

“I Can’t Die as Long as Someone Cares for Me” – Experiences of Field Research on Old Age, Loneliness and Solitude in Zagreb County

The aim of this paper is to present the process of field research on aging, loneliness and solitude in the Zagreb County conducted in the period from January to May 2025, followed by making an ethnographic film. The paper will present certain aspects of the field research experience with an emphasis on the challenges and concerns surrounding field planning, defining and detecting vulnerable groups, the role of sensory experiences, and considering vulnerability and setting boundaries in research that is psychologically and emotionally demanding.

Keywords: field research, aging, loneliness, Zagreb County, care

INTRODUCTION

The issue of aging and old age¹ is increasingly present in public discourse and policies. The example of designing social policies of the City of Zagreb (cf. Grad Zagreb 2025) shows how the phenomenon of population aging has been recognized, which necessarily brings with it changes to which we as a community must respond. According to the 2021 census, 201,773 older persons² lived in single-person households in the Republic of Croatia, 37,975 in the City of Zagreb and 11,280 in Zagreb County. According to the same document, the percentage of older

1 In this paper, I use the term “older persons” according to the definition developed by Tihana Rubić (2018: 8.). However, it is important to emphasize that defining age is complex and that biological and sociocultural factors can be considered (Rubić 2018: 8). Some authors point out that defining age according to chronological age is problematic – people of the same chronological age can have completely different experiences of old age (Pierce and Timonen 2010:14). However, for the purposes of the research, I used the term “older persons” for individuals aged 65 and over.

2 Persons aged 65 and over.

persons in single-person households compared to the rest of the elderly population is as much as 23.20%³. According to data from the Croatian Bureau of Statistics from September 2024, which refer to estimates made in mid-2023, the shares of the population aged 65 and over in the total population by county are nowhere below 20%, and in some they even exceed 27% (for example, in Šibenik-Knin County). These population aging trends are in line with general trends of increasing numbers of older persons (cf. World Health Organization 2025). Confirmation of the fact that the issue of old age is emerging as important is its greater visibility in political discourse, so the topic of providing a better quality of life for older persons appeared as one of the campaign promises in the local elections held in May 2025. For example, in Samobor, one of the parties in its campaign mentioned assistance to “older fellow citizens” in the form of home help or an affordable retirement home (cf. *Možemo! Samobor 2025*).

Current capacities of retirement homes are not sufficient (or are unaffordable) for many older persons, and many older persons live in single households – alone and without the support of their immediate family (cf. Rubić and Vukušić 2022: 2-3). In addition, it is also necessary to consider other factors – for example, women entering the workforce⁴, which has affected the possibility of providing care within the family (Hochschild 1997, referencing Degiuli 2007: 193) or the development of biomedicine, which has extended human lifespan by making many fatal diseases chronic, ultimately resulting in a large number of older persons in need of care (Buch 2015: 278 referencing Manderson and Smith Morris 2010).

Qualitative research can and should play a role in reflecting on and presenting new solutions to the problems of a large number of older persons who live alone, and are therefore at greater risk of feeling lonely. Therefore, it is not surprising that the number of research in Croatian ethnology related to old age is also growing (cf. Rubić 2018; Vukušić and Belaj 2022; Rubić and Vukušić 2022; Vukušić 2024). In her paper, Ana-Marija Vukušić (2024: 46-59), whose research I used when planning the fieldwork, provides a detailed overview of the connection between old age, loneliness and isolation, as well as reflections on the meaning of these phenomena. In July 2024, I started planning the fieldwork, initially intended as research that would question the possible connection between old age, loneliness and solitude in the Zagreb County⁵. The research methodologies chosen were job shadowing, participant observation, informal conversations, in-depth interviews and sensory ethnography. During the research, and as I will explain later, one of the topics that emerged was care, as well as reflections related to the experience of fieldwork that ultimately resulted in the filming of an ethnographic film.

This paper emphasizes the presentation of the field research process which was accompanied by care – care about proper planning and implementation of field research, care about all research participants, and care about vulnerability in research. Care also emerged as a separate topic within the research, and it related to the care provided to Red Cross beneficiaries by employees. What is certainly important to emphasize is that in this research, I view care not solely as a separate topic, but also as an ethnographic relationship shaped by the research process.

