

The World of Care Work in Australia: Care Workers, Care Managers and the Provision of Good Care

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The World of Care Work

- There is little Australian research from the perspective of paid care workers (care workers, home care workers) and care managers (care coordinators, case managers).
- The aim of this research was to explore, analyse and document the world of care work from the perspective of care workers and managers.

Paid Community Care Workers in Australia

- Paid community care workers are those working in the community providing services for older Australians in their homes, care workers, community care workers, home care workers.
- The community services workforce is one of the fastest growing sectors of the workforce (Meagher and Healy, 2005).
- The care workforce overall is predominately female and is ageing (AIHW, 2007:334).
- Care workers earn lower hourly incomes, on average, than those they work beside in non-caring occupations in community service industries (Meagher and Healy, 2006:92).
- In 2001 38.5 per cent of all care workers had no qualifications, while 7.3 per cent held a bachelor degree or higher (Meagher & Healy 2006:36).

What Do We Know of The Experiences of Care Workers?

When care workers are asked what makes for good care, it is the centrality of relationships with those for whom they care that is singled out (Aronson & Neysmith 1996; Piercy 2000; Twigg 2000).

Care workers:

- enjoy their work and consistently report very high levels of job satisfaction (McLean 1999; Szebehely 2005; Twigg 2000).
- like the autonomy and freedom of working alone and the opportunity to exercise judgements in relation to how they can best meet the individualised needs of the older person (Szebehely 2005; Twigg 2000).
- sense of themselves as caring individuals, committed to improving the lives of the older people they are working with, is a central feature of their personal and work identities (Rasmussen 2004).

What Do We Know of The Experiences of Care Workers?

- What care workers like least about their work is those aspects over which they have little control, care workers will do all that they can to provide what they judge to be good care, including 'breaking the rules' and working unpaid overtime (Aronson & Neysmith 2006; McLean 1999; Szebehely 2005).
- Job satisfaction and enjoyment decline when care workers have less time to spend with older people and as tasks become more instrumental (Aronson & Neysmith 2006; McLean 1999; Szebehely 2005).
- With moves to managerialism and market models of care, care workers report a devaluing of the relational and emotional labour central to care work and increasing difficulties in meeting the needs of older people (Aronson & Neysmith 2006 Rasmussen 2004; Szebehely 2005).

Provision of Good Care

Twenty two care workers and 12 care managers employed by a not-for profit, non-government care provider organisation were interviewed.

All these care managers and care workers endeavoured to provide care based on 'caring' principles, where the formation of relationships with those receiving the service are privileged, as opposed to instrumental, task-oriented, managerialist principles.

The core of their work was building professional relationships with older people and enhancing psychological well being and social connectedness.

Provision of Good Care

- The practice of care managers and care workers in the study was underpinned by principles of human rights and social justice.
- Both the care workers and the care managers used the term 'professional care worker' to describe a care worker who incorporated these principles into their work.
- Their practice was underpinned with what Tronto writes of as the ethics of care, care that encompasses attentiveness, responsibility, competence and responsiveness (Tronto, 1993:127–34).

Negotiating 'Boundaries'

- Care managers and care workers are constantly negotiating the boundaries between work relationships and personal relationships or friendships.
- Care managers were concerned that the care workers would breach boundaries and 'break the rules' in ways that may lead to abuse and exploitation of the care worker or the older person.
- The care workers were confident they could successfully negotiate these boundaries and provide, in their judgement, good care, with guidance from care managers and clear and transparent policies and guidelines.

Care Managers

The care workers are employed because they care, however, this leads to tensions.

- ‘Everybody struggles with this in this field because you are going in every single day of the week and of course you develop a relationship. We are looking for people who have this ability to be able to be empathetic, understanding, be warm in what they do without actually giving completely of themselves. That is a very difficult balance’ (Sandra, Care Manager, aged 37).
- ‘So it is a huge skill to professionally care for someone in a way that is loving and compassionate and then extricate yourself. And that is what we are asking people to do’ (Barbara, Care Manager, aged 58).

The Care Workers

Central to the care worker's negotiations was the clash of values between care as understood in the private sphere, as personal, warm, compassionate, flexible and emotional, with the values of a professional in the public sphere expected to 'create' distance and work to consistently applied rules.

'Sometimes you tend to go very much by the book, follow the rule. The guidelines that we've been given strongly emphasise the problems that could be caused if you go outside the boundaries, outside the guidelines. So I do everything I can within the boundaries. I don't want to step outside them' (Jennifer, Care Worker, aged 34).

Points of Tension: Care Managers

The care managers spoke of having to be constantly vigilant, putting a lot of time and energy into explaining the nature of the desired professional working relationship.

- ‘There seems to be this dilemma that is not settled. How can you actually be human and be emotional, but still cut people off at a certain point without burning out? People are either throwing themselves completely into it or doing an unnatural thing where they are not feeling for people because they are too scared that they are going to cross those boundaries’ (Sandra, Care Manager, aged 37).

Points of Tension: Care Workers

By contrast, the care workers stated that they learnt through their own experiences.

- ‘When I first started I wanted to do everything for everybody. But now, four years later, I’ve learnt that boundaries are very important. You’ve got to stop somewhere. I’ve learnt the hard way. When I first started I thought about the job all the time but you realise that you can’t take care of everybody or solve everyone’s problems’ (Fiona, Care Worker, aged 46).
- ‘We are never supposed to give our home numbers out to people. But of course we all break the rules and there are certain people we will give the number to and there are certain people you won’t. The genuine people will never ring you unless they have to. It is awful really when you are told not to give your phone number out to anybody’ (Meg, Care Worker, aged 53).

Policies and guidelines

Care managers were committed to putting in place policies and procedures that would protect and enhance the rights of both the care workers and the older people.

In formulating policy the managers incorporated frontline knowledge of the care workers.

The care managers had developed a range of detailed and transparent policies to cover most contingencies.

Summing Up

- Care managers and care workers agreed that good relationships between care workers and older people are central to the provision of good care.
- Older people want care and support that is based on strong relationships.
- Care workers want to form on-going productive, working relationships with their clients.

Conclusion

- However, in this study, care managers and care workers had different views about how relationships should be negotiated and where boundaries should be drawn.
- Care managers in this organisation had set in place policies and procedures to enable these relationships to flourish while protecting the rights of the care worker and the person receiving care.
- These policies and procedures were pivotal in providing guidance to care workers, while at the same time enabling care workers to make professional judgements based on their ethic of care.

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