

The Struggle for Meaning in Contemporary Care Work

Sarah Jenkins 
Cardiff University, UK

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Abstract

Adult social care in the UK is represented as a sector in ‘crisis’. Against this backdrop, the study examines how care workers construct work meanings. By examining a care cooperative, the article adapts, extends and amends Laaser and Karlsson’s work meanings framework. The study finds that meanings are a source of ongoing struggle because of the way care, as a gendered job, continues to be devalued by society. The article makes three contributions to the study of work meanings. First, it identifies how the organizational context plays a significant role in constraining and/or enabling meaning-making. Second, the broader socio-economic context outside of the workplace contributes to how workers seek to achieve dignity and respect by resisting the social attribution of care work as undervalued and low skilled. Finally, the study reveals how the ‘dark side’ of meaningful work is realized through the emotional intensity of relational care work.

Keywords

agency, care work, gender, meaningful work, resistance, work meanings

Introduction

Adult social care in the UK is beset by recruitment shortages and high levels of turnover associated with poor rates of pay, precarious working contracts for many, unsociable hours and demanding work. These employment conditions are the outcome of both marketization and austerity (Baines and Cunningham, 2015; Cunningham, 2016; Cunningham and James, 2014). Yet care workers report high levels of meaning (Atkinson and Lucas, 2013) and satisfaction (Hebson et al., 2015) from their work. To explore this paradox, the broad research question which frames the study asks: How do care workers construct meaning from their work? The context of the study is relevant to this inquiry because the

Corresponding author:

Sarah Jenkins, Cardiff Business School, Colum Drive, Cardiff University, Cardiff CF10 3EU, UK.

Email: JenkinsSL@cardiff.ac.uk

subject of work meanings is explored through an in-depth qualitative case study of an under-researched sub-sector of the social care workforce: those who work in supported living settings providing care for disabled adults within a cooperative organization. As such, the study examines how and why care workers who remain in the sector gain meaning from their work by applying and extending recent conceptualizations of work meanings by Laaser and Karlsson (2022, 2023) and Laaser and Bolton (2022). Drawing on Labour Process Theory (LPT) and critical realism, their work provides an important development in theorizing work meanings by focusing on the lived realities of work and how the conditions of work enable and/or constrain workers' potential to use their agency to construct their work as meaningful.

By focusing on an empirical study of an under-researched care labour process and setting, additional factors not explored fully in current theorizations of work meanings are brought into focus. These factors include recognizing the relevance of gendered relations in how work meanings are formed as well as paying greater attention to how both the broader socio-economic and political context and the organizational context in which labour processes are embedded can shape the construction of work meanings. Here, contextual features inform our understandings of agency in meaning-making to include how constructing meaning can represent a form of resistance to the undervaluation of gendered care work. Finally examining how deep relational care work represents a 'dark side' of work meanings. These empirical features extend and amend three conceptual contributions to Laaser and Karlsson's (2022, 2023) framing of work meanings. First, the article identifies how labour processes are embedded within organizational contexts which influence the constraining and enabling conditions on constructions of work meanings. Second, focusing on gendered care work demonstrates how the broader socio-political context attributes this work as low skilled and low status, which in turn shapes workers' agential struggle for meaning. Specifically, constructing meaning in care work can be viewed as extending notions of employee agency as a way of resisting and challenging the social and economic undervaluation of this work. Care workers hence draw on alternative understandings of dignity and recognition to emphasize how they contribute to improving their clients' lives. Finally, the study amends and contests Laaser and Karlsson's (2023) framework by recognizing how deeply relational care work results in emotional intensity which can represent a 'dark side' of meaningful work. In this way, the article aims to capture and explain the ways in which finding meaning in care work is an ongoing source of struggle for dignity and recognition.

