Emotional Labour, Boundaries and Burnout –
Supporting Volunteers and Workers

Jenny Bray

NSW HACC and Community Care Conference, Sydney, 2011

INTRODUCTION

As an industry, we are focussed on future reforms; standards outcomes; front-ends; the efficient organisation of workers into processes; and the measurable knowledge and skills of workers. And in all of this, there is no mention of the enormous elephant in the room – the emotional component of community care. It’s almost as though, in the written artefacts of our industry at least, the word “care” has come to refer only to assistance in tasks of daily living. We seem to have demoted the emotional dimension of the word.

I believe that promoting and revaluing the emotional dimension of community care is vital to developing and sustaining a flexible and balanced workforce and/or volunteer base. Now, I’m not saying that practitioners in our industry do not emotionally care. After all for many of us, it is the emotional component of the work, or the human meaning and value of the work, that drew us to the industry in the first place, and for many it is that dimension that sustains them in the work. We need to build a framework and a language to be able to assert and value the emotional component of care work. And that’s what I want to contribute to today.

OUTLINE

In this presentation, I will apply the concept of ‘emotional labour’ (Hochschild, 1983) to community care work. I will highlight the links between emotional labour and burnout, and I will touch on the links between emotional labour and the blurring of professional boundaries. I will also present some brief information on how these aspects could be addressed.

DEFINITION

Let us start, as we inevitably must, with some background and definitions. The term ‘emotional labour’ was first coined in 1983, by sociologist Arlie Russell Hochschild in her book, The Managed Heart: Commercialization of Human Feeling. In it, she looked at the role of emotion in the work of flight attendants and debt collectors. Specifically, she looked at how these professionals used or managed their own emotions, in order to create emotional responses from others. In the case of the flight attendant, the emotions elicited from passengers are those desired by the airline (that is, the passenger feeling at home, comfortable and calm); in the case of debt collectors, the emotions they elicit from debtors are whatever would be most effective in leading to the debt being paid (for example it could be guilt, fear, resignation, inevitability) (Sass, 2000).

Emotional labour, Hochschild defined, involves an observable display of human emotion by the worker in exchange for a wage, and that this display is intended to elicit emotional responses in others which are desired by the organisation or company, OR which are otherwise needed in order to get the job done (Sass, 2000; Mastracci, Newman and Guy, 2010). Importantly, Hochschild identified that these jobs cannot be done without emotion.

Emotional Labour can be self-oriented – that is, showing the required emotions while, perhaps, suppressing one’s own authentic emotions – or other-oriented – this involves being aware of the emotional state of the other person, and influencing their emotional state in order to achieve the desired outcome (Martínez-Iñigo, Totterdell, Alcover, and Holman, 2009; Brotheridge and Grandey, 2002; Seery and Corrigall, 2009).
The range of observable human emotions displayed by the employee that are desired by organisation Hochschild labelled as ‘display rules’. For example, the flight attendant must smile and express positive attitudes towards the passenger, but also they must display calmness and confidence when there is a problem such as turbulence, or stormy weather. As long as the employee stays within the display rules, they are given a degree of freedom to choose their own emotional displays. On the other hand, the debt collector has very different display rules. They are free to be personable, or aggressive - free to make the debtor feel happy, frightened, sad, guilty… whatever gets the job done (Rafaeli, and Sutton, 1987).

Adding to the picture, Hochschild explains that workers may or may not actually feel the emotions that they are displaying (Wharton, 1993). For example, the flight attendant might be having a really bad day, or they may be frightened by the storm. In either case, they need to mask their actual feelings by putting on a smile, or looking calm on the outside – basically, faking it. This is what Hochschild called ‘surface acting’ (Gorman, 2000). If, on the other hand, the flight attendant could plug into a reservoir of real emotion – for example, they might tell themselves that if there was anything to worry about, the pilots would let them know. This thought would bring them greater calmness, which could be authentically expressed in their body, face and voice. This is known as ‘deep acting’ (Leeson, 2010).

