of care work in the eldercare sector, among other things because higher qualifications are linked to better hygiene routines and knowledge of how to use PPE and avoid the spread of infection. Kommunal emphasises the importance of a unified national professional title for assistant nurses (Kommunal, äldreomsorg). Until now, there have been many educational paths to the assistant nurse profession.

## **BETTER WORKING CONDITIONS FOR BETTER CARE**

Some actors make explicit the link between good working conditions and the quality of care for older adults. In this vein, an alliance was announced between the trade union Kommunal and the pensioner organisation PRO in the struggle for better eldercare (Svenska Dagbladet 2019). Both organisations have highlighted the need for more earmarked resources for eldercare. They also stress that in order to improve working conditions, minute-steered schedules and precision staffing must be abolished. While better working conditions are crucial for both care workers and care receivers, higher salaries are also necessary to retain qualified care staff and to be able to recruit new workers.

## **DEBATES ON RUT SERVICES DIRECTED TO OLDER PEOPLE**

As mentioned previously in the report, advocates of the tax deduction on domestic services have argued that RUT services increase older people's freedom of choice, enabling them to use private domestic services when they want (more or better) help in the home. As such, the tax deduction has been framed as a policy that in practice is directed to older people. In addition, a policy proposal to increase the tax-deductible amount and the range of services specifically for older people was recently examined in a government commission. One of the arguments in favour was that older people's needs for domestic help are increasing. The proposal therefore involved broadening the services to include, for instance, accompaniment, cooking and housing oversight. However, the commission did not move forward with this proposal.

LO, Kommunal and PRO, among others, have been critical voices in the debates on tax deductions for older people. The organisations emphasise that older adults who need support with day-to-day living have the right to receive help from the municipality. They argue that the tax deduction for domestic services contributes to a blurring of boundaries between public and private responsibilities. PRO has been critical of the tax rebate in general and a special tax rebate directed at older people in particular. By

contrast, the second largest pension organisation in Sweden, SPF Seniorerna, which is associated with right-wing political ideas, supports the general tax rebate (for all tax-paying adults).

The trade unions criticise the neoliberal vision of replacing home care services with private RUT services for those older people who need mainly domestic help (e.g. cleaning, laundry and cooking). They argue that this would have the effect that low-income pensioners, who currently pay a reduced fee for home care, would not be able to afford such services. Instead, this group could be expected to rely more on help from family members. Kommunal calls for a professionalisation of care work, hence emphasising that RUT services should be clearly distinguished from home care and not directed to people with long-standing care needs at all (Kommunal 2020). LO feminists are calling for the abolition of the tax deduction since it results in an unequal welfare system. In particular, they argue that if those who can afford private services top up their needs-assessed care, and those who cannot afford them get meagre publicly funded services, universalism is threatened (Lorentzi / Vedin 2019). These are ideas that have been highlighted in care research.

# GENDER-BASED VIOLENCE ON THE FEMINIST AGENDA

Historically, Swedish gender equality policies have tended to downplay issues of conflict between women and men. In the 1990s, however, wife-battering became a central political topic. Subsequently, there has been a turn towards a feminist framing of violence as a matter of gender and power (Lundquist / Roman 2008). Currently, gender-based violence is a key issue on the political agenda, in the Swedish policy discourse on gender equality and in the work of many feminist organisations.

With the Violence Against Women Act (Kvinnofrid) of 1998, the Swedish women's movement reached a milestone. The reform encompassed a large number of measures to prevent and eliminate men's violence against women, including new offences that criminalised male violence against women in intimate relationships, a stronger rape offence and tougher legislation against sexual harassment at work. It also involved comprehensive measures to prevent and eliminate prostitution and trafficking in human beings for sexual purposes. With the prohibition of purchasing sexual services, prostitution was framed as a serious violation of women's human rights and as male violence against women. The policy reform achieved international attention and has influenced reforms in the field of gender-based violence and prostitution in other countries (Ekberg 2019).

Voluntary organisations have taken the main responsibility for protecting women suffering from violence. Feminist organisations such as Roks (the National Organisation for Women's Shelters and Young Women's Shelters in Sweden, [www.roks.se](http://www.roks.se)) and the Swedish Association of Women's Shelters and Young Women's Empowerment Centres (Sveriges Kvinno- och Tjejjourers Riksförbund, SKR) work directly on protecting and supporting victims of gender-based violence. They are also advocacy organisations, attempting to shape public policy. In line with changes in the Social Services Act, municipal services are now increasingly involved within the field as well.