3 The percentage was calculated based on data available in the document “Population by age, sex, household type and family status by counties, census 2021” (Državni zavod za statistiku 2023).

4 Although it goes beyond the scope of this paper, it is necessary to emphasize in this context that women entering the workforce does not necessarily mean that they stopped providing primary informal care to older family members, but that their role as primary caregiver in the family consequently greatly influences their career choices, types of employment, and so on (Ehrlich et al. 2020).

5 The field research was funded by the Zagreb County Program of Public Needs in Culture.

In five separate chapters of the paper, I present the challenges and problems I encountered with the aim of shedding light on certain parts of the fieldwork experience that I actively cared about. The chapter on field planning presents the challenges of field planning and the selection of gatekeepers. I will briefly review the research approach and reflection on the multiple roles of the volunteer researcher in the second chapter. The third chapter, which refers to sensory ethnography, presents reflections on the importance of addressing field experiences in a timely manner and adapting the methodological approach. The fourth chapter presents reflections on the ethics of conducting research with groups that can be defined as sensitive, and the ethical dilemmas that such terrain inevitably brings. I present reflections on vulnerability in research and timely establishment of research boundaries in the fifth chapter. In the concluding remarks, I summarize the paper by reflecting on how in this research on a sensitive topic, the concept of care did not emerge solely as a topic, but also as an ethnographic relationship shaped by the research process.

Parts of this paper were presented under the title “I Can’t Die as Long as Someone Cares for Me - Experiences of Field Research on Old Age, Loneliness and Solitude in Zagreb County” at the 20th Annual Conference of the Croatian Ethnological Society, held in Zadar from 21 to 23 May 2025. The topic of the conference was “The ‘Burden’ of the Field – Experiences and Skills in Zones of Ethnographic Knowledge”, and various field experiences, challenges, problems and reflections related to difficult field research were presented.

FIELD RESEARCH PLANNING AND GATEKEEPERS

“The south wind is blowing. I feel nervous. There are about 15 older persons exercising in front of the cinema. I wonder if the older persons in Žumberak exercise in groups?” (Field diary, January 27, 2025)

When planning the field research, the target group I wanted to interview were elderly people living alone in the research area. I chose the Red Cross to “enter the field”, since I assumed that through this organization I would reach a larger number of research participants who live alone and who receive home help provided by this organization.

Before registering for the field research, I contacted all Red Cross branches in Zagreb County by phone and email in order to determine the possibility of reaching the target beneficiaries and my potential research participants through that organization. The only Red Cross branch I managed to arrange collaboration with was the Samobor Red Cross (SRC). I had a meeting with the director, explained the research to her and received written consent to go with the employees to visit their beneficiaries in Samobor and its surroundings, and part of Žumberak. The employees of the SRC⁶ were the gatekeepers of this field and, in that sense, they had an impact on the field research. According to the definition provided by Tom Clark (2011: 486), gatekeepers are: “(...) individuals, groups and organisations that act as intermediaries between researchers and participants’ illustrates the range of actors and entities that can act as a gatekeeper”.

Given that I was job shadowing the SRC employees during their working day, I did not have the opportunity, for example, to decide on the organization of visits to beneficiaries. Ana-Marija Vukušić and Melanija Belaj (2022: 67) wrote about a similar experience and entering the field. While conducting the research in Žumberak, they also visited users with a nurse, emphasizing

6 The research would not have been possible without the help, understanding, time and patience shown by the employees of the Samobor Red Cross.

that the choice of gatekeeper, i.e. entering the field, determined the final result. However, given the target group I wanted to interview, entering the field through the Red Cross gave me the opportunity to get in touch with a larger number of research participants who I would not have been able to reach without the mediation of Red Cross employees.

I went to the field with them in January, February and March 2025 for a total of six working days. During this period, I visited an average of ten people per field trip, and we stayed for 15 to 25 minutes, and once for an hour. The time of the visit depended mostly on the schedule and the beneficiaries. In total, I visited 23 people during the entire fieldwork. After establishing contact with the research participants with whom I decided to conduct interviews, I went to visit them on my own in April and May. It can be said that the gatekeepers, in this case the Red Cross employees, became part of my fieldwork.