Social care work in context

Care work incorporates labour of the 'hands, minds and hearts' (Bolton and Wibberley, 2014: 683) by involving both intimate body work (Wolkowitz, 2006) and emotion management skills (Bolton, 2005a; James, 1989). Yet, care work has been historically devalued in terms of its status and recognition and designated as low-paid, low-skilled, women's 'dirty work' (Bolton, 2005b; Cain, 2017). These perceptions of care emanate from a variety of factors. Notably, gendered ideologies play a considerable role in devaluing care, viewing this work as a 'natural' talent of women, rather than involving skills learnt over time (James, 1989). These social constructions conceive of skills as residing

in the person performing the task, rather than the skills inherent in the task, resulting in the undervaluation of care because of the association with femininity (Phillips and Taylor, 1980). Furthermore, a familial logic (Palmer and Eveline, 2012) links paid care work to women's unpaid care in the home resulting in rendering the contribution of care labour as invisible and undervalued (Bolton and Wibberley, 2014; Stacey, 2011). Associations with care in the domestic sphere also invoke misguided sentiments that women are motivated to undertake paid care for love and are therefore not financially incentivized. Consequently, care workers are subjected to a 'care penalty' (England and Folbre, 1999), receiving minimal pay for their contribution.

The political economy of care also exacerbates the undervaluation of care work: a neo-liberal agenda in the UK defines the market as the main instrument for the allocation of adult social care resulting in the 'hollowing out' of the state as a direct care provider (Jessop, 2002). Instead, the state becomes a contractor of services, a key feature of New Public Management (NPM). The underlying logic of NPM is that market-based competition for contracts based on low costs will increase efficiency and decrease welfare costs (Dunleavy and Hood, 1994). Across the UK, private sector provision predominates and accounts for approximately four-fifths of adult social care contracts. Furthermore, financialization is evident by the growing entry of private equity firms in the provision of larger care homes for the elderly; nearly 20% of the sector is dominated by five providers, three of which are private equity funded (Blakeley and Quilter-Pinner, 2019). Additionally, the 'austerity' agenda begun by the Coalition Government in 2010, led to a significant reduction in the public financing of adult social care. Glasby et al. (2021: 413) describe this period as a 'lost decade', the consequences of which have been 'greater unmet/under-met need, more self-funding, lower-quality care, a crisis among care providers and much greater pressure on staff, families and partner agencies' (Glasby et al., 2021: 427).

This political economy of care shaped by marketization and austerity has severely impacted on employment conditions in the sector, especially in relation to low pay and work intensification (Clarke and Newman, 2012; Cunningham and James, 2014; Hayes and Moore, 2017). Deleterious working conditions have specific implications for a workforce of two million people and have a particular gendered effect as women constitute 82% of the adult social care workforce. Since the financial crisis, Hayes and Moore (2017) indicate that care work has become the main source of women's low-waged employment. Hence, the minimum waged work in this sector combined with working hours which can be unpredictable, as evident in the prevalence of short-term and zero-hours contracts, undoubtedly contributes to a staff turnover rate in Wales and England of approximately 30%. Cost-focused commissioning has also led to the intensive commodification of care within the labour process evident in management practices marked by the heightened surveillance of workers' time and processes of standardization within domiciliary care for the elderly (Bolton and Wibberley, 2014; Hayes and Moore, 2017). Furthermore, marketization explains that even when organizations are not profit-driven, they are motivated by the same logic to minimize labour costs to secure contracts, resulting in a convergence of 'bad' job practices within the sector (Cunningham, 2016).

A labour process perspective explains the dynamics of care labour, especially against the broader back-drop of the political economy of care. As set out by Bolton and

Wibberley (2014: 682), LPT understands caring labour as a form of human activity that takes on a particular character under capitalism, connecting intimate activity within a home–work space to the broader political economy. Thus, LPT considers the inherent tensions of care work in the context of marketization, the introduction of new managerial control regimes that aim to capture the variability of labour power (the indeterminacy of labour) and employers' reliance on discretionary effort (Thompson and Smith, 2009). Within domiciliary care, the labour process is shaped by a tightly defined, task-based commodity of care which neglects how the labour process is supported (or undermined) by social relations (Bolton and Wibberley, 2014: 684), such that the formal labour process is dominated by prescribed care plans where the person being cared for is conceived of as a site of labour, while the informal labour process is excluded from view (Bolton and Wibberley, 2014: 683). These important informal features include social relations such as time to talk to clients or cleaning tasks.