Honour-based violence was placed on the political agenda in the early 2000s after the terrible murders of three young women. An intense public debate about honour, immigration and violence ensued. Extensive policy measures were taken and resources were invested in violence prevention. However, honour-based violence is a contested concept; while some accounts focused mainly on the cultural values linked to certain immigrant and ethnic-minority groups, others focused more on gender oppression in a global perspective (NCK 2010). A highly-charged media debate provided xenophobic groups with arguments, but it also opened up debates between feminist groups and gave immigrant women's organisations greater visibility and a stronger voice (Hellgren / Hobson 2008). Examples of such organisations are Varken Hora Eller Kuvad (Neither a Whore nor Submissive) ([www.vhek.se](http://www.vhek.se)), based on the French organisation Ni Putes Ni Soumises, and the network Glöm Aldrig Pela och Fadime (Never Forget Pela and Fadime) ([www.gapf.se](http://www.gapf.se)).

While gender-based violence has been on the agenda for some time in Sweden, many women were inspired to break their silence and make the problem more visible in society following the emergence of the MeToo movement against sexual violence and harassment. As the movement spread through social media worldwide in 2017, women active in a range of different fields of Swedish society, including the media, culture, education, healthcare, the police and the legal system, reported experiences of violence and sexual harassment. MeToo continues fighting sexual violence and supporting victims ([www.metoosweden.com](http://www.metoosweden.com)), but there has also been a certain backlash and some women have been sued for defamation.

In 2018, under the Social Democratic-Green government, Sweden adopted a new law on sexual consent, strengthening the position of victims of sex crimes. The MeToo movement had pointed to the need for reform. Under the new law, sexual participants need to agree explicitly in words or clearly demonstrate that they want to engage in sexual activity. Sex is considered a criminal act if it was not a voluntary act by both partners, irrespective of the use of violence and threats. The policy reform highlights the responsibility of men and boys and was followed by information campaigns targeting young people in particular.

There are indications that gender-based violence has increased in the context of the COVID-19 pandemic, as the number of reported crimes of violence against women rose in 2020 (SVT 2021). The Swedish Gender Equality Agency ([www.jamstalldhetsmyndigheten.se](http://www.jamstalldhetsmyndigheten.se)) is involved in the implementation of the government's national strategy to prevent and combat men's violence against women. The agency emphasises that there is a connection between women's financial situation and violence, since economic independence improves the prospects of ending a violent relationship. Following from this, the economic consequences of the COVID-19 pandemic could lead to an increase in gender-based violence (Jämställdhetsmyndigheten 2020). As such, the increasing social and economic inequalities discussed in this report have negative implications also in terms of gender-based violence.



**CONSTRUCTING  
FEMINIST AND  
"CARING" FUTURES**

## POTENTIAL FEMINIST ALLIES

Feminism and the feminist movement remain strong in Sweden, involving diverse voices and actors, advocating on different issues and articulating different priorities. As we have seen, feminist agendas are articulated by feminists *in* the state as well as outside it. Feminist issues are commonly raised and debated in the Swedish Parliament and many of the MPs define themselves as feminists.

While all political parties in Parliament recognise gender inequality as a policy issue – at least rhetorically – right-wing parties tend to focus on the subject of gender-based and honour-based violence. Violence against women is often connected to gender inequality among immigrants. While increased attention and recognition of the problem is positive, it is problematic that the feminist issue of gender-based violence is being co-opted by conservative and extreme-right actors. In this context, feminist alliances with actors who fight racist discourses in society are vital, including political parties and social movement actors. Anti-racism also constitutes a fundamental part of the struggle of many feminist organisations.

This report has focused mainly on feminist advocacy and agendas related to work and care. This involves advocacy against neoliberal reforms, NPM and welfare state retrenchment. When it comes to political parties, there is no doubt that the SAP has been a crucial actor in the development of the welfare state and gender equality policies, but the party has also had a role in advancing retrenchment and introducing and facilitating marketisation and NPM in recent decades. There has been criticism from within as some left-wing SAP members have argued for a more leftist agenda. At the same time, the modestly growing Left Party represents both an important feminist actor and a left feminist ally. While the SAP, the Left Party and the Greens define themselves as feminist, the Centre Party and the Liberals take a (neo)liberal ideological approach to feminism. As LO has warned, policies developed with these parties may reinforce inequalities.