“A GIRL WHO CAME TO HELP US A LITTLE AND WHO IS DOING SOME RESEARCH” – RESEARCH APPROACH IN THE FIELD

“It’s morning, I step into the SRC office where the ladies are arranging and preparing food for the beneficiaries we will visit. Everything smells of goulash and a mixture of stewed vegetables, meat and tomatoes. I felt a knot in my stomach. I am very uncomfortable and I want to help somehow because otherwise I just feel like an intruder.” (Field diary, January 27, 2025)

An extract from this field note, written on the first day of fieldwork, immediately after arriving at the SRC premises, outlines my thoughts upon entering the field – discomfort and the feeling like a burden marked the first hours of the fieldwork. At the very beginning, it was clear to me that my research position would be somewhat unusual, and the issue of access in the field quickly proved to be extremely important to address and define.

Given the specificity of entering the field, where I, together with SRC employees, visited their beneficiaries and therefore participated in delivering food and other supplies, from the very beginning of the field research, I had doubts about my field position or role. I traveled with the employees in the Red Cross’ official car, packed things into the car with them before leaving, and upon arrival at the beneficiaries, I often distributed food and/or supplies.

This field work, due to the method of entering the field and its nature, sometimes required overlapping my research and volunteer roles. I could not just be an observer-researcher, a person who records events or, in moments when the organization of the work allowed it, a conversation partner for elderly. The field was dynamic and required me to fit into the daily activities of the Red Cross employees. After all, the workers themselves introduced me to the beneficiaries as “a girl who came to help us a little and who is doing some research”. Augusto and Hilário (2019: 22) provide a review of the dual approach of researcher – volunteer, emphasizing and warning that the demands for an ethnologist, if he or she decides to take a volunteer approach to the field, are threefold – in relation to research, in relation to the organization in which he or she volunteers, and finally in relation to the beneficiaries of the volunteers’ services. Here I would like to emphasize that the duality of my role as researcher – volunteer in the field is something that presented me with a methodological challenge. Where does volunteering begin and research end, and is it even necessary or possible to separate them? Ana-Marija Vukušić and Melanija Belaj (2024: 331-368) provide an answer to this question by presenting the research role as a dynamic process in

which seemingly unconventional approaches become valuable methodological tools considering the different demands of the field.

I would like to point out that when conducting the research, I clearly indicated to all beneficiaries that my primary role was that of a researcher – without a research question and a primary research position, I would not have found myself in the role of a volunteer. However, the Red Cross beneficiaries often saw me as a fellow Red Cross employee who regularly visited them, once again emphasizing the role of a gatekeeper during the fieldwork, through whom the fundamental trust for conducting research was almost guaranteed or at least greatly facilitated. It should be emphasized that the role of gatekeepers can be dual, and so Lund et al. (2016: 281) point out the possibility that gatekeepers can unintentionally obstruct the research. For me, this was not the case, but I was equally clearly aware of the role that the employees of the Red Cross Samobor played in the lives of the beneficiaries they visited and how their mediation influenced my fieldwork experience and access to data.

EXPECTATIONS AND REALITY – HOW I DID NOT ANTICIPATE SENSORY EXPERIENCES

“Among the impressions, I would also like to mention the smells that have an extremely strong impact, to the point that it’s sometimes difficult for me to concentrate on anything else. That was a big problem for me today too. I was terribly uncomfortable and felt very bad about it, but I simply cannot help myself. It is something that I will think about for a long time.” (Field diary, February 20, 2025)

This field note was written during my third fieldwork. The smells I refer to in it were also present during previous fieldworks, but the smells were not part of my notes. I was very aware of the unpleasant smells from the very beginning, but I felt very uncomfortable writing down my impressions of them in the field diary. The smells of urine, feces, and stale air often filled the living spaces of the people I visited with the Red Cross employees. Upon entering the rooms, these smells often intertwined until they became the only thing I was aware of in those spaces of someone’s everyday life.

