

« The price of custom »: religious communities, aging and the evolution of care practices.

In Switzerland as well as in France, Catholic religious communities are aging. The average age of their members is becoming greater, rendering the customary care of elderly nuns by younger ones more difficult. Beyond the age of 80, the risk of suffering from a range of health problems increases. Until now, when cases of dependency due to aging arose, communities either turned to external health professionals to provide services within the convent, or resorted to transferring members suffering from health problems to long-term care institutions.

Recently, some religious communities have devised innovative arrangements and have set up health care services – staffed and managed by lay professional teams – within the convents themselves. These innovations lead us to believe that congregations are focused on attempting to move away from being entirely dependent on existing health care services in order to avoid disappearing altogether. For these communities, the health and social care field represents an essential partner; yet it is also a domain characterised by norms that are not easy to adapt to interventions taking place in a collective ruled by its own specific codes.

Moreover, the religious dimension interferes with the secular views and approaches of health personnel, in terms of the care provided as well as in terms of conceptions of the management of illness, dependency and death. This sociological study seeks to re-contextualise these changes and to analyse their orientations in order to bring to light the original character of new schemes being created.

Through its examination of both institutional innovations and of the creation of new ways of organising the spheres of daily social life, this study will provide an account of the arrangements operating within institutions that have effectively become hybrids. The elements to be researched, taken together, pertain to three levels of analysis, i.e.: the State and religious congregations (macro level); health services providers and religious communities (meso level); health professionals and community members (micro level).

The study, designed to be conducted over a 36-month period, will take place in two long-term care/religious institutions: the ISRF (Health care institution for religious community members) in Fribourg, Switzerland and the nursing home of Saint-Ferjeux in Besançon, France.

The goal is to show the ways in which both these institutions represent innovative structures, created within a context of negotiations with the State and aiming to be specifically adapted to the needs of dependent older religious community members. The project itself is innovative, as it focuses on institutions that present themselves as providing alternatives to customary care arrangements.

Research team

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36 months