This research set out to examine work and well-being of workers in elderly care from different theoretical perspectives. Work and problems were described, explanatory variables of stress and satisfaction discovered, relationships between stressors and job characteristics, relationships between patients' functional abilities, stressors, physical load, psychological stress symptoms and musculoskeletal symptoms explored. Also workers' knowledge about patients and cultural aspects were described.

The data were gathered using a questionnaire survey of personnel, interviews of employees and measurements of patients' functional abilities in residential homes, health center hospitals and home care. The data were analyzed using the t-test, regression analysis and confirmatory factor analysis (LISREL). The concepts workers used to describe their clients were categorized and then quantified. Workers' use of categories were studied using correlations.

Work in institutional care is demanding, in home care workers had less symptoms. In institutional care the most severe problems were ergonomic problems, time pressure, patient-related stressors, low skill utilization and autonomy, low levels of task identity and lack of feedback. Different stress symptoms and job satisfaction were explained by separate factors. Well-organized work was noticed to decrease time pressure and thereby physical load. The influence of psychosocial factors on musculoskeletal symptoms was, however, mediated by psychological stress symptoms. Patient characteristics also had effect on stress. Stress was related to workers' interpretation of how stressful patients were.

Workers' knowledge was heterogeneous and conflicting cultures occurred. When workers described patients as in need of help or as ill, relationships to other parts of the concept network were rare. Seldom emphasized were social, personal and psychological aspects. When patients were described using concepts relating to personal or social aspects, relationships between different parts of concept network were frequent. Stress and job satisfaction were concluded to be separate phenomena, but the explanatory variables of them to be related. The results supported earlier findings about the relationships between psychosocial factors and musculoskeletal symptoms, and that by redesigning work physical load can be reduced. As the patient-related stressors were signified as important stressors and knowledge about patients differed strongly, work orientation may be related to stress and job satisfaction.