Even though I planned and thought about the fieldwork, there were some things I did not count on and became even more aware of during the fieldwork. First of all, this refers to my own sensory experiences of the different life circumstances in which people live, which greatly contributed to my initial impressions.

Sarah Pink (2015: 3) points out: “An acknowledgement that sensoriality is fundamental to how we learn about, understand and represent other people’s lives is increasingly central to academic and applied practice in the social sciences and humanities.” The same author sees sensory ethnography as a methodological tool that provides a framework for understanding ethnographic research, but also the researcher and his or her position (ibid.: 7).

During this research, olfactory and tactile experiences influenced my recording of the everyday lives of the people I met and spent time with. Smells (of food, urine, different living spaces) and the feeling of coldness or warmth created a picture of everyday life even without interviews or spoken words. Here, it is worth highlighting the idea of David Howes and Constance Classen (2014: 1), who believe that the way we experience the world through our senses is culturally

conditioned and that the experience of a certain phenomenon is not only shaped by the meaning that a certain sensory phenomenon has, for example, for a researcher, but is also shaped by social values.

Here, I would like to emphasize the importance of self-reflection on one's own (im)partiality, as well as reflecting on and defining the personal and social factors that influence the researcher's olfactory or tactile perception (Pink 2015: 58). Kelvin E. Y. Low (2009: 31) in an extensive study of olfactory sensory ethnography points out that for the purposes of ethnological research:

“(...) we should question the often taken-for-granted nature of everyday life – in this case, the employment of our senses, in particular our olfactory possessions. The oftentimes unquestioned, the quotidian, therefore, needs to be unpacked, rethought and prodded so that we can come to analyse olfaction in everyday life experiences, exploring its roles as a classificatory schema of social actors, places, and experiences through historical and contemporary dimensions.”

In this particular case, it meant for me to define my own perception of a good or bad smell, or of the excessive coldness or warmth in the space, which could potentially affect the interpretation of the collected data. For me, smells are related to hygiene and creating order, as defined by Mary Douglas (2001: 2):

“Hygiene, by contrast, turns out to be an excellent route, so long as we can follow it with some self-knowledge. As we know it, dirt is essentially disorder. There is no such thing as absolute dirt: it exists in the eye of the beholder. If we shun dirt, it is not because of craven fear, still less dread of holy terror. Nor do our ideas about disease account for the range of our behaviour in cleaning or avoiding dirt. Dirt offends against order. Eliminating it is not a negative movement, but a positive effort to organise the environment.”

For me, unpleasant smells, besides being uncomfortable, were also a possible indication of something dirty, and therefore dangerous, something I should stay away from. By becoming aware of the above, I had the opportunity to detect my sensory (im)partiality that could easily classify such living spaces that differed from my idea of “normal” into vulnerable groups, those that are not within the boundaries of the order I know. It is also interesting and worth mentioning that towards the end of the field research, I got used to the smells of different living spaces, they became normal, part of something expected.

Likewise, very often my perception, especially of sensory experiences, differed from that shared by my research participants, so on one occasion, while talking about the coldness in the living space, one research participant claimed that he was not cold because he lived in much colder conditions. My experience of that same space was completely different. Our normalities differed, as did the criteria for the acceptability of space, temperature, and other subjective phenomena. Here, however, I would like to emphasize that during the research of a certain situation, such as the lack of a toilet, drinking water or heating, I did not relativize it in relation to my perception or self-reflexive impression, but rather viewed it within the conditions that every individual should have for a normal life.

“DO YOU UNDERSTAND WHAT I DO?” – ETHICS AND THE ISSUE OF VULNERABLE GROUPS

The beneficiaries I met in the field were often older persons living in poor living conditions and very often with serious illnesses. For this reason, one of the important questions was the possibility of the need to detect and define such people as members of certain vulnerable groups. Also, one of the questions was what exactly addressing an individual or group as vulnerable implied for fieldwork, approach and research.⁷

Bracken-Roche et al. (2017: 1-30) point out that originally the concept of vulnerable groups served as a reminder to researchers that for certain groups of people there is a greater possibility of negative consequences, but over time the definition of vulnerable groups has become more vague. Following this, some authors question the concept of vulnerable groups, as well as the usefulness of this term in research, while emphasizing the “fetishization” of the use of this definition (cf. van den Hoonaard 2020: 577 in Iphofen 2020). Defining an individual/individuals as a member/members of a vulnerable group/groups can easily contribute to even greater marginalization and stereotyping (cf. van den Hoonaard 2020: 579 in Iphofen 2020), ultimately causing even greater harm to the researched person or community.