The Swedish trade unions are critical allies in the feminist struggles for gender equality and for improving women's life situations. As highlighted in the report, LO and Kommunal are important actors in the struggle for feminist alternatives to neoliberalism and welfare retrenchment. These organisations are not defined as feminist organisations, but feminist agendas are advanced through their advocacy, strategies and policy proposals. As we have seen, LO feminists have advanced the idea of trade union feminism, which highlights the intersection of gender and class in issues related to work and care.

The feminist agenda can also be advanced through alliances with civil society organisations such as, for example, PRO. The pensioner organisation is a strong voice in policy debates on pensions and eldercare. As mentioned, PRO has highlighted the plight of women pensioners on low incomes and the problem of poverty among older people, related to the pension system. Like LO and Kommunal, PRO has been involved in the debates about RUT services for older people, linking this issue to the situation of older people with lower incomes. LO, Kommunal and PRO are actors that generally defend the universal welfare system, which is crucial for gender equality.

A small independent media sphere and think tanks are also potential allies in the feminist struggles. For example, Arena Idé ([www.arenaide.se](http://www.arenaide.se)) is Sweden's largest left-oriented think tank. Funded by trade unions, it focuses on questions related to the labour market, economic policy, welfare and democracy. It has produced numerous reports on working conditions in welfare professions as well as on welfare state reforms and retrenchment. Katalys ([www.katalys.org](http://www.katalys.org)) is another independent left-oriented think tank funded by trade unions. It has strongly criticised the fact that big profits can be made through investments and ownership in welfare sectors. At the same time, market-liberal think tanks, most notably Timbro, have more resources and are highly visible in the media (Allern / Pollack 2016). Fortunately, these powerful voices do not go uncontested.

In a wider perspective, a crucial ally is the environmental movement, which has achieved increasing visibility – in Sweden and globally – through the advocacy of Greta Thunberg, Fridays for Future, Extinction Rebellion, etc. While the environmentalist movement is not necessarily or primarily feminist, environmental claims for climate justice and sustainable development are vital for feminist futures. This movement points at the intrinsic connections between the local, national and global.

# RECOMMENDATIONS FOR LEFT ACTORS

## **A MORE INCLUSIONARY GENDER EQUALITY DISCOURSE**

The Swedish gender equality discourse has always been exclusionary and continues to be so. The dominant gender equality discourse has tended to privilege certain categories of women, while marginalising others. Overall, the normative subject has been the white, Swedish-born, middle-class working mother. The norm of the earner-carer model is a crucial element in the Swedish welfare state and the perception of gender equality. While the egalitarian family is a policy goal, the economic vulnerability of single-parent households is often overlooked in policy debates. Further, various vulnerable groups tend to fall outside of the gender equality discourse; for example, older women in economically precarious situations and women in need of help and support in daily life. Discourses legitimise the allocation of resources to certain groups and policy areas. One example discussed in this report is that the gender equality discourse traditionally highlighted the situation of working mothers, justifying the fact that resources were allocated to publicly funded childcare. Retrenchment was easier to implement in eldercare given that working daughters were invisible in the policy discourse. In sum, we need to continuously examine normative assumptions; this is not only a symbolic struggle for a more inclusive discourse; it is also, by extension, a question of distributing resources.

## **VULNERABILITY AND TRANSVERSAL ADVOCACY**

I have paid attention to intersecting inequalities when describing the effects of welfare state change and reforms. For example, the report has described how some categories of women (e.g. older women, women with disabilities, working-class and/or immigrant women) who often fall outside of the dominant gender equality discourse have been particularly affected by welfare state retrenchment and increasing social inequalities.

