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‘What I Really Want Is a Job’. Male Workers in the Social Care Sector

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Abstract

In this article we explore the experiences and perceptions of men in social care occupations in Spain in order to understand their reasons for going into care work, their continuation in the sector, how they are perceived, and to what extent gender matters in their work experiences. We use data from the ongoing qualitative research we are undertaking in Catalonia (Spain) on men as carers; this text is based on 31 semi-structured interviews with male workers in the social care sector. Our results show that the economic crisis has drawn Spanish local men into lower-skilled jobs in the social care sector, thus modifying the stratification process based on gender, class and migration. We find that the ‘glass escalator’ has a very limited effect in social care work, and in consequence, the advantages men enjoy only relate to the ease with which they access such jobs. Finally, we find that men working in the social care sector negotiate their masculinity through the tension between the cultural and class norms that oblige them to have a job and the undervalued or feminized characteristics of their work.

Keywords: male care workers, gender, social care jobs, glass escalator, masculinities



“Yo lo que Quiero es Trabajar”. Hombres que Trabajan en el Sector del Cuidado Social

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Resumen

En este artículo exploramos las experiencias y percepciones de los hombres en trabajos de cuidado en España para comprender las razones por las que se introdujeron en este sector laboral, porqué continúan, cómo se perciben y en qué medida el género importa en sus experiencias laborales. Utilizamos datos de la investigación cualitativa que estamos realizando en Cataluña (España) sobre hombres cuidadores. Este texto se basa en 31 entrevistas semiestructuradas a trabajadores del sector del cuidado social. Nuestros resultados muestran que la crisis económica ha conducido a que hombres autóctonos entren a trabajar en un sector poco cualificado como es el de los cuidados, modificando así el proceso de estratificación basado en género, clase y migración. Descubrimos que la "escalera de cristal" tiene un efecto muy limitado en el trabajo de cuidado ya que las ventajas que disfrutaban los hombres solo se relacionan con la facilidad con la que acceden a dichos trabajos. Finalmente, encontramos que los hombres cuidadores negocian su masculinidad a través de la tensión entre las normas culturales y de clase que les obligan a tener un trabajo y las características subvaloradas o feminizadas de su trabajo.

Palabras clave: hombres cuidadores, género, cuidado profesional, escalera de cristal, masculinidades

What motivates men to take up jobs in in the social care sector? Our research is guided by this question, as care work is a predominantly female occupation, with low salaries and little social prestige. It is also a socially segregated occupation and where migrants can find employment, factors that serve to further reduce its value (Carrasco, Borderías & Torns, 2011). We therefore extend our initial question as follows: What motivates Spanish men to work in a sector predominantly employing women and migrants? Our analysis is based on a study carried out in Catalonia (Spain) and addresses an aspect that has attracted little attention in the academic literature to date: men who constitute a minority group because of their dual condition as men and as natives, who cross gender and ethnic barriers, implying a downward labor mobility process.

We also ask how the social care work intersects with or contradicts the way masculinity is regarded, understood in its plural dimension and its contextual diversity. We thus analyze how two contradictory forces are at play in the management of masculinity: masculine reaffirmation grounded in the (class, but also cultural) obligation to have a job, and the strategies used to avoid the devaluation of their masculinity for doing ‘women’s work’.

The literature is abundant with research on men employed in mid-level caring occupations such as nursing (Cottingham, 2014; Christensen & Knight, 2014; Evans, 1997; Lupton, 2006) and social work (McLean, 2003; Pease, 2011). However, studies about men at the lower end of caring spectrum, with low wages and training (social care workers), are scarce (Dill, Price-Glynn & Rakovski, 2016; Hussein & Christensen, 2017; Hussein, Ismail & Manthorpe, 2016). There is a need for further in-depth qualitative research into the motivations, experiences and perceptions of male carers in order to understand how they move into the sector, how they are perceived, and to what extent gender matters in their experiences at work.

Social Care Work, Men and Masculinities

Social care is defined as work supporting people who, for reasons of age, illness or disability, need the help of others to perform the basic activities of

daily life (Daly & Lewis, 2000). It may be provided by social or health services (nursing homes, day centers, home help services, social-health centers, hospitals) or in the private sphere through domestic work. Advanced levels of training are not required, and frontline social or health care workers are situated at the lowest levels of the employment hierarchy in social and health care organizations.