COMMUNITY CARE APPLICATION

So how does Emotional Labour relate to community care? Community care work involves person-to-person interactions with carers, care recipients and the general public. The positive emotional responses of these stakeholders are required in order to achieve engagement with the sector, and/or lead them to expressing satisfaction in their experiences with our sector. Workers have to show an acceptable range of emotions, and are required to elicit emotional outcomes in others - such as, feeling consulted, respected, independent, supported, encouraged – as you would find in some of the Common Community Care Standards. Clearly all this involves Emotional Labour.

Emotional Labour is an inherent part of all person-to-person contact between the community care sector, and our clients and potential clients. But, our emotional labour remains largely unrecognized, unacknowledged, and in our sector, mostly unexplored and under theorised (Henderson, 2001).

So what can 30 years of research into Emotional Labour tell us? There’s plenty, but it’s a complex area and it’s not able to be neatly applied to all parts of community care.

PROCESS CONTEXT

However, there are some areas of community care where Emotional Labour research can be more easily applied. I argue that this is the case for those job roles in community care that are mostly process oriented - tasks such as intake and assessment (particularly over the phone); care planning; and service reviews. I would also include some short term or one off service types, such as home modifications; and perhaps also some shorter term and episodic service types, such as community options type case management.

The content of this work can be highly emotional, and performing these roles can be taxing. Workers must keep within emotional display rules – they are expected to show compassion and empathy; caring helpfulness; calmness; and they can’t show other emotional responses such as annoyance, shock, or being disturbed, or overwhelmed. And through their emotional labour, the workers project that the community care industry is there to help carers and care recipients sort through their care needs, and assist in meeting those needs.

But the emotional component of the work isn’t the main focus of these jobs. The main focus is the PROCESS – to complete intake, or assessment, or the care plan, or to make the bathroom more accessible. The process gives the emotional labour a pathway to follow. These jobs involve
Emotional Labour – but they also contain the emotional dimension and direct the interaction towards the completion of the process. The worker then moves on to the next caller or client.

This type of work can be related to research on Emotional Labour in areas such as nursing, social work, teaching, or even in call centres (Totterdell & Holman, 2003; Henderson, 2001; Gray, 2009, Philipp & Schüpbach, 2010). Here, Emotional Labour research tells us that sustained surface acting (or faking it), particularly where it involves suppressing one’s strong authentic emotions, is implicated in burnout (Brotheridge & Grandey, 2002). Continually faking emotion can lead to emotional dissonance – where the connection between the emotions you SHOW and the emotions you FEEL are interrupted, if not severed (Hochschild, 1983; Brotheridge & Grandey, 2002). If emotional dissonance spills over into your non-work life – that’s a sign of burnout (Karim, 2009). Other consequences of emotional labour can be emotional exhaustion and compassion fatigue (Mastracci, Newman, and Guy, 2010).

Deep acting, on the other hand, is much less associated with dissonance and burnout but it has its own risks (Grandle, 2003). Feeling real emotion requires the engagement of self, which can make us vulnerable (Leeson, 2010). We need to be aware of where our boundaries of ‘self’ are in relation to our clients and our job. This is self-monitoring (Seery and Corrigall, 2009) and one study (Wharton, 1993) found that people who are frequent or “high self-monitors”, were less likely to be negatively affected by doing emotional labour (Henderson, 2001).

Emotional Labour research also talks about burnout in relation to balancing job demands and job resources. Job demands are the aspects of a job that require sustained effort by an employee. Job resources are those factors than ‘nourish’ the employee, such as getting a sense of achievement out of the work (Bakker, Demerouti, and Schaufeli, 2003; Jonge, de, Le Blanc, Peeters, & Noordam, 2008; Brotheridge and Grandey, 2002). Indeed, studies have shown that some people find performing emotional labour to be a reward in itself (Brotheridge and Grandey, 2002, Henderson, 2001; Seery and Corrigall, 2009).

