

RESEARCH TITLE-

**MASCULINITIES AND AFFECTIVE
EQUALITY PRACTICES IN PROFESSIONAL
SOCIAL CARE IN IRELAND**

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ABOUT ME...

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ABOUT THE RESEARCH



RESEARCH AIMS

Explain how social care workers' **affective practices**, including emotional labour are affected by gendered expectations in the context of social care in Ireland



RESEARCH QUESTIONS

1. How are social care **role expectations negotiated** between male and female social care workers?
2. How do **perceptions of gender** influence work practices?
3. How is perception and performance of **emotional labour** affected by gendered expectations?

RESEARCH METHODOLOGY/METHODS

Methodological Standpoint

Pragmatic Pro-feminism

Qualitative Inquiry

Methods

Qualitative Interviews- 10 male and 10 female social care workers & Discourse Analysis of European and National gender equality policy and social care social care policy and standards



KEY FINDINGS- DISCURSIVE ANALYSIS OF LEGISLATION, SOCIAL CARE AND EQUALITY POLICY

“work performed by one is equal in value to the work performed by the other, having regard to such matters as skill, physical or mental requirements, responsibility and working conditions’

(Sect. 7.1 (C) Employment Equality Act 1998/ 2015 (amended))

‘the duties attached to that position or will not accept (or, as the case may be, continue to accept) the conditions under which those duties are, or may be required to be, performed, or (b) is not (or, as the case may be, is no longer) fully competent and available to undertake, and fully capable of undertaking, the duties attached to that position, having regard to the conditions under which those duties are, or may be required to be, performed’

(Section 8.14.6: Employment Equality Act 1998)

‘Women and men, girls and boys, in all their diversity, should be free to express their ideas and emotions, and pursue their chosen educational and professional paths without the constraints of stereotypical gender norms’.

European Commission–Gender Equality Strategy (2020–2025)



DISCURSIVE ANALYSIS OF LEGISLATION, SOCIAL CARE AND EQUALITY POLICY- CONTINUED

Standards of Proficiency for Social Care Workers (2017)

- There is a strong discursive emphasis on understanding the legal, ethical and practice guidelines of the profession, respecting the **autonomy** of service users and recognising their rights
- There is a recognition of human difference and the need to act appropriately and non-judgmentally with regards to working with service users
- There is **not** any reference to the **affective nature** of social care work which is often a requirement of vulnerability and often entails the requirement to connect at emotional and relation levels
- The term equality is referenced once. This occurs in criterion (1.9) where social care workers are required to '*[u]nderstand the role of policies and systems to protect the health, safety, welfare, **equality** and dignity of service users, staff and volunteers*' (page 4)

Code of Professional Conduct and Ethics (2019)

- Of the 156 criteria, only one mentions the formation of relationships with clients; and in this case, it is to warn practitioners not to 'use your professional position to form a relationship of a sexual, inappropriate emotional or exploitative nature with any person', (3.2.b).

National Standards for Children and Adults with Disabilities (HIQA, 2013)

- The standards themselves providing little acknowledgement of the social care workers role in delivering supports to children and adults with a disability at the micro level instance of the work.
- The **personification** of a service by giving capacity such as listening skills and ability to understand, arguably not only shifts responsibility, credit and acknowledgement from the social care worker to care and to understand, but also renders them subordinate to the service or even invisible.

Quote: *'Planning, recruiting, managing and organizing staff with the necessary numbers, skills and competencies to respond to the needs of adults and children with disabilities in residential services'* (Pg. 7).

- Reference to the personal and intimate care of children with disabilities occurs in **criteria 3.1.6** where the standards require that where this is necessary, the process ought to be:

Quote: *'... monitored to ensure that they are safeguarded'*.

- While staff are recognized as playing a key role in the organization, this should be in:

Quote: *'The delivery of effective and safe services...by staff members who 'have the required skills, experience and competencies to respond to the needs of children with disabilities'... and to 'undertake duties associated with their roles and responsibilities... to assure the public that they are competent to deliver safe services'* (pg. 50).

Guidance for Designated Services-Intimate Care (HIQA, 2014)

- Notably, there is emphasis on providing **adequate time** for intimate care which should enhance the quality of life of individuals and should be done as:

Quote: *'...gently and sensitively as possible'*

- The expression of **choice of the service user** in receipt of intimate care, is seen as central to these principles. The right to choose is upheld in service users expressing their wishes about the nature of intimate care provided
- Section two of the document addresses vulnerability to abuse. It acknowledges the vulnerability of older people, those with sensory learning and mental health conditions to abuse and requires:

Quote: *'all staff to be familiar with intimate care policies and procedures and national guidance'*

- Interestingly, section 5.1 (Good Practices in Intimate Care: pg. 7) provides that:

Quote: *'...[w]herever possible, staff should work with individuals of the same sex in providing intimate care'*

- Immediately after this suggestion, the guidance recognises that this may not always be possible and that:

Quote: *'... [w]hen setting up a personal care plan, it may be acceptable to all parties for a carer to be of the opposite sex'*

RESEARCH FINDINGS- QUALITATIVE INTERVIEWS

THEME 1: HOW SOCIAL CARE PRACTICES ARE NEGOTIATED



Participant Quote:

'Like at the beginning you start to think like, I could do something different here but once you work in the place you feel like I won't change anything, you know, like?... It's like when you come outside... from outside and you enter to a group you might feel like you're not part of it- the group...'/[becoming upset] [Patricia-Residential Childcare Worker-Aged 48]

RESEARCH FINDINGS-

THEME 2: PERCEPTIONS OF GENDER AND INFLUENCES ON PRACTICES

**INHERENT
DIFFERENCES**

**INDIVIDUAL
EXPERIENCE**

**GENDERED
EXPECTATIONS**

**SERVICE
USER**

Participant Quote:

And if you ever saw my father. He is like, 6 foot and he's about 18 stone. He looks like a grizzly bear! But, he's probably one of the best caregivers that I've ever seen [laugh] and he's a social care worker. Like it makes no sense. He's a grizzly bear, but he's a caring man...' [Mark- Social Care Worker-Residential Older Persons Service]

RESEARCH FINDINGS-

THEME 3: HOW PERCEPTIONS OF GENDER INFLUENCE EMOTIONAL LABOUR

DETACHMENT
AND
ENGAGEMENT

'OTHERING'
PERCEIVED
CAPACITY AND
WILLINGNESS

EMOTIONAL
REGULATION

ETHICS OF
CARE/CARING
PHILOSOPHY

Participant Quote:

'It's like you have to be an actress coming into social care ...or an actor coming into social care... You have to have a poker face. Even if your whole world is falling down around you in work, you have to leave it at the front door...' [Sandra-social care worker-residential childcare]

**THANK YOU FOR
LISTENING**