In this respect, only by examining how the political economy influences the formal and informal labour process can we understand why aspects of care work are unrecognized and undervalued (Bolton and Wibberley, 2014). However, care labour processes are diverse because they are influenced by the indeterminate, diverse, complex and social nature of care. As the sociology of the body literature (Cohen, 2011; Wolkowitz, 2002, 2006) exemplifies, care work is not exposed to one set of practices, workers or type of bodies-worked-upon. Consequently, the political economy of care which influences care labour processes is also subject to variation according to the nature of service provision, type of user being supported and the logic and approach of care within different workplace settings. This means that processes of commodification vary in care work, although this is an under-developed feature within studies of care. The study reported in this article is undertaken in a cooperative organizational organization providing personalized living support for disabled adults to live independently in the community, an under-researched sub-sector of the care workforce.

Furthermore, the labour process tradition also identifies the significance of employee agency, including how informal resistance is enacted in varied workplace contexts. Informal resistance is conceived as the 'means by which employees create some space and autonomy in order to exercise a degree of control over various aspects of the work process and its rules, norms and behaviour' (Edwards et al., 1995: 284). This search for autonomy underpins Ackroyd and Thompson's (1999; 2022) framework of *organizational misbehaviour* to illuminate the full repertoire of employee agency which takes place under the radar of formal organizations. Feminist scholars have also extended the ways in which resistance connects to broader ideological values and power relations (Gottfried and Graham, 1993). As Nancy Fraser argues, resistance in relation to gender can incorporate both a political economy perspective, as in calls for fairer *redistribution*, as well as in the cultural and social realm in response to a fairer *recognition* of worth and value. Fraser's (2000: 118 *status model* seeks to integrate both features and argues that status subordination cannot be understood in isolation from economic arrangements, nor recognition abstracted from distribution.

Arguably, both economic and cultural realms are relevant for understanding resistance in care work. For example, Crocker's (2019: 54) study of low-paid care workers' routine resistance argues that 'some of the same characteristics of work that lead to its

devaluation and reinforce workplace inequality are those that shape, and promote, worker resistance and solidarity'. Baines (2011, 2016) also acknowledges the significance of examining resistance in gendered care contexts, emphasising how the political economy of care and the social undervaluation of care work means that resistance can take on the form of a 'moral project' (Baines, 2016: 137) to redress the under-funded care system. Although limited in quantity, studies of resistance in care work illuminate how expressions of agency and resistance are linked to the specific social relations, conditions of work and the broader social and economic context within which care work is embedded.

Work meanings

Against the backdrop of the political economy of care, questions about whether work can be meaningful are prescient for social care – a sector considered to be in a perpetual 'crisis'. However, defining what is meaningful about work is often messy; compounded by the subjective nature of the endeavour and the contested nature of meanings (Bailey et al., 2019; Laaser and Bolton, 2022). Different disciplinary traditions have tended to focus on either objective or subjective factors in meaning-making. Objective work meanings owe much to Hackman and Oldham's (1974) job characteristics model to identify how meaningful work outcomes align with jobs incorporating task variety, challenge, high levels of autonomy and discretion. Whereas, subjective perspectives focus on the characteristics of the workers themselves and are dominated by the psychology literature (Kahn, 1990) and moral philosophy to explore the innately human need to receive recognition and a sense of purpose in life through work (Yeoman, 2014).