In the context of European welfare states, social care work was introduced to demedicalize attention to frailty in old age and people with disabilities, and to complement work traditionally done by family members and especially women. It is estimated that in the European Union three million care jobs were created between 2000 and 2007 (Bettio & Vershchagina, 2008). The growth of this employment sector has driven large-scale labor migration, which has had varying impacts depending on the migration policy in individual countries. This process has led to the distinction between local and migrant workers in the employment hierarchy.

Gender, ethnicity/race and class shape the nature of the care work sector. Gender norms represent an impediment to male entry into the care sector, together with more tangible reasons such as employment conditions and the lack of male role models (Christensen & Knight, 2014; Comas-d'Argemir, 2016; Gärtner, Scambor & Bernachi, 2018). The effect of class norms (Lupton, 2006) and racial or ethnic stratification (Cottingham, Johnson & Erickson, 2018; Williams, 2013; Wingfield, 2009) has also been demonstrated. One area that has not yet been analyzed, however, is the situation where the entry of men into feminized work alters employment ethnification processes.

The interest in analyzing the Spanish case lies in the coincidence of the recent economic crisis and the corresponding destruction of many male jobs, with a considerable growth in the care work sector. In this case, we cannot talk in terms of race or ethnicity in the labor stratification of the sector, but rather of the difference between local workers and (ethnically diverse) migrants. What is significant is not only that the crisis drove men to take up female jobs (Bradley, 1993), but that the proportion of Spanish male care workers trebled whereas that of migrant men remained stable.

We wondered how the entry of men into social care work and the shifting combination of locals and migrants affects the rationale of the glass escalator (Williams, 1992). Hussein, Ismail & Manthorpe (2016) find that men in the social care sector are overrepresented in technical and management roles, suggesting that they benefit from the glass escalator; in contrast, migrant men are concentrated in traditionally female jobs such as frontline care work. The situation we analyze diverges from this distribution since there are more Spanish men in frontline care work than migrant men. In this context, do local men have greater advantages? Are they doing this work on a temporary basis or do they see it as a permanent solution?

To trace the way men access social care jobs and the course of their employment experience, we drew on the useful classification provided by Williams & Villemez (1993), which distinguishes two worker profiles: those with no preference for care work but who find openings in their search for work (finders) and those who actively pursue employment in this field (seekers). We also analyzed the diverse situations of those who remain in these jobs (settlers according to Simpson, 2004) and those who are looking for a way out, who we refer to as temporary settlers.

The incorporation of men into care work has implications for their masculine identity. Studies on feminized professions, such as nursing, teaching and social work, have largely attempted to understand the way in which men experience, take up and face the challenges to their masculinity, and to analyze the power dynamics in a group with minority or token status (Cottingham, 2014; Evans, 1997; Shen-Miller & Smiler, 2015; Williams, 2013). This literature demonstrates that masculinities are diverse and shifting, and as Lupton (2006, p. 105) notes, they are ‘done’ (not possessed). This idea fits with the performative gender perspective (West & Zimmerman, 1987). The notion of multiple masculinities is the pivotal theory in Critical Studies on Men and Masculinities, which emphasizes the diverse, differentiated and changing nature of the categories of men and masculinity (Collinson & Hearn, 1996; Connell, 2012; Hearn, 2018).

The perspective that masculinity is socially produced and is contextual and multiple is especially important for our analysis. In their excellent study,

Cross & Bagilhole (2002) showed how the responses of men working in feminized jobs are diverse (from those maintaining traditional values of masculinity to those constructing an alternative masculinity), contradictory, and in tension. We would add that this tension is expressed more strongly in certain cultural contexts and increases in social care jobs.

In the Spanish case, paid work is at the core of masculinity, the effect of which is that men—especially working-class men—accept badly paid jobs (Borràs, Moreno, Castelló & Grau, 2012). This is not only a material question but also a symbolic one, because of the central importance men attribute to productive work in Mediterranean countries. This attitude, associated with the strong influence of the family and women’s role as carers, contrasts with attitudes in central and northern European countries that have more far-reaching social policies (Hearn & Pringle, 2016).

The importance of having a job comes into tension with the devaluation of their masculinity for doing women’s work. Moreover, this is not just any work but care work, which lies at the core of female identity, in direct contrast to male identity, characterized as care-free (Hanlon, 2012). In addition, frontline caring involves ‘dirty work’ that influences the problematized perception of this type of labor and comes into direct conflict with masculinity. This negative tension is counterbalanced by another tension, however: caring is intimate work or relational work that lends dignity to the job and compensates the search for better employment conditions. Stacey (2011, p. 167) defines relational work as “emoting, listening, providing companionship”. There is a need to incorporate the gender perspective and analyze how men integrate emotion into employment activities (Cottingham, 2017). We ask how far this emotional dimension forms part of the construction of caring masculinities (Elliot, 2016), or whether it is a response to the demands and characteristics of care work.