It is also important to adopt ethical practices of research: the approach and conduct of research and ultimately the interpretation and presentation of the collected data, should always follow the same principles, regardless of whether the group concerned is one that could be defined as vulnerable or not. Thus, Ron Iphofen (2021: 12) states: “Underlying these frameworks are some basic ethical principles. These include doing good (beneficence), avoiding doing harm (non-maleficence), and protecting the autonomy, wellbeing, safety and dignity of all research participants.” Ethical research, which includes, for example, consent to participate, is never static, but is a dynamic process that continues over time and that we critically reflect on (cf. *ibid.*: 4). Ethical decision-making in research is fluid (cf. *ibid.*: 17) and it is the responsibility of the researcher to rethink and question certain paradigms (such as vulnerable groups and who belongs to them) in order to give voice to the research participants in a right way, while protecting their dignity, and to provide them with autonomy unbound by ideas, laws and policies that may (with the best of intentions) often unintentionally marginalize them. When planning field research, it is important to define ethically challenging parts, as well as detect situations in which research participants could potentially be at a disadvantage. Given the research topic, I viewed the definition of a vulnerable group as a tool that the researcher uses to assess a specific situation that could potentially cause harm to the research participants (cf. Ho 2017: 175). Based on the guidelines advocated by Will C. van de Hoonaard (2020: 584) regarding the definition of a vulnerable group, for the purposes of my research, I defined a vulnerable group inductively – using literature and based on initial fieldwork. The definition I offered is based on the definitions offered by Mary Cipriano Silva (1995: 15) and Linda W. Moore and Margaret Miller (1999: 1034), according to which the vulnerable group includes: “older persons who, due to illness or

7 I thought about the issue of ethics and vulnerable groups in more detail during my classes in the courses of the doctoral study of Ethnology and Cultural Anthropology at the Faculty of Philosophy in Zagreb - Qualitative Research Strategies and Ethical Challenges (Full Professor Nevena Škrbić Alempijević, PhD, Full Professor Marijana Belaj, PhD, Associate Professor Sanja Potkonjak, PhD), *Situirana etika* (Full Professor Marijana Belaj, PhD, Associate Professor Sanja Potkonjak) and *Vizualna istraživanja i primijenjena vizualna etnografija* (Associate Professor Tanja Bukovčan).

life situations, find themselves in unfavorable living conditions, and who are characterized by a lack of opportunities to independently fulfill their needs”.

For my research, an ethically sensitive and important part of the research was obtaining informed consent from my research participants to conduct the research, i.e., the interviews. Special emphasis was placed on ensuring that the people I would interview understood my role as a researcher and the topic I was working on, and that they were capable of making an informed decision on their own, especially considering that these were people who lived alone and were often in poor health.

With one research participant, upon his informed consent, I conducted several interviews and ultimately made an ethnographic film. I would like to emphasize that he is fully aware of the topic I am dealing with and sees my research as a way to talk about topics he considers important – which primarily relate to topics of care, illness, interpersonal relationships, and which then consequently outline topics of old age, solitude, and loneliness. He explicitly wanted me to use his name in the film and to film him entirely. I had a lot of dilemmas with this, especially considering that the research participant was in poor health, a poor economic situation, and according to various (including my own) parameters, he fell into a vulnerable group. However, I decided to respect his decision and give him a voice. His understanding of the research topic, my role, as well as his ability to consciously give informed consent while respecting the principles of ethical research confirmed my decision to “put my discomfort aside” and give my voice to the research participant, who emphasized how important it was to him that “someone is dealing with this topic”. Sarah Pink (2015: 68), writing about ethnographic sensory research, emphasizes that one of the key elements of ethical research is that our respondents actively participate in it.

