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### **Library Services to Institutions for the elderly in Sweden**

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Libraries have customers of all ages: toddlers, schoolchildren, teenagers, adults, families, and old people. Some of them are readers all their lives, some detect the joy of reading first when the active years are gone. Some old people don't read books, but enjoy music or journals. Public libraries are for all ages and if you cannot come to the library the library has to come to you.

#### **Institutions for the elderly in Sweden**

In Sweden, like in most industrialized countries, the population is growing old, we live longer and will have a longer period as pensioners with lots of time to fill. Reading is an important way to stay alert and interested in all that happens in your community and in the world..

Most pensioners over 65 are healthy and living by themselves, they can come to the library and take part in programmes, borrow books, use the computers, read newspapers and magazines just like younger persons. For younger senior citizens many libraries have special computer classes, reading circles and other programmes held during daytime. If you are ill or handicapped and cannot come to the library but live in your own home the library can send books and arrange other services.

In Sweden there are different kinds of care centres for the elderly that are too ill to be able to stay in their own homes. In the beginning of the 90ies the municipalities took over the responsibility for the elderly. Before that many elderly who couldn't stay in their homes were cared for in long time care hospitals financed by the counties. There patients lived four persons in one room in a hospital environment for the

rest of their lives. The new idea was that all old persons also the very frail needing lots of care all day long should live in their own small apartment furnished with their own things. In a “servicehus” you have your own apartment with a kitchen, but there is a restaurant where you can have your dinner, personnel to call if something happens, often also programs you can chose to attend, hairdresser, foot care specialists etc. In a “sjukhem” you get more care but every person has a room and often a small kitchen and a bath. You get all your meals served, there are nurses and doctors and therapists. For dementia patients there are institutions like big apartments where a group of 5-10 persons live, each person has a room of his own and then kitchen, living-room and other facilities are shared. Memory training is organized and medical treatment. In regular hospitals there are also many elderly, but they are not supposed to stay there but for active treatment. There is also mixed forms of treatment for the elderly, day-care and rehabilitation training in hospitals. There are some private institutions and some driven by care companies, but paid for by tax money from the municipalities.

When the municipalities started building “servicehus” in the 70-ies the idea was that senior citizens from 65 and up with no special health problems should live there. Because many more persons now get much older and need care for a longer time only persons with greater needs of different kinds of care get apartments there. You get help from the local government in your own home first, from help with cleaning once a week up to help three times a day with almost everything including medical care. Only when it is absolutely impossible to live in an ordinary apartment you get a place in an institution. That means that persons in “servicehus” and “sjukhem” often are over 80 and suffer from multiple illnesses. This is important for libraries to know when designing services and programs. Libraries do cooperate with the social authorities in the municipalities in creating services for the elderly in institutions.

### **Different ways to organize library service at institutions for the elderly**

Library services to different kinds of institutions for the elderly are the responsibility of the municipality and its public library. Sometimes the library is responsible for the services through its own budget allocation, sometimes the actual institution pays the library for the services. This depends on the economic model for each municipality.

In larger institutions there are often small libraries with a good location close to the main entrance, easy to use for all inhabitants and for the personnel. The use of the library is free for the elderly living in the institution, their relatives and for all kinds of staff. It is very important that everybody in the institution can use the library, that gives the library lots of good-will and relatives and personnel can help inform the elderly of what the library has to offer. For this reason it is also important to carry medical books and journals that cater to nurses and paramedics so that they will be interested and use the library. Relatives and friends of the elderly should also be able to find information about dementia and other illnesses that affect elderly.

The library collection has to include fiction and non-fiction, picture books, large prints, Easy-to-read books, talking books, music, perhaps videos, reference works. All of these small libraries cooperate with the nearest public library. Often the librarian in charge works both in the public library and in the institutional library. She borrows books from the main library for a customer or if she cannot find it in her library uses the interlibrary loan chain. She can also bring deposit collections to augment the small library. In most cases the library is always open, but the librarian has only 2-3 days of service there. If you want to borrow when the librarian isn't there you fill in a slip and leave it for the librarian.

In smaller institutions there is no real library with books of its own, but just a deposit collection from the main library. This collection is changed 2-4 times /year. Some new books can be brought when the librarian visits the institution. The books will then be placed on a shelf in a central place easy to find and anyone can borrow at any convenient time. If there are some elderly in the institution who read much they

can be put on the list as housebound readers and get books regularly after a telephone call to the main library.

Some “servicehus” are situated in a central place in the community and has a branch library in the same building. Then the elderly who can move around a little can come to that library as anybody else and borrow. The library also gives service by depositing books at different central places in the building and it is easy to give inhouse service since the library is already in the building. This kind of library can of course have better opening hours because they also cater to the community around. It could be open every day and arrange programs open to everyone.