In summary, we analyze how men renegotiate their masculinity from the different tensions at play in their activity as social care workers: those deriving from cultural norms and those related to the type of work. We thus show the ambiguous, performative and multiple character of gender identities as a response to the complexity of the context in which they take place.

Context: Spain in the Great Recession

Spain has one of the highest life expectancy levels of all the EU countries (86.1 years for women and 80.6 years for men in 2017). Increased needs for long-term care for the frail elderly population have arisen at the same time as the massive presence of women in the labor market and limited involvement by men in family care. The lack of public services and the high cost of private services have led many families to hire migrant women to provide this care. In 2006, the Spanish government adopted the Long-Term Care Law, commonly known as the Dependence Law, guaranteeing the right to receive care¹. Economic and service provisions (domiciliary care, residential care, and day centers) were introduced, which led to a significant increase in the number of social care jobs.

During the same period, Spain suffered the effects of the financial crisis and a profound economic recession. Job destruction began to escalate in 2008 and by February 2014, 5.6 million people were out of work and the unemployment rate had risen to 25.2 percent (54 percent among those under the age of 25). The construction, industrial and agricultural sectors were the most severely affected. Austerity measures were introduced through substantial public spending cuts that also affected social services (Deusdad, Comas-d'Argemir & Ddziegielewski, 2016; Peterson, 2015). Despite this negative and restrictive economic context, the number of social care-related jobs continued to grow, and social care was one of the main sectors in which employment was being created. In 2009 there were 92,713 social care-related jobs in Spain; by 2017 this figure had risen to 218,370 (Asociación Estatal de Directores y Gerentes de Servicios Sociales [National Association of Social Services Directors and Managers] 2018, p. 32-34).

The labor market for social care work is organized in terms of gender, class and migration. Foreign immigration has gradually increased in Spain since the beginning of this century and the majority of the migrants working in the social care sector come from Latin American and Eastern European countries. Domestic employment is the bottom rung of the caring occupations and is mainly carried out by migrant women. It is the largest category of care work

in Spain and has been boosted by migration policies (Anderson, 2012). No training is required for such work and employment conditions are highly precarious and often unregulated (Offenhenden, 2017). By contrast, the social and health services employ mainly Spanish women, although the number of migrants was rising until the economic crisis began to take effect, a turn of events that improved access opportunities for local men. Many migrants returned to their home countries or took lower status jobs. The training necessary to qualify as a social care worker is standardized and undemanding: occupational courses (450 hours), intermediate vocational training (1500-2000 hours) or simply accredited previous work experience. Our analysis focuses on care services (not domestic employment), which is the setting that Spanish men have entered.

In Europe, the low representation of men in care work has remained constant over the last ten years, and in most countries lies below 15 percent (Scambor, Holter & Theunert, 2017). In Spain, however, 19.65 percent of social care employees were men in 2016, above the European average. The crisis years saw a notable increase in the number of local Spanish men in such occupations, rising from 6.3 percent in 2009 to 18.7 percent in 2016, whereas the number of foreign men remained stable and fell proportionally (1.01 percent in 2009; 0.9 percent in 2016)². In the UK the balance between British and migrant workers contrasts starkly with the Spanish figures: migrant men account for 25 percent compared to 16 percent for their British counterparts (Hussein & Christensen, 2017). The specific contexts in which employment stratification take place must therefore be taken into account.

Methodology

In this article we use qualitative methodology (Pujadas, Comas-d'Argemir, & Roca, 2010; Tylor & Bogdan, 1984). It is part of a broader research project on male carers conducted in Catalonia (Spain). The research examines men's involvement in unpaid care work in the family and in social care work. This is a Responsible Research and Innovation (RRI) study, undertaken with the

collaboration of 43 institutions and associations involved in gender equality or the provision of care.

This article is based on 31 individual semi-structured in-depth interviews with Spanish men employed in social care jobs. The participants were recruited through personal contacts and managers of social care services; the snowball technique was applied until a significant sample was reached. The questions focused on the men's career paths, access to care work, employment conditions and future expectations, their experience as carers, and caring as a feminized occupation. It is noteworthy that the topics related to masculinity came up spontaneously, unlike the subject of sharing work with migrants.