Unfortunately time prevents me from going deeper into this, and I am at risk of over simplifying a rich and complex field of research.

RELATIONAL CONTEXT

Now, much of this research and the findings I have spoken about so far, have come from contexts that I call, ‘process’ oriented, and which have NOT been conducted within private home environments. There is much less research about workers’ Emotional Labour conducted within an “in-home” environment (Geiger-Brown, 2004; Delp, Wallace, Geiger-Brown and Muntaner, 2010).

The in-home location and/or longer term duration of these jobs have a major impact on Emotional Labour. Deep acting is much more likely – surface acting happens, but it’s hard to sustain. If a worker tries, then they are more likely to experience stress and burnout (Seery and Corrigall, 2009).

Unlike our process oriented context, the in-home and/or longer duration context, I argue, does not provide the same structure in which to contain and direct the Emotional Labour. The beginning, middle and end of the “service episode” are defined differently – they are largely about the worker/client relationship not about the process. In the beginning it is getting to know each other, and establishing the routines and expectations. Then the long middle, which is where the deep acting in more likely to appear, and typically this is where the worker has to decide on how much self-disclosure they will engage in, and how deep the emotional attachment is to the client. And then there is the end, which involves disengagement and terminating the person to person contact.

This pathway – this ‘beginning, middle and end’ - is relationally oriented, rather than process oriented. These job roles have a relational context.
Care work that has a primary relational context – particularly when provided in the home, seeks to replace some, but not all, of what is usually provided, or culturally expected to be provided, by informal, unpaid carers such as family. Kathleen Lynch (2007) called the unpaid version of this work ‘Love Labour’. Love labour is associated with the domestic or private sphere (the home); and it is associated with proximity, closeness and intimacy (Weicht, 2009). Inherent in the paid version of this form of labour, is the need for the worker to negotiate the question “how close is too close to the client?”

Labour that has previously and traditionally been provided only as Love Labour, has become increasingly ‘outsourced’ in Western countries (Weicht, 2009; Lynch, 2007; Vidovićová, Hoff, Feldman,2010) – child care and aged care are two examples. With regards to aged care, Bernard Weicht (2009) has noted that the stigma of outsourcing this type of care is reducing, but only as long as the older person remains living in the home. Indeed Weicht argues that there is a growing moral and cultural discourse which regards formal, paid care that is provided in the home, as the next best thing to providing the care within the family. And because of this, home based, relationally oriented care work is more easily, and perhaps more likely, to be framed as an extension of familial care (Weicht, 2009; Lan,2002). And here-in lies the rub: the boundary dilemma inherent within this form of care work, and particularly in relation to the emotional component of the work. We are outsourcing PARTS of Love Labour, including some of the emotional care work, but we are not at all clear about exactly what aspects of the emotional components of in-home care work can be contracted, and what aspects are “inalienably” the domain of love labourers (Lynch, 2007; Weicht, 2009; Lewis and Guillari, 2005). Moreover, what happens when there are no obvious “love labourers” around a person requiring care – when there is no kin, no friends?

**FICTIVE KIN**

Confusion about emotional proximity between workers and care recipients or their families appears frequently in our industry. For workers the question is, “how close is too close to a client and their family?” For families, the question is, “how can it be acceptable for strangers to do work which is usually love labour?” . A number of researchers have pointed out that care workers can become cast as “fictive kin” (Vidovićová, Hoff, Feldman,2010; Barker, 2002; Karner, 1998). This is where care recipients and their families begin to refer to care workers as being “like family”; or care recipients refer to workers as being “like a daughter to me” (Barker, 2002). Related to this, is when workers cast themselves into friendship roles with clients, and even refer to their clients as their “friends”. The shift here might be a way of dealing with the authentic feelings of attachment, and assists the worker to maintain the emotional components of the work. Barker concludes that these fictive relationships enable workers to sustain their caring work, because their work becomes based on affection and moral duty – even to the extent that they are willing to accept this higher moral status in lieu of more pay (Barker, 2002; Weicht, 2009).