### **Example Handen hospital, Haninge municipality, south of Stockholm**

Twenty years ago Handen hospital was a long time care hospital driven by the county council of Stockholm (regional authority responsible for medical care). Old patients lived in 4-bed rooms for the rest of their lives. Now part of the hospital is “sjukhem”, medical and daily care for the same kind of patients but in a more homelike atmosphere and with single rooms. But there is also a variety of other activities in the building like geriatric care, rehabilitation, day-care for the elderly which means intensive medical care for shorter time, then the patients go back and live in their own homes. All the different wards pay for the service of the library and its personnel. Relatives and the elderly patients can use it in different ways. There is a small library with a medical department. It is open two days a week for five hours with a librarian. The rest of the time you can visit the library and also borrow. The medical department is closed when the librarian is away. Valuable reference works got stolen when it was open without staff. The librarian takes a book trolley to all parts of the hospital and “sjukhem” once every fortnight. There are small deposit collections in all wards that are partly changed when she brings the book trolley.

The librarian works part time at the hospital and at the public library near by. She can bring books from the main library and interlend what she needs. She has a computer at the hospital library from which she can search for books. The lending system is manual. For the nurses and other medical personnel she orders books and articles from medical libraries. This service is very popular especially now when many more go to different kinds of classes for further education in medicine. If the staff gets a good service with medical literature they also get to know the library well and they can inform the patients about the library and its stock.

There is a Library council in the hospital with personnel from different wards, the librarian and the director of the hospital. They meet a couple of times a year to discuss service levels and programmes. All new personnel are taken for a tour through the hospital and they also come to the library to get information. A small information booklet is given to all new patients.

The librarian and a couple of therapists formed a group and put together their own exhibitions collecting the material themselves together with colleagues from different wards. One example is a Swedish coffee table, a very typical thing for old Swedish women to remember. They collected coffee cups with old patterns, tablecloths and also books about cakes and cookies etc. The exhibition was started with a coffee party for everybody. Through this group the librarian got very good contacts with wards and persons all over the hospital.

To give a good library service at a “sjukhem” the librarian has to have good contacts with all staff, best if you have a contact person in every department/ward so that you will get information about new patients and special wishes. A good contact with the management is also very important and at Handen hospital this is done through the library council.

## **Reading circles**

Many libraries in institutions for the elderly offer reading circles. The librarian reads aloud to the group and all members then discuss what is read. For the slightly demented this is a very good way to train the memory and it is also good to be part of a group. In some cases actors do the reading and the librarian helps to find suitable books. Sometimes you can use parts of talking books and then look at pictures in the printed book. Music can also be used as part of programs.

In Eskilstuna, south of Stockholm, the library is training staff to read to the elderly they care for in a project. Librarians often don't have time enough to read to groups and if personnel can do this it will be a natural part of their job to care for the elderly.

## **Memory training**

For patients with different kinds of dementia illness memory training groups are formed at the wards. The training often involves numbers, dates etc and can be tedious. Ingrid Lindwall, head of library services to hospitals and institutions for the elderly in Stockholm, had a very bright idea. Why not make the training fun? She put together boxes with old things on a special subject including books with many pictures, music cassettes and lent the boxes to the therapists at the hospitals and institutions for the elderly. Sometimes also librarians had groups that talked about a subject using the boxes.

For instance there is a woman's box, a man's box, and a coffee party box. In the woman's box there are pink undergarments, a straw-hat, curlers, hair-needles, and some books with many pictures of life in the countryside in the 20ies and 30ies. In the men's box there is a shaving knife, a hat, fishing gear, tobacco etc. First friends and relatives supplied the things but later on also local museums got interested and made some boxes about farm life etc. It is important for the library that you also have books, best with many pictures. Books about life in the countryside and also in the cities from the time the old persons were young are always very useful in the library. The boxes can be lent just like books to different institutions or by a therapist.

## **Cultural ombudsmen**

In Sweden the 90ies have been difficult times for libraries with budget cuts and the following cuts in programs. Also services to the elderly have been cut back. The librarians cannot do everything, they do need helpers when they want to give service to the elderly. Why don't give personnel at institutions for the elderly education about the library and about the importance of reading and culture for all ages? In many municipalities programmes with "kulturombud" (cultural ombudsmen) were started. All personnel working with the elderly in institutions and in the homes of the elderly were invited to seminars on library service, reading and culture. The seminars focused on the service to the elderly but did also give cultural impulses to the persons themselves. Authors were invited to read from their books and interesting museums etc in the community were presented. Then one or two persons from each institution were chosen and they got more information. The ombudsmen met regularly and learned more about library services. They then helped the library at their institution, informed their colleagues about the library, how to get books, about talking books and players. The ombudsmen got the possibility to use some hours a week to inform colleagues, the elderly and to go to meetings with librarians.