The participants in the study (see Table 1) share the following characteristics: they are all Spanish men aged between 25 and 55 years old, with a predominance of those aged over 40. Most of them came into care work during the crisis years, compared to those working in the sector before 2008. They are currently working in home care services, nursing homes, personal assistance, health services, or other care services. None of them had previously worked in the social care sector, and most of them had worked beforehand in relatively unskilled jobs; a minority with high school or college education had previously been employed in skilled positions. Notably, many of the men reported previous experience in caring gained either through voluntary activities or their involvement in unpaid family care.

Table 1.
Participants in the study

Name	Age	Previous employment	Current workplace	Area of work	Year started	Previous care experience
Adrián	30	Waiter	Assisted flat	Mental disability	2005	Leisure time supervisor
Albert	22	Leisure time supervisor / Marketing student	Day care center	Frail elderly	2015	Leisure time supervisor
Aldo	31	Researcher	Nursing home	Mental disability	2013	
Andreu	64	Priest; Glazier	Home care service	Frail elderly	2006	
Arnau	45	Tourism	Nursing home	Frail elderly	2009	Family care: niece with disabilities
Aureli	46	Driver	Home care service	Frail elderly	2013	Family care: father
Borja	24	Illustrator/ Graphic designer	Personal assistant	Physical disability	2014	Leisure time supervisor
Carles	55	Mechanic	Home care service	Frail elderly	2014	Family care: mother and wife
Dani	29	Student	Nursing home	Intellectual disability	2009	Family care: grand-mother
Fernando	50	Builder	Nursing home	Intellectual disability	2010	
Gerard	62	Bank employee	Personal assistant	Physical disability	2013	Volunteering. Family care: nephew, mother

Table 1 (Continued).

Participants in the study

Name	Age	Previous employment	Current workplace	Area of work	Year started	Previous care experience
Guillem	55	Tailor	Home care service	Frail elderly	2013	Family care: aunt
Jaume	42	Cook; Hospital porter	Hospital	Frail elderly	1992	
Juan	23	No previous job	Home care service	Frail elderly	2013	Family care: aunt Leisure time supervisor
Luis	59	Builder; plumber	Nursing home	Frail elderly	2008	Family care: mother
Lluc	40	Truck driver	Home care service	Frail elderly	2010	No information
Lluís Miguel	56	Masseur	Social-health center	Frail elderly	1984	Family care: mother, ex-spouse, son with disabilities
Manel	51	Welder	Nursing home	Frail elderly	2015	Family care: mother, spouse and daughter care workers
Maurici	39	Painter; Builder	Personal assistant	Physical disability	2005	
Milos	22	No previous job	Hospital	Mental disability	2016	Family care: grand-mother
Miquel	43	Translator	Home care service	Frail elderly	2005	Driver for carers in New Zealand

Table 1 (Continued).
Participants in the study

Name	Age	Previous employment	Current workplace	Area of work	Year started	Previous care experience
Pablo	26	Student	Home care	Frail elderly	2013	Family care: father Leisure time supervisor
Pau	54	Gardener	Personal assistant	Physical disability		Volunteering: people with disabilities
Pedro	52	Plastics operator Purchasing manager	Social-health center	Frail elderly	2012	Family care: father
Peris	43	Driver	Nursing home	Frail elderly	2006	Family care: grand-mother
Pol	48	Builder; glazier	Nursing home	Frail elderly	2015	Family care: grand-mother
Rafael	47	Graphic designer	Home care service	Frail elderly	2011	Family care: father
Robert	24	Electro-mechanics course	Social-health center	Frail elderly	2012	Volunteering
Santiago	31	No previous job	Hospital	Mental disability	2000	
Servando	55	Potter	Rehabilitation service	Mental disability	2010	Family care: mother
Vicencç	53	Sound technician	Personal assistant	Physical disability	2013	Volunteering Family care: father

The interviews were conducted between March 2015 and May 2016 in either Catalan or Spanish, according to the participants' preferences. They were carried out by members of the research team, in the majority of cases outside the participant's workplace; each interview lasted approximately ninety minutes and was recorded. The project's aims were explained to the participants and their anonymity was assured; all the participants signed an informed consent form. The interviews were transcribed by qualified professionals with experience in qualitative techniques and their particular methodological features. The transcriptions were introduced into the ATLAS.ti software program and the data were classified into categories for analysis in accordance with the interview guide. We used an inductive method and the categories for analysis were the following: 1) concept and social discourses on care; 2) development of the itinerary of care and strategies to adapt to the situation; 3) management and negotiation of care; 3) activities and decision-making; 4) types of support for the situation of care; 5) the impact of the economic crisis; 6) motivations for care; and 7) experiences and feelings about the situation of care.