During the filming and in the conversation during the filming breaks, it was important to me that the research participant confirmed his decision to participate, to continue participating, and that he knew that we could stop the filming at any moment. In agreement with him, he will be the first to watch the film, and only after his approval will I show the film to the public. Also, after the filming was over, I asked him about his impressions and experience of participating. He replied that he finally had someone to talk to and that he enjoyed it. The opportunity to participate in filmmaking for him was to step out of a marginalized group (serious illness and poor economic situation) and take on a narrative about his life in which he depends on other people’s care. This feedback was important to me because I wanted everyone involved to get something out of this project, even if it was just a moment to tell their story.

CARING FOR BOUNDARIES: ABOUT THE CARE AND VULNERABILITY OF RESEARCHERS

At the beginning of the paper, I pointed out that one of the topics that emerged during the research was certainly the concept of care⁸. In one of the interviews, talking about the care provided

8 In the Croatian language, alongside the term “skrb” also appears the term “briga”. Hrvatski jezični portal (Croatian Language Portal) defines “briga” as: a. a feeling of anxiety about someone or something [that causes worries]; b. a thought directed towards the execution of an idea [to take care (of something); to start worrying, expr. to become concerned]; meton. what causes worries (Hrvatski jezični portal [s.a.]. s.v. “briga”). “Skrb”, on the other hand, is defined as: care for others (Hrvatski jezični portal [s.a.]. s.v. “skrb”). It is noticeable that the word “briga” encompasses a larger number of possible meanings compared to “skrb”. For this reason, I will use the word “briga” in this paper, as it covers physical care for someone as well as the feeling of concern.

to him by Red Cross employees, the research participant pointed out that “he cannot die as long as someone cares for him”. It was obvious that care would become one of the parts of my research.

Elena D. Buch (2015: 279) emphasizes the plurality of theories of care, but at the same time emphasizes the variability of the concept, which can include everything: from everyday actions, biomedical procedures to affective states or various forms of moral experiences and a sense of duty. Care can be viewed as an action (taking care of someone) or a feeling (caring) (cf. Buch 2015: 279 referencing Tronto 1994 and Ungerson 1990). It is perhaps particularly interesting to cite the thoughts of the physician and medical anthropologist Arthur Kleinman (2009: 293), who in his essay entitled *Caregiving: the Odyssey of becoming more human* writes about care (especially about caregiving):

“It is also far more complex, uncertain, and unbounded than professional medical and nursing models suggest. I know about the moral core of caregiving not nearly so much from my professional life as a psychiatrist and medical anthropologist, nor principally from the research literature and my own studies, but primarily because of my new life of practice as the primary caregiver for Joan Kleinman.”

It is clear that caregiving is a personal experience gained through the very act of caring for another person. Also, in another essay *Caregiving as moral experience* Arthur Kleinman (2012: 1551) emphasizes that care implies “cultivation of the person and the relationship through practices of attending, enacting, supporting, and collaborating”. Care is dynamic and takes on meaning in the dynamic relationship between caregiver and care receiver (cf. Seo 2020: 6). It is clear that the relationship between Red Cross employees and their beneficiaries is about care, which then emphasizes the absence of family care, loneliness and isolation. The employees of SRC show their care in two ways – through practical physical actions (bringing food and supplies, helping with hygiene, cleaning the space), but also through the social component, which is equally important for the vast majority of beneficiaries. In addition to the relationship between employees and beneficiaries, the concept of care also appeared in the relationship between beneficiaries and the researcher, i.e., me. By going to the homes of SRC beneficiaries and learning more about their lives and everyday routines, I myself developed a sense of care for them.

Care does not have working hours from 9 am to 5 pm, and I realized this one day when I happened to encounter one of the participants I met during fieldwork and who then invited me for coffee. I had no desire to accept that invitation. I had lunch waiting for me at home, so I politely declined the invitation, only to spend the rest of the week thinking about whether I was a bad person and an even worse researcher.

My care, and immediately after that the feeling of guilt, began the moment I met the beneficiaries, some of whom became my research participants. Jacqueline H. Watts (2008: 9) when working with research participants and topics that could be characterized as sensitive or difficult, points out the need to set boundaries in order to create: “a sense of emotional balance, taking care to be close, but not too close, to participants, ensuring that (we) can retain the filtering and distilling functions that are core to the agency of the qualitative researcher when conveying the stories of participants”.