Arguably, concentrating on the subjective and/or objective factors which influence work meaning can lead to a simplification in our understanding (Laaser and Karlsson, 2023: 288) and de-contextualize how work meanings are formed (Bailey et al., 2019), which can also neglect the role of worker agency (Laaser and Karlsson, 2023: 288). To address these weaknesses, recent theorizations of meaningful work by Laaser and Bolton (2022) and Laaser and Karlsson (2022, 2023) have sought to emphasize the interactions between the conditions of work (objective) and employee agency (subjective). To examine objective work features, Laaser and Karlsson adopt a LPT lens while, at the same time, extending subjective features in relation to worker agency from a critical realism perspective. Both critical realism and LPT inspire a closer focus on how work is organized and experienced in connection to the broader political economy, as well as the role of agency within social structures. Laaser and Karlsson (2023: 180) explain that this framing allows for a better appreciation of the structural constraints and enablers of meaningful work by taking account of how objective work dimensions interact with agential responses. This approach identifies meaningful waged work as a dynamic continuum emerging from the interplay of objective and subjective dimensions by focusing specifically on *autonomy*, *dignity* and *recognition*. The interplay between structures and agency are reflected in Laaser and Karlsson's (2022) scenarios to identify conditions which can enable and/or constrain meaningful work.

First, contexts which allow for autonomy include an 'objective' dimension related to the control and discretion workers have over their tasks and time scheduling. To capture

objective autonomy in a variety of jobs, Laaser and Karlsson (2023: 192) distinguish between autonomy at the job control level and autonomy over working conditions. ‘Subjective’ autonomy consists of the space within formal organizations to create freedom both individually and collectively (Ackroyd and Thompson, 1999; 2022). The indeterminacy of labour means workers can re-appropriate aspects of the formal organization and the labour process to pursue their agentic interests, including establishing mutuality and solidarity (Laaser and Karlsson, 2023: 194–198). Within the framing, the level and degree of objective and subjective autonomy occupies a considerable feature in determining meaningful work.

Second, contexts which provide workers with a sense of dignity, include ‘objective’ dignity derived from both organizational policies and management practices as well as interactions between workers. These interactions uphold workers’ dignity by meeting norms of respect and civility, while enhancing workers’ self-respect (Laaser and Karlsson, 2022: 804). Subjective dignity is related to workers’ own self organization within the workplace to create a sense of value, worth and respect. Finally, recognition captures the socially and legally organized and institutionalized relations of recognition in waged work by recognizing the equality of the worker with respect to the other members of the organization (Laaser and Bolton, 2022: 215). These include practices and relations at work that treat the worker as worthy of respect, and who possesses the agentic powers to engage in participatory practices at work. Subjective recognition is based on self-organization, which embeds workers’ social relations at work and their work activities in relations of mutual recognition. For Laaser and Karlsson (2023: 219), the social structure developed by self-organization incorporates appreciation and the acknowledgement of contributions as a mode of respect with the everyday labour process and its social relations.

Against this background, Laaser and Karlsson (2023: 23) define meaningful waged work as a combination of objective and subjective autonomy, dignity and recognition. Whereas, meaningless waged work lacks these dimensions. The concept forms a continuum from meaningful to meaningless wage labour, which is used to develop different typologies of work meanings. In this way, Laaser and Karlsson (2023: 297–298) suggest that their work marks a revitalization of meaningful work as a positive and normative approach in critical social theory. The framework offers an important contribution to the study of how workers construct meaning from work by illuminating the conditions of work, but also the importance of evaluating the informal spaces by which workers interpret and express their agency and seek to gain autonomy, dignity and recognition. Fusing a labour process perspective which captures the specific features of waged work under capitalist forms of accumulation to emphasize structured antagonism, with a critical realist focus on the inter-relationship between structures and agency, marks an important break-through for a sociological assessment of work meanings.

The over-arching research question which guides this article investigates how care workers construct meaning from their work within an under-researched sub-sector of the social care workforce and within a cooperative care provider. In so doing, the study adapts and amends Laaser and Karlsson’s (2022, 2023) framework to better appreciate the struggle for meaning in paid care work with respect to three core contributions. First, to extend the existing framework by embedding the labour process within an

organizational context to understand further what enables and constrains work meanings. Second, to assess how the broader socio-economic and political context influences notions of the worth and value of paid work, especially relevant for understanding meanings in gendered care work. In this way, it extends our understanding of agency in meaning-making by examining how the struggle for recognition and dignity is expressed as a form of resistance to the undervaluation of care work. Finally, this study departs from Laaser and Karlsson's (2022, 2023) framing by acknowledging how deep relational work can also represent a 'dark side' of work meanings, to demonstrate the emotional intensity of this type of care work.