Results: Men in Social Care Work

Stumbling Across Social Care Jobs

On describing their career paths prior to working as carers, the participants reported extensive experience, with varying degrees of stability, in jobs in the transport and construction sectors, and a diverse range of industries. The closure of many firms threw them into situations of long-term unemployment with few possibilities of returning to work in the same sector. Job centers provided occupational training courses, notably for elderly care and nursing assistants, with the option of work placements in organizations where real employment possibilities were available. Fernando was really surprised when the job center recommended an elderly care training course: "I asked them what it was. They told me they are people who look after others and that this line of work had a lot of opportunities". Carles gave a similar account: he

asked, “What’s that?”, and was given the same response, “helping older people, working in a nursing home”. These carers, therefore, initially came into contact with care work because no other options were available to them.

These are older men and are ‘finders’ (Williams & Villemez, 1993) who came across this employment opportunity by chance and did not know whether or not it would become their new permanent profession. Rather than the outcome of a meditated strategy to change their career direction, these men fell into these jobs as a result of accumulated unfavorable circumstances (Williams, 1992; Williams & Villemez, 1993; Lupton, 2006). They are what Bradley (1993) refers to as “infiltrators” who take women’s jobs to climb out of the unemployment rut. Having a paid job is essential to their survival but also to allay the anxiety and personal insecurity generated by being unemployed in a context where working is fundamental to the construction of masculinity, as exemplified by the Spanish case (Borràs, Moreno, Castelló & Grau, 2012).

Actively Pursuing Social Care Work

Few men actively seek employment in social care. In our sample it was the youngest men who clearly fall into the profile of ‘seekers’. Some of these ‘seekers’ assign a purely instrumental value to care work as a way of solving their unstable employment situation, or they use it as a strategy to move on to other occupations with better pay and prestige (Lupton, 2006). Many of them, in contrast, choose this type of work because they find it interesting for its own sake and distance themselves from the values of traditional masculinity to construct an alternative masculinity (Cross & Bagilhole, 2002; Elliot, 2016).

One finding from our study is that many of our informants, both ‘finders’ and ‘seekers’, had previous experience of caring for family member, as shown in Table 1. Dani was motivated by the experience of caring for his grandmother: “[since her death] I’ve continued to work in this area and in the field of intellectual disabilities and, well, I’m still training: nursing and on the up and up!” Rafael, already unemployed, was able to care for and spend time

with his father in the nursing home in which he lived: “almost two years, and as I was unemployed, I used to go and look after him and I saw the whole process. [...] I was sick of looking [for work] and said, why not? And to be honest I quite took to it”. What is significant is that the skills they acquired became opportunities to demonstrate their competence for social care work and were consolidated in a professional qualification.

Staying in Social Care Occupations: Convinced or Trapped?

Some of the carers we interviewed are archetypal ‘settlers’; having discovered the profession, these men take the decision to remain (Simpson, 2004) because it has given them the opportunity to explore other ways of being workers. Through care work, Arnau was able to recognize himself as a generous and altruistic person. And Pau says: “I’d been wanting to make the change... I was burnt out by gardening and I started to lose it, and then this care assistant job came up and I’ve been here ever since”.

Some men, like Fernando, may experience this moment of change within uncertainty, but also as an opportunity: “[At first] it was out of need and because I had to do whatever came along to be able to work, but not now [...] I do it because it’s my profession and because it is the profession of my life. If anybody asked me if I would change, I’d say no, I wouldn’t change”. Pol expresses surprise that he enjoys care work more than he thought he would: “I didn’t know I had this hidden talent. I loved it”. And others, like Lluç, say they would not change their job as they have found “a new meaning to life” and defend the dignity of care work and remaining in it.

These examples demonstrate the diversity of perceptions held by men who remain in social care jobs. On the one hand are those who consider that care work fulfils them on a personal level, thereby constructing a caring masculinity (Elliot, 2016). On the other hand, are those who feel trapped in the job (Williams & Villemez, 1993) because of their advanced age and the crisis in the sector they previously worked in. Some have been employed as care workers for between seven and eight years and the accounts of Fernando, Pol and Lluç lead us to think that this is not merely a “passive choice”

(Simpson, 2004) and that not all of the settlers felt that the lack of alternatives “trapped” them in this occupation (Hussein & Christensen, 2017), but that over time they valued it positively. Being convinced or trapped are attitudes that can change with experience and that are not necessarily conflicting.