However, intersectionality is a contested concept connected to heated feminist debates, and a comprehensive intersectional analysis is beyond the scope of this study. For example, I have not discussed the struggles and demands for rights of the LGBTQI movement, or analysed the social justice demands of the movement against racism and xenophobia. Nevertheless, focusing on vulnerability can be one way of generating solidarity across different social categories, and this report highlights policy debates and issues that deal with vulnerability. The section on feminist agendas has mentioned, for instance, advocacy for reducing economic precariousness/poverty, improving working conditions in female-dominated sectors, expanding and improving care services, and revaluing care work. Such political concerns can form the basis for transversal struggles, generating solidarity by focusing on vulnerability (see also Murphy / Cullen 2018).

## **FIGHT ECONOMIC VULNERABILITY**

Sweden stands out in an international perspective when it comes to growing social inequalities. As economic inequalities have increased significantly in recent decades, poverty rates have also augmented. As we have seen, immigration is connected to greater economic insecurity. For example, foreign-born women generally have a weak position in the labour market and foreign-born single mothers are the category with the lowest disposable household income. Further, the report has pointed out gendered practices regarding paid and unpaid work and care. Such practices shape women's economic positions as workers but also result in important gender differences in poverty rates among the older population. A salary that one can live on is central for the feminist struggle, but so too are dignified unemployment benefits and practices. As diverse voices have highlighted, there is a need for a feminist revision of the pension system in order to reduce poverty rates among older women. Although these matters are historical feminist issues, they are no less important today. Altogether, fighting economic vulnerability necessitates developing demands and strategies able to contest neoliberal discourses that downplay citizens' rights and social solidarity.

## **FEMALE-DOMINATED WORK SECTORS IN THE SPOTLIGHT**

Swedish policies generally aim to enable citizens to participate in the labour market, and gender equality policies are no exception. At the same time, as reported in this study and highlighted by various feminist and left actors, there are important gender inequalities connected to work life. The labour market is highly gender-segregated; the vast majority of women and men work in occupations that have an uneven gender distribution. While eldercare is the sector that is most gender-segregated, assistant nurse is the most common profession among working-class women. Female-dominated work sectors are characterised by low pay and poor working conditions. In addition, the work is typically associated with physical and psychological strain. As illustrated by the case of eldercare, women working in female-dominated working-class occupations are generally both underpaid and overworked. Moreover, employment in the domestic service sector has been promoted through the tax deduction for domestic services, but the working conditions are characterised by high insecurity and precariousness. Overall, improving the conditions of female-dominated work sectors is related to the valuation of female-coded (care) work.

## **REVALUE PAID CARE WORK**

Worldwide, care work for older people is attributed low economic and cultural value. Feminist activists and academics have emphasised that revalorising care is a necessary component of any just society. Nancy Fraser (2000, 2007) underlines that cultural and economic injustices are always imbricated with each other. Hence, struggles for a symbolic/cultural revaluation of female-coded care work can only be successful if linked to questions of economic redistribution. In addition, Fraser emphasises “institutional recognition”, a recognition that stems from laws, governmental policies and practices. The Swedish welfare state stands out from an international perspective in terms of redistribution of care responsibilities from the family to the public sphere. However, the public care sector offers low-paid, undervalued and heavy work. When we consider the

employment and working conditions of the female-dominated care sector, the Swedish welfare state cannot be described as women-friendly and “caring” (see also Stranz 2013; Stranz / Szebehely 2018). The situation provides an impetus for struggles towards an institutional recognition of paid care work. Following Fraser’s argument, it is clear that demands for a symbolic and cultural recognition of paid care work must be combined with demands for an economic revaluation of the work (i.e. higher wages). As such, the increasingly present discourse on professionalisation of care work must be framed in feminist terms and connected with improved wages and working conditions.

## **QUESTION THE MEANING OF FULL-TIME WORK**

Gender equality is often defined as equal participation in paid employment. When the emphasis falls on increasing women’s full-time employment, unpaid caregiving work and part-time work are understood as penalising women’s positions in the labour market. The policy measures that align with this idea include the promotion of women’s full-time work, discouraging part-time work and making fathers take longer parental leaves. However, these policies do not do anything to recognise the value of unpaid care performed for older adults, children and people with disabilities (see also Campillo, 2018) . Policy proposals that recognise the value of unpaid care work could, for example, promote men’s part-time work. The full-time employment norm in Sweden is problematic, not least considering that many workers in female-dominated work sectors experience full-time work as too physically and mentally exhausting. Reducing the hours of full-time employment could be one policy avenue to pursue. In Nordic neighbours Norway and Denmark, for example, full-time employment entails fewer work hours per week than in Sweden. While the idea of a six-hour work day is not high on the political agenda in Sweden, pilot projects implementing reduced working hours with full salary have taken place. This strategy should address not only the more privileged workers in, for instance, tech companies, but also working-class professions. Advocacy should stress a sustainable work life for all.