The article next sets out the research methods and findings which correspond to Laaser and Karlsson's (2022, 2023) framing of autonomy, dignity and recognition, and proceeds with a discussion and conclusion.

Research methods

The study centres on a qualitative case study of Care Coop (pseudonym), a large not-for-profit social care provider offering support to adults with both physical and mental disabilities to live independently in the community. The organization primarily provided supported living houses and transitioned to a multi-stakeholder cooperative (MSC) from a charity provider in 2017 with the aim of promoting care users' voice to better promote person-centred and co-designed approaches to care. MSCs extend membership rather than ownership to balance the interests of users, employees and the wider community in the governance of the organization (Michaud and Audebrand, 2019).

A qualitative case study design was chosen to address the research questions because case study designs allow the examination of contextual features both external and internal to the organization (Yin, 2003). In this way, as Vincent et al. (2020: 466) note, this design is consistent with a labour process approach as embedded organizational case studies explore and theorize the relationship between the political economy of work and subjective experience of work. The case was selected on the basis of purposive sampling because the case organization demonstrated the features this study sought to explore.

The data collected were based on in-depth semi-structured interviews with 30 care workers and managers, which lasted between 45 minutes and one hour and included two follow-up in-depth interviews with senior managers. The participants included 25 employees involved in direct care and support, three regional managers and two senior managers. The sample included 20 female and 10 male participants, which reflects the predominance of women in the sector. Workers volunteered to participate in the study after management advertised the project via internal email. All employees signed informed consent forms in line with ethical procedures. Pseudonyms are used for all respondents.

Semi-structured interviews adopted a conversational flow by addressing the core themes from the literature on job quality and work meanings. The interview questions addressed objective work features relating to the nature of work and including themes such as, task variety, job complexity, autonomy and discretion, as well as encouraging respondents to discuss their subjective experiences of work including relations with clients, co-workers and managers. Workers were asked to reflect on meaningful features of

work as well as situations which enabled and/or constrained meaningfulness. Conversations focused on what workers perceived were barriers to work meanings including the public perception of their work as well as issues of pay and working hours.

Following the identification of core themes, thematic analysis was conducted manually and followed an iterative process. Drawing on Glaser and Strauss's (1967) constant comparative method, the process involved detailed reading of the transcriptions and the identification of codes. As Corbin and Strauss (2008: 66) stress, coding involves:

interacting with the data (analysis) using techniques such as asking questions about the data, making comparisons between the data, and in doing so deriving concepts to stand for that data, then developing those concepts in terms of their properties and dimensions.

First-level codes related to core themes relating to objective dimensions of the work such as degree of autonomy, task discretion, job variety, pay and skill levels. Whereas, second-level codes focused more on the subjective dimensions of their work and sought to compare the views of workers relating to meaningful features, and how workers constructed meaning, as well as identifying the barriers to meaning-making. These themes focused on how care workers perceived their work, including their reflections on how their work was viewed in society, and also the meaningful moments they captured and how they viewed relations with their co-workers and clients. Through inspecting the data for similarities, differences and patterns, it was evident that workers' agency was influenced by broader social valuations of care work, and they gained meaning from in-depth relations with their clients.

Research findings

The findings are organized in this section to reflect Laaser and Karlsson's (2022, 2023) work meanings framework of autonomy, dignity and recognition before examining how meanings are constructed.