Social Care Jobs as a Temporary Measure

Not all the men feel comfortable with their work as carers, a change that has placed them in a different social, personal and professional position that some of them find frustrating, with the result that their hopes lie in finding another better paid job that will enable them to go back to their former lifestyles. These men correspond to the fourth carer profile, the ‘temporary settlers’, also referred to as stopgappers by Torre (2018), who are often found in low status feminized jobs. They come into these occupations when they have exhausted all possibilities of finding anything better, and once inside they are looking for an opportunity to leave. Guillem is in no doubt about this: “I’d change jobs to have decent working hours, earn more money, I won’t kid you. I used to have two cars, I earned more than 5000 euros [a month] ... but I lost everything. Now I’m just a regular worker”. Similarly, Pedro feels a mixture of resignation and acceptance due to the country’s unstable job market: “Basically, I’d change jobs for more money, that’s all. I’ve been here, I’ve done it, and I’m enjoying it. I wouldn’t like to stay here till I retire, but I don’t dislike it”.

These men have very little chance of moving into a different sector of employment or returning to their previous occupation because they have reached a certain age, because of their limited professional qualifications and because care work offers real employment possibilities. It is noteworthy that since we began the interviews two years ago, three of the men have left their jobs: Carles, Luís and Aureli.

The Glass Escalator in Social Care Work

We found that the men did not encounter difficulties in accessing jobs in social care services. “As the course went on, I found I liked it. Like I say, I went to do my work placement there. I finished in June and on July 1st they asked me if I wanted to stay and there I am”, Luis recalled; Aureli also finished his training and began to work at the same time in a public home care service and in two private homes. Selection processes for these jobs are brief, and the men are unclear about why the organization decided to hire them, other than that they “want to show their support for men”. This perception chimes with that of the care service managers, who expressed the need to recruit men (Bodoque & Roca, 2019). The advantage of being male is complemented by a second benefit that comes with being Spanish. Rafael considers that his qualification and his Spanish nationality raise his value: “There are people from other countries who took all this on before because local people didn’t want to do it. Now I am here. The case of this disabled person I’m responsible for is special and that is why they decided I should take it on, because it’s a tricky case”.

Thus, being male and being Spanish smooths access into care service jobs, which is the first step on the glass escalator. It should be remembered that domestic employment comes below this level, a sector dominated by women and migrant men who are often hired on an informal basis. Working in a care service for which accredited training (however basic) is required and that has well-defined (although possibly precarious) employment conditions is therefore already significant progress. But the glass escalator stops there, because the opportunities for professional promotion call for higher levels of training which are beyond the access of many of the men we interviewed.

Dill, Price-Glynn & Rakovski (2016) explored whether the glass escalator compensates for the devaluation of care work, concluding that men employed in frontline health care occupations suffer a “wage penalty” because they are working in a sector that is closely associated with female labor (p. 352). We coincide with this conclusion and find that the downside of social care work

is that it lacks prestige and offers little chance of promotion. We therefore understand that the slight advantage men have in entering such work does not compensate for their professional downgrading nor the negative self-image associated with doing dirty work, nor the possible offense to their masculine identity, which leaves many men (our temporary settlers) with the desire to quit their job for an alternative occupation that compensates for these losses.

Care Work and Masculinity: Contradictions and Tensions

“What’s important is to be working and that is why when they rang to tell me [...] I told them what I really wanted was a job”. Carles’ assertion illustrates that having a job, whatever it might be, is at the heart of the Spanish working-class man’s life project. It is necessary for survival, but it is also a cultural norm since the symbolic importance of the male breadwinner and female housewife model persists in Spain (Borràs, Moreno, Castelló & Grau, 2012). Luis states clearly that being in work is the normal situation for a man: “If I had to do it again, I would do what it takes to make a living and work to maintain my home and my family and have a normal life”. But this cultural imperative comes into tension with doing a job identified as women’s work and most of the participants in our study tried to distance themselves from the stigma that this implies.

Working as a carer challenges their masculinity, which they counter by reaffirming a series of traditional masculine values. Most of the workers consider that physical strength is the essential quality valued in male carers, particularly in the eyes of their female colleagues. Although the mechanization of some care processes helps female workers to lift and transport people in their care without necessarily having to be physically strong, the men assert the importance of their presence in these processes: “If there are [service] users that need two people to attend them, all the women want me to go. It isn’t because I’m any better or worse, but because I’m stronger than a woman”, explains Pedro. And in more specific services related to mental health or disability they are also sought out because their physical strength.