In small institutions with only deposit collections from the library the ombudsmen kept order on the shelves, called the library and ordered new books, informed new patients of the service. In the community of Värmdö outside Stockholm they even made two exhibitions in cooperation with the library. One was about their own work in institutions for the elderly now and historically. Värmdö is a community of

islands with fishermen-farmers, rapidly turning into a suburb of Stockholm. The second exhibition was about the life of the islanders some 100 years ago. This exhibition was held in the library and old persons from institutions came and demonstrated to children in the lower grades so that they could learn their history. Both exhibitions were very successful.

To inform and educate cultural ombudsmen first takes a lot of work from the librarian but in the end you get invaluable help to give the right kind of service to the elderly in different kinds of institutions and also to persons living in their own homes. In the county Sörmland south of Stockholm all municipalities have cultural ombudsmen and the county library arranges programs for them to give new inspiration and a chance to meet each other.

### **Help from relatives and friends**

The old persons now living in “sjukhem” are all very weak and often have many illnesses. They often stay in their beds or chairs and cannot move around a lot. Many are too frail and tired to hold and read a whole book. What can the library do for them? Should we do anything? If you are too tired to tell what you want to read or don't know what a modern library can offer, what do you do?

In 1994 a project was started where relatives and friends that visited the patients were contacted to help with telling what books or other media the patients wanted. (Biblioteket i vårdmiljön.) The project was funded by the county council of Stockholm as a part in a large program about culture in hospitals and care centres for the elderly, Kultur i vården visavi vården som kultur. (see Bibliography, p. 12)

Two hospitals, Rosenlund in Stockholm and Handen in Haninge south of Stockholm were chosen. Two wards in Rosenlund and one in Handen took part. From 105 patients 36 took part. The ones that didn't participate were either too ill or didn't have any visitors to ask. The visitors got questionnaires to fill out about their relative's/friend's interests, former jobs, if they had lived their lives in the city or in the county. They also told the library about interests in music and reading ability. Then the librarians tried to find suitable materials according to what the relatives had said.

After some months of giving the patients books and cassettes etc according to their relative's answers, personnel at the wards, the patients and the relatives were asked what they thought about the project. “It is the small wonders that count” was the comment from one nurse. She had seen how a gravely demented woman got a music cassette with children's songs she recognised, woke up and talked. Before that she had been lying down without any reaction at all. The relatives were very positive and many of them had talked with their mother/father etc about the books and music. They were grateful to find new things to talk about during their visits. Many didn't know that libraries do lend talking books, music and also tape-recorders. An old lady of Indian decent was very moved when she got a book about horses. Her son had told the librarian that his mother grew up with horses in India. For immigrants who can forget their Swedish when they get dementia it is very important to get in contact with relatives and with their help find the right books in their native language.

To very old and frail patients you cannot lend big books, but the library has music, books with many pictures, talking books that can be of interest. Through contact with relatives and friends visiting the hospital the right music or book can be found and mean very much to a frail old person. It also gives visitors something to talk about with their relatives. Music can be remembered by dementia patients longer than words.

### **Conclusion**

In all industrial countries the age-group over 65 and the very old over 80 increases. Many live a good life relatively healthy to a high age, but there is also a growing group needing care in different kinds of institutions. What kind of service can libraries give to the elderly in those institutions? Many are frail and suffer from different kinds of illnesses also weakening eyesight and hearing loss. It is important that there is library service also in these institutions. Small libraries, deposit collections, service from the public library directly to homebound persons are the services offered by Swedish public libraries. Most important is the contact with the nearest public library. A small library cannot carry all books and other media needed, there must always be loans from other libraries.

In Sweden we only use librarians and library assistants in these services and then lately get the help of the hospital personnel. We don't have any volunteers. In other countries maybe volunteers might be very useful in this kind of work, but there must be librarians choosing books and running the service.

It is very important to have different kinds of media, Easy-to-read-books, large print books, talking books, books with many pictures, music and of course ordinary books fiction and non-fiction. Maybe also something like the boxes with old things combined with books.

With a good media stock you can arrange programs like reading, memory circles and discussions. Everybody, also very old and very sick persons have the right to find what they want to read or listen to and don't forget that among the very old there are also persons who can read anything even though their body is frail.

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