Our industry has a problem with this ‘solution’ from a professional boundaries point of view. The obligations associated with “kinship” can be incompatible with industrial and work role requirements – for example, gifts; social events; doing little ‘extras’ that go beyond job descriptions or policies. Besides, there are vulnerabilities to exploitation to be considered; and the consequences of real kin feeling displaced. Certainly many workers and managers are aware of the boundary blurring that occurs in this area. And the thing is, a worker that is blurring boundaries because of emotional proximity and social intimacy with clients might not “burn out”, because the moral status helps to sustain them, but they are much more likely to find industrial regulation of their behaviour – through job descriptions and policies – harder to maintain. And there will be those who view the fictive kin positioning as an outright violation of “professional boundaries” in and of itself.
STRATEGIES

Hopefully, I have demonstrated the need to assert and value the emotional component of care work. And I’ve argued that the field of Emotional Labour has much to offer us. So where do we go from here? How might we begin to develop our own framework and language to discuss and explore the role of emotion in our industry, and the limits of it?

Before I launch into my suggestions, I need to explicitly state my position, which informs the strategies I will suggest.

Here we have a ‘circles’ representation of emotional closeness. Closest is the intimacy circle. Then the friendship circle. Then there is the participation circle – say, your book club, your church, parents of your child’s school mates. Then there is the circle of exchange, where people are paid to be in our lives – grocers, chemists, doctors, counsellors. I believe that, as community care workers, we are paid to be there so we are in the exchange circle. But sometimes we are paid to assist people to access participation circles (such as centre based activities, or men’s sheds or going to coffee shops or whatever). To outsiders we might not look like we are in the exchange circle but we are. We might assist clients to build participation, friendship and intimacy circles, but we are not those circles. We walk amongst, but do not replace, their friends and intimates. Where a community care client does not have friendship and intimacy circles, they are experiencing Social Exclusion. Our industry helps to build Social Inclusion. We have a role in assisting people to develop these circles of support – but I think we should resist simply simulating them and fictitiously replacing them.
With regards to process oriented context jobs – I offer the following strategies:

- Workers need to know their process inside out, so that they don’t get lost in the emotional content of the exchange;
- Train staff about Emotional Labour, and the differences between surface acting and deep acting, and the strengths and weaknesses of each; and
- In supervision and performance reviews, look at the balance of job demands and job resources.

With regards to relational context jobs – I offer the following strategies:

- Acknowledge that the question of ‘how close is too close to a client’ – or where on the attachment / detachment continuum - a worker should be, is in fact contentious.
- In your agency’s standard definition of professional boundaries, explicitly include the topic of “degree of emotional attachment to clients” as part of it – even if we can’t say where exactly the ‘too close’ territory begins.
- In professional boundary training - discuss consequences of taking various positions along the attachment/ detachment continuum.
- And train, support and promote ‘self monitoring’ by workers, particularly in the context of understanding deep acting within Emotional Labour.

In saying all this however, I am reminded of hearing a mother and carer of an adult who has profound disabilities, living in a rural area, talking on the professional boundaries issue. In essence she said, “my son has no friends; there are geographical and physical and practical barriers to him participating in community life, why can’t he refer to his worker as his friend?”.

So as we build our frameworks and languages to assert and value the emotional component of care work, we have to remember that the voices of professionals are not the only voices that matter.)...

Thank you for your attention.
References


Grandey, A. A. (2003), When “the show must go on”: Surface acting and deep acting as determinants of emotional exhaustion and peer-rated service delivery, Academy of Management Journal, Volume, 46, pp. 86-96.


Lewis, J. and Giuliali,S., (2005) 'The Adult Worker Model Family, Gender Equality and Care', Economy and Society, Volume, 34, Number 1, pp.76-104.