Another way they add value to their work is by emphasizing their professionalism and distancing themselves from the ‘malpractices’ of their female colleagues or untrained foreign workers. The men working in home care services draw a sharp distinction between care work and domestic work. Pedro complains that the women carers do not respect this difference, which is damaging to the profession: “I shower him, I am there for three hours talking to him, we read, but he doesn’t expect me to clean his windows. But most of the women who do this work just accept it. Myself and the rest of the men in this job are quite clear about that”.

Such forms of distancing that stress men’s physical strength or greater professionalism have been reported in the academic literature (Cottingham, 2014; Cross & Bagilhole, 2002; Simpson, 2004). We consider that a deeper aspect is also at play in social care work: these men are not only entering a predominantly female sector, but they are also doing women’s work, as Hussein & Christensen (2017) point out.

Caring involves dirty work that directly confronts men with their masculinity. Pedro describes his work as follows: “It’s about helping and everything that that represents: from dressing them to cleaning their shit...”, “I never thought I could do what I’m doing”, admits Carles. Even though he had cared for his father, Aureli had to overcome his initial fears and find meaning in the change he was obliged to make: “I’ve seen that I can do it, that I’m not revolted by it. All the patients have always appreciated what I do and they’re happy with me. And that helps you carry on”.

Refocusing their work is another way of avoiding devaluation and the tensions generated by carrying out such a hyper-feminized activity with its implicit dirty work (Tracy & Scott, 2006). This process involves highlighting factors such as their official qualifications and associating their work with the health sector, which is more prestigious than social services. Arnau claims that “this is a neglected branch of health care. But someone has to do it, don’t they? Sometimes we do the same work as an auxiliary nurse. We don’t do it in a hospital, but in a nursing home or in someone’s house”. When explaining their work, they often use expressions such as “I’m like a nurse”, or “I’m like

a doctor”, renaming and elevating their employment category (Simpson, 2004).

Finally, we find that the negative image associate with dirty care work is counterbalanced by its relational dimensions (Stacey, 2011). The men studied say that that the personal satisfaction they derive from their relational work lends dignity to their work and compensates for the low salary. Borja movingly expresses his view: “I’ve changed my mind about care work. I’m happy. Although it’s very badly paid, I feel happy that I’ve managed to get a job that’s more than just about money. It’s awesome, it’s fantastic, it’s really satisfying and I’m happy to be doing what I do”.

The men we interviewed claim that their female colleagues are more pragmatic, but that men contribute additional dimensions such as leisure activities, education or psychological and emotional support, which raise the quality of their caring activity. They mention that the company managers take into account the way they work, their ability to empathize, and their capacity to relate to people, his patience with and affection (Luis) and his vocation and generosity (Arnau). Fernando says: “You do showers if there’s an emergency, but this is more about leisure, having an enjoyable time together. Then there’s also the educational side, and that’s at the heart of it”. A further notable aspect of intimate work is the consideration of the care receivers’ gender identity in their working practices. Jaume clearly differentiates between his relations with men and with women: “You’re not going to talk about football with a woman, she’ll tell you to beat it [...] You ask her about her children, she tells you her life story, and bingo, you’ve won her over”. It is noteworthy that both the younger and older carers emphasized emotional, intimate and affective relations with the care receivers, which they identified as a male contribution, thus inverting gender stereotypes. We agree with Cottingham (2017) that incorporating emotional dimensions is not only part of the construction of caring masculinities, but more generally they are a response to the demands of care work.

Conclusions

In this article we have analyzed what motivates Spanish men to take up social care work, a sector dominated by women and migrants and characterized by low-skilled, undervalued jobs. We examined the effects of the glass escalator and its intersection with the negotiation of masculinity. The Spanish case offers a particularly interesting frame of analysis as our study was conducted during the recent profound economic depression that resulted in the destruction of many male jobs, and at the same time, the rapid growth of the care work sector. This combination of circumstances enabled many Spanish men to take up jobs as social care workers. We show here that in Spain, the process of labor ethnification (marked by the differentiation between local and migrant workers) took the opposite course to that reported in the literature on the articulation between gender, class and ethnicity/race. This outcome highlights the importance of taking into account the specific contexts in which labor stratification processes develop.