During fieldwork and visits to the homes of different SRC beneficiaries, I saw different situations, human tragedies, and thought about how people not far from where I live do not have

hot water in their homes. Seeing often means caring. Our profession requires us to care before, during, and after fieldwork, and by entering the living spaces, spending time with our research participants, their stories and problems (easily) become our own. Lynette Sikic Micanovic et al. (2020: 2) write about the problems faced by researchers dealing with sensitive or difficult topics, namely the vulnerability of researchers and the need to address different types of vulnerability, emphasizing: “The reasons for addressing researcher vulnerability are twofold: to protect the research team, especially younger and less experienced members, and to foreground the importance of considering researcher vulnerability issues throughout the research process, particularly in sensitive research.”

Taking reflective notes on field impressions is one of the tools recommended as a way of self-reflective viewing of fieldwork (Micanović et al. 2020: 4), and here I would also emphasize the importance of talking with experts and colleagues with the aim of regulating experienced events. The importance of sharing field experiences proved to be a particularly significant topic at the annual meeting of the Croatian Ethnological Society in Zadar (21 – 23 May 2025).

Finally, the experience of fieldwork with sensitive and difficult topics emphasized the importance of setting boundaries – both for myself and for my research participants, to minimize potential disappointments.

CARING ABOUT FIELDWORK OR FIELDWORK ABOUT CARING? CONCLUDING REMARKS

The aim of this paper was to present a behind-the-scenes look at field research – an article, an ethnographic film, or other type of presentation – and to provide an overview of the process and a reflection on the challenges of researching sensitive topics. The paper presents different parts of field research, but writing about them and reflecting on them, the common denominator of this field experience is, as stated in the introduction – care. Care as one of the research topics, but also care about the proper conduct of field research, care about the methodology, care for self-reflectivity, care for all research participants. In this context, this paper reflects on care in two ways – as a topic and as a part of field research, which in the example of this paper is outlined in different stages of planning and conducting the research.

By researching old age, loneliness and solitude in the research area, the very choice of gatekeepers turned care into the leitmotif of the research – the presence of Red Cross employees in someone’s life often indicates a lack of care provided by their families, friends, or acquaintances. Care contributes to an individual’s quality of life in various ways, and we could even say that in certain situations it is necessary for life, as confirmed by the research participant emphasizing that “he cannot die as long as someone cares for him.” Unfortunately, despite its importance, care is not equally available to everyone. Within the conducted research that problematized old age, solitude, and loneliness, the lack of physical and social care within the family or social circles leads to the demand for care in other forms such as associations, organizations, informal and formal care systems. The care provided by these institutions is not only physical (such as feeding, washing, administering medication), but also has an important social component. I can confirm the latter because by visiting the Red Cross beneficiaries in the field, one of my volunteer roles was to spend time talking with them, which they gladly accepted. It is perhaps possible to assume, based on the statistics cited at the beginning of this paper, that with the now inevitable aging of the population, there will be an increasing need for various forms of care and we will have to think about alternative ways to meet the growing demand for it.

From another perspective, care, as I have already stated, turned into a methodological question of this paper. Does care hinder us in the analytical reaching scientific conclusions, setting research boundaries, or is care a methodological tool for us as ethnologists and cultural anthropologists, which allows us to ethically conduct research, notice details, develop a relationship and build trust with research participants? Can we observe, participate, conduct interviews, film, and be in the field without caring before, during, or after the research? Following these questions, I would like to emphasize that my own research care was evident in the constant reflection on the correctness of methodologies and approaches, and ultimately in the identification and timely addressing of field challenges. Despite the indispensability of care in reflecting on and conducting field research, this experience also confirmed the importance of setting boundaries, especially in care.

However, demanding topics encourage us to constant questioning and critical reflection. The ethnological field research is not static; it often requires the researcher to adapt quickly, improvise, and there are often situations to which we do not have an immediate response. Self-reflective notes, taking field notes, as well as the ability to share impressions and questions with colleagues are an important part of finding answers to the questions we encounter while conducting field research.

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