Care labour process: Responsible autonomy

The context of this study is significant for understanding the nature and organization of the care labour process and particularly the degree of autonomy and responsibility this work entails. Supported living settings provide opportunities for increased autonomy and discretion compared with domiciliary care for the elderly which is marked by intensive managerial surveillance and control over time (see Bolton and Wibberley, 2014; Hayes and Moore, 2017). For example, supported-living houses combine three to four disabled adults who live together and receive 24-hour support, which includes carers 'sleeping-in' for two nights a week. To facilitate user independence, carers were responsible for supporting all facets of their health and well-being including adhering to care plans such as performing intimate bodily care, accompanying users to medical appointments and administering medication. Tasks also extended to everyday 'running of the house', such as cooking, cleaning and managing finances, as well as engaging users in various leisure activities both informal and organized to ensure users could participate in the

community. These features influenced a care labour process which was marked by high levels of task variety, discretion, responsibility and autonomy. Staff commented positively on the range of task variety as well as the skills and abilities required for this role, including, as Zoe notes, the requirement to be a 'painter, decorator, hairdresser, nurse . . . in this environment you cover so many different facets'.

Furthermore, the MSC cooperative, based on the values of co-designed and personalized forms of care, also supported staff to exercise their autonomy to enable clients to lead more independent lives in the community. Staff ensured that users led active and engaged lives by promoting independent living through identifying activities which were tailored to the interests of individual clients. Staff often researched these activities and accessible facilities in their own time. This feature of work has become more relevant as austerity cuts had resulted in the closure of many local authority-organized activities. Lilly noted the range of clients' needs meant personalized support was often challenging:

We are always trying new things with activities . . . that they'll enjoy, I got . . . a person who's very able bodied to a person that's got 24-hour support and complex needs, so everyone's very different and you've got to try and accommodate every single person individually to what they would enjoy.

As activities were co-designed with users, workers enjoyed high levels of autonomy to determine the organization of their working time, with staff commenting that they 'are left alone by management' (Pat) and 'We decide on activities with the service user, so there is a lot of freedom in the role' (Katrina). Therefore, apart from adhering to regulated care plans, care workers' roles involved high degrees of discretion and autonomy with limited management over-sight, as the 'houses' tended to be organized between a team of care workers.

However, autonomy also increased the levels of responsibility, which were perceived of as onerous by the majority of care staff, as Phil indicated:

A bit nerve wracking . . . the responsibilities you're given. You know you've got people's lives in your hands . . . with meds, administration, looking after their finances, every aspect of their lives really.

Administering medication was perceived as particularly concerning by many who did not feel they had the necessary training and expertise to make potentially life-threatening interventions. As Yasmin reflected: 'When you actually think, if you mess up their meds . . . it's a criminal offence, you could go to prison for stuff like that'. In these cases, care workers reported feeling unprepared for the responsibilities the work entailed. Robin described how the role required 'nursing care', a feature of work which he felt he hadn't been trained for. In this way, autonomy also enhanced the levels of responsibility which were not always considered to be a positive job feature.

The problematic nature of responsibility was most clearly demonstrated by staff who supported clients with complex needs. Many users had been released from long-term institutionalized care settings and were considered to be the most challenging clients to

support because they displayed unpredictable and, sometimes, violent behaviour. Care staff reported being unprepared to deal with this type of behaviour, which led them to experience both fear and anxiety, especially when ‘sleeping-in’ in the supported living houses. Pat reported how one client would ‘slam her head into the wall’ and spill hot drinks over her, while Tracy conveyed how she had been bitten and scratched by clients. Other staff communicated their concerns when accompanying clients out in the community, where some events could trigger behavioural outbursts. As Baines and Cunningham (2011) note, user violence is often condoned in not-for-profit care providers because of the strong value orientation of care workers to ensure the well-being of service users. Similarly, Care Coop did not formally recognize the skills required to deal with clients who exhibited violent behaviour, as Phil commented:

It’s like being a mental health nurse more than a support worker . . . but we (Care Coop) don’t use ‘mental health’ . . . but 50/50 maybe have mental health issues along with other disabilities.

Despite supporting clients who exhibited mental health issues and challenging behaviour, care workers did not receive added support, training or higher rates of pay above the standard minimum wage. This form of care work entailed both high levels of responsibility and a substantial amount of hidden emotion management skills (Bolton, 2005a).

In sum, supported living care contexts are an under-researched sub-sector of the care workforce, with labour processes more reflective of ‘responsible autonomy’ (Friedman, 1986) compared with other types of care work. Additionally, the cooperative context enhanced staff autonomy because the focus on personalized care afforded the space for workers to co-design care and support their clients to live more independently. Although having autonomy was a meaningful feature of work, the corresponding high levels of responsibility were considered to be challenging. Within these settings, the process of commodification has some important similarities and differences from other types of care labour processes. First, as studies of domiciliary care (Bolton and Wibberley, 2014; Hayes and Moore, 2017) demonstrate, strict management surveillance resulted in an informal labour process, marked by high levels of discretionary effort. Within supported living settings, although managerial surveillance is less evident, discretionary effort is pronounced because of the emphasis on personalized care. Staff often used their private time to research community and leisure activities and took on tasks akin to a professional nurse, without the training, status or pay. In these contexts, commodification results from the under-recognition and invisibility of the advanced skills involved in supporting users with complex and challenging needs. The lack of formal recognition for the skills required to support these clients can be explained by cost-based contract commissioning and ensures the same wages for staff regardless of clients’ needs. This commodification results from a political economy of care which renders skills invisible to plug the gaps in a marketized system of care that had been stretched further by the outcomes of austerity. These features have further implications for how meaning is a source of struggle for care workers in relation to dignity and recognition.

Dignity and recognition in care work

Dignity and recognition are closely aligned and include subjective and objective dimensions. Objectively, workplace conditions and organizational policies can contribute or constrain dignity and recognition through the way the material conditions of work are distributed to uphold or undermine workers' self-respect (Laaser and Karlsson, 2022: 804–808). Whereas, subjective dignity and recognition is based on self-organization, which embeds workers' social relations at work and their work activities in relations of mutual recognition, enabling workers to find space to craft meanings that reinforce their sense of worth and value (Laaser and Karlsson, 2023). These practices include relations at work that treat workers with respect and support their agentic powers to engage in participatory practices at work. These practices are specifically evident in the types of co-worker relations reported in the dirty work literature (see Deery et al., 2019).

Care work also illuminates two dimensions of dignity and respect at work. First, as studies of dirty care work (see Stacey, 2005) emphasize, relations with clients contribute significantly to meaningful work, as is evident in the latter section. Second, dignity and respect are influenced by the broader socio-economic context which transmits the value, worth and respect for care work. On the one hand, workers gained meaning within the cooperative context which sanctioned the development of deep relations with clients and enabled workers to gain dignity from their work, while also confronting the broader social context which impeded dignity and recognition because of the undervaluation of care work. Hence, finding dignity and recognition was often a source of struggle; indeed, Julie noted how society was often 'dismissive' of care work, which had a 'bad press' associated with a general perception that 'anyone can do it'. Care staff commented that society did not appreciate the demanding nature of this work:

Some people think you just go out and take them out for food and cinema . . . but they don't see . . . how stressful the day can be, especially if you've got someone with challenging behaviour. (Oliver)

Robin also acknowledged the stigma of care work in society, as well as for those they support:

People I think look down on care work, they think you just wipe bums and things, but it's not all that . . . And if you're out in the community with a service user, people look down at you or stare.

In these excerpts, staff were aware of how their work was perceived by society and the lack of recognition of their worth and value.

Perceptions of worth and value were reinforced by the material conditions of work as staff received the minimum wage regardless of unsocial working hours, levels of seniority, the needs of the user or the degrees of skills required. Consequently, workers articulated that their pay reflected a lack of recognition of the skills involved in care work. The most quoted illustration of the comparable value of this work was in relation to the pay

of supermarket workers, considered to be much less skilled and with considerably fewer responsibilities:

There's a job advertised in the supermarket for £9 an hour . . . That's when you think of it . . . we do sleep-ins, I do Sunday to Monday and don't come home til 5 o'clock on Monday. That's an awful lot of time to be out of your environment. In that time, you are giving your everything to those people that you are looking after . . . There's not many jobs where you do that. (Julie)

Low pay in this setting was perceived to be particularly unfair and unjust. Phil reflected that as an older worker who had a pension from a previous employer, he was able to subsidize his low wages, but demonstrated his concern for younger staff:

We're the lowest paid of all care workers, the care assistants in hospital get £1.50 more an hour . . . you are not going to get rich doing this job but my colleagues, some of my colleagues, are really struggling, you know . . . you've got to be able to live.

As Sayer (2007) notes, this injustice was articulated as a form of 'lay morality' relating to their co-workers' well-being, demonstrating agential capabilities of evaluating what these consequences of low pay were, for both their co-workers and their own sense of social value and worth.

Care work thus demonstrates how factors outside of the workplace influence the dignity and respect of workers. Although Care Coop was considered positively as an employer, workers identified how the external economic context was the main reason for their low pay, as Evan highlighted: 'It seems to me, a lot of it is down to funding – cut-backs with the council'.

Local management also acknowledged that Care Coop was constrained to offer more pay due to cost-based local authority commissioning decisions:

When we are tendering, we have to compete . . . we have to show the local authority that we have a brilliant package . . . it's only going to cost this much, otherwise we'd lose all the houses. (Cynthia)

The organization had to choose between increased pay or closing services. The marketized context thus resulted in constraining how Care Coop could financially reward care staff. However, at the same time, the organization's promotion of personalized care created spaces for workers to gain dignity from their relations with clients. Assessing this sub-sector of the care labour process illuminates the relevance of issues of autonomy, dignity and respect for constructing meaningful work. The next section examines how these features informed the ways in which work meanings were constructed as a form of resistance.

Constructing meaningful work through resistance

Both objective autonomy and the cooperative values of the organization meant that care workers had space to draw on subjective autonomy and enact their agency through

informal resistance. Informal resistance in this setting was influenced both by the labour process within supported living contexts as well as the cooperative organizational context which emphasized a personalized care philosophy based on enhancing the choice and control of clients. These factors increased the autonomy afforded to workers and provided space for the development of close relational bonds with their clients. Hence, resistance was expressed to challenge the social and economic undervaluation of care in society. In this respect, workers' agency centred on achieving dignity and recognition for the value and contribution of their skilled labour to improve their clients' lives.

Resisting the undervaluation of care work

Despite the low pay, long working hours and considerable levels of responsibility, most staff identified the rewarding nature of deeply relational care work. All of the care staff interviewed reflected on how they had supported clients to achieve a better quality of life, which made care work meaningful, as Florence noted:

Seeing less able and vulnerable adults achieving those small things that we take for granted, whether it be from putting their washing on independently . . . to being able to go on their first holiday away. It's those little things that we make a difference to, we give them independence and confidence.

Evan spoke of his pride in enabling clients to become more independent, such that they required less support:

Rewarding . . . watching the service users grow . . . one gentleman when I started was in support 24/7. Now he is in a flat on his own and just gets 12 hours' support a week, nothing more.

These features of work mark care work apart from many other jobs, especially other low-paid work, and made care work fulfilling, as Lilly identified:

I get pleasure out of my job. I like seeing people learn new things, trying new things . . . ensuring that they remain in their own homes, remain independent . . . I love my job.

Ellie represented the views of her co-workers by emphasizing the difference support workers made to their clients' lives:

It's a job that is very satisfying. You go home in the night, and you're shattered, but you do feel as though you've made a difference. And sometimes you can make a massive difference for somebody . . . it's brilliant.

Care workers thus resisted the undervaluation of their work by emphasizing how they improved the lives of those they supported.

Despite their contribution, care workers also acknowledged how meaning was a source of struggle, and all spoke openly about the social perception that care work is not valuable or skilled. As a form of resistance to these views, care staff revealed and

emphasized the 'hidden' skills of care work. These skills often centred on high levels of emotion management (Bolton, 2005a) as staff discussed openly how they had initiated interventions developed over a number of years to help clients regulate their emotions, as Phil explained:

I'd worked with him [client] for 12 years, and he was extremely challenging. Extremely challenging, physically violent, you know