At the beginning of the article, we wondered whether the glass escalator benefited care workers, as has been demonstrated in nursing, teaching or social work. One of the major differences from these established professions is that social care is a more genderized, ethnicized and precarious area than other feminized sectors. On the one hand, the glass escalator has worked for our informants, because of their dual condition as men and as Spanish, and they benefited from positive discrimination in accessing work, and were welcomed into the workplace. However, we coincide with Dill, Price-Glynn & Rakovski (2016) in that the glass escalator does not compensate for the implicit unskilled nature of care work: unlike other sectors, the opportunities for promotion are scarce and its characteristic job insecurity runs through the entire sector. Our response, therefore, is that the glass escalator does benefit men entering the care work sector, but in a more limited, constrained way than in other professions, because care work is in itself an opaque glass ceiling for both men and women.

Our study coincides with the consensus in the literature that ‘finders’ outnumber ‘seekers’ in female occupations (Hussein & Christensen, 2017;

Simpson, 2004; Williams & Villemez, 1993). Regarding permanence in these occupations, we consider that the category of ‘settlers’ proposed by Simpson (2004) is not a homogenous group, since it encompasses both those who make a conscious decision to follow this career as well as those trapped in it. We also found that these situations are dynamic, as some of the men who did not choose this path value the less competitive, more human dimensions of their work. Finally, we identified the profile of the ‘temporary settlers’: those who leave when they find an alternative or hope to return to their original sector of employment (Torre, 2018). Given the study’s short time span, continued observation of this trend is required to verify the effects of changes in the labor market during the coming years.

Analyzing the Spanish case also provided an opportunity to demonstrate the diversity and specificities of masculinities. Indeed, despite profound and ongoing changes in society and the family, in Spain there is a persistent predominance of the conceptual and practical division between the responsibilities of men and women: men are still assigned the role of breadwinner, which heavily conditions their attitudes to work (Borràs, Moreno, Castelló & Grau, 2012). Our title incorporates a remark from one of the informants, “What I really want is a job”, whatever that job might be, because it reflects the importance of paid work for both their survival and as a reaffirmation of their masculine identity. In other European countries, the centrality of work is less heightened (Hearn & Pringle, 2016). We therefore demonstrate the impact of class norms and the cultural context in the construction of masculinity. Because the scholarship on masculinities is predominantly Anglocentric, more research is needed in other countries that, as Hearn (2018) points out, contribute a fresh perspective.

Social care workers must manage the tension between their satisfaction with having a job, which reaffirms their masculine identity, and the devaluation they experience for doing women’s work. The men with this traditional concept of masculinity, represented especially by the older participants, employ clear strategies to differentiate themselves from female work, by emphasizing their specific contributions as men or their greater professionalism. We also verified the emergence of alternative masculinities,

particularly among the younger men, who attribute different values to their work. There is, therefore, no single model of masculinity, but rather a series of diverse, performative models that vary according to contexts and situations, as demonstrated by the critical studies on men and masculinities literature.

For a broader viewpoint, in this paper we argue that the characteristics of social care work problematize masculinity more than other feminized occupations. The literature has shown that the ways masculine specificity is highlighted center on the strength, professionalism or authority that men contribute (Cottingham, 2014; Cross & Bagilhole, 2002; Simpson, 2004), dimensions that we also found but much more strongly emphasized and heightened. This is because care defines femaleness and, in addition, is connoted with dirty work that triggers much more explicit and forceful forms of distancing in men than do other occupations. Further qualitative studies are needed in this sector, which lies at the bottom of the care work spectrum, to advance our understanding of the relational dimensions of frontline care work, in which gender does matter.

Social care is a relational occupation and it compensates for the negative aspects associated with its extreme precarity, as Stacey (2011) points out. It is important to underline, however, that the men we interviewed consider that their relational and emotional capacity sets them apart from their female colleagues, who they regard as more practical and oriented to solving care-related problems, but less empathetic. We agree with Cottingham (2017) that the incorporation of emotion as a practice demonstrates men's capacity to adapt to jobs where personal relations are necessary. But we also find that men with alternative masculinities place much more emphasis on this emotional dimension as a quality deriving from their work. Our research also finds this capital in men and in employment contexts, which reveals a need to further explore gender differences in the question of emotional capital and its expression in different contexts. We therefore maintain that gender identities are ambiguous, performative, and present in multiple forms.

Notes

¹ Support of Personal Autonomy and Long-Term Care Act (39/2006)

² Source: Workers affiliated to the Spanish Social Security system. Ministry of Labor, Migration and Social Security. We have no comparable data for previous years since the statistical classifications are not equivalent.

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