## **UNIVERSAL CARE SERVICES STILL CRITICAL FOR WOMEN**

As we have seen, retrenchment and NPM reforms have not hit all welfare sectors equally. While universalism has been strengthened in childcare services, publicly funded care for older people and people with disabilities has been subject to cutbacks. Fundamentally, informal family care for adults should be a voluntary decision, not an obligation (in practice) due to care gaps in the welfare system. The process of re-familialisation has affected both women and men, but working-class women are the category that performs most unpaid care. In order to support informal family carers, care allowances and care leaves could be complementary measures, but these risk becoming a women's trap as long as care is unequally distributed between women and men (see Ulmanen 2017b). All older people and people with disabilities, who need help and support with day-to-day living, should receive quality care services. At the same time, strengthening the universal system of care services is the best way to improve the situation of those who perform informal care. Universal care services are long-standing left-wing and feminist issues that are no less relevant and critical today.

## **REFRAME THE MEANING OF SUSTAINABILITY IN CARE**

While left-wing and right-wing parties often converge in their rhetoric on quality care for older and disabled people, the discourses on costs and sustainable financing legitimise cutbacks and, hence, reduced services and de-universalisation. While support for solidaristic funding remains strong among left actors, influential liberal and right-wing actors and private business have promoted more private funding in social care. As we have seen, they suggest, for example, higher user fees and the consumption of private domestic services as solutions. The widely shared normative assumption of eldercare as economically unsustainable also legitimises further targeting of those with the greatest care needs (see Peterson / Brodin 2021). In sum, demands for better care – and better working conditions for care workers – are easily marginalised by discourses on economic/financial sustainability. The notion that social care is too costly

for society has to be challenged; the needs and lives of vulnerable groups must be front and centre when we speak about “sustainability”.

The COVID-19 pandemic has sadly shed light on the lack of sustainability of the present aged-care system. In terms of mortality, older people with care needs have been severely affected. The pandemic has to some extent been an eye-opener for society, as the link between good working conditions and dignified care has hopefully become more evident. At the very least, the problematic employment and working conditions in the care sector have become more visible. The renewed attention paid to the eldercare sector can definitely be used by feminist and left actors in the struggle for more resources for universal care services and dignified care work.

## **ACKNOWLEDGEMENTS**

I wish to thank Ada Regelman (Rosa-Luxemburg-Stiftung Brussels Office) for her very helpful comments on various versions of the manuscript. Thank you also to Helene Brodin, Sara Erlandsson, Tine Rostgaard, Palle Storm, Anneli Stranz, Marta Szebehely and Petra Ulmanen (Department of Social Work, Stockholm University) for valuable comments, ideas and references.

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# ROSA-LUXEMBURG-STIFTUNG

The Rosa-Luxemburg-Stiftung is an internationally operating, left-wing non-profit organisation providing civic education. It is affiliated with Germany's 'Die Linke' (Left Party). Active since 1990, the foundation has been committed to the analysis of social and political processes and developments worldwide. The Stiftung works in the context of the growing multiple crises facing our current political and economic system. In cooperation with other progressive organisations around the globe, the Stiftung focuses on democratic and social participation, the empowerment of disadvantaged groups, and alternative economic and social development. The Stiftung's international activities aim to provide civic education by means of academic analyses, public programmes, and projects conducted together with partner institutions. The Rosa-Luxemburg-Stiftung works towards a more just world and a system based on international solidarity.

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This report deals with welfare state reforms and retrenchment in Sweden, the effects on women and gender equality, as well as feminist responses. The gender perspective adopted pays attention to intersecting inequalities and vulnerability in different contexts and in relation to different welfare issues. The critical importance of the distribution, organisation and valuation of care for women's lives and gender equality motivates the focus on changes in care policies and practices, including care for children, older people and people with disabilities, paying attention to paid as well as unpaid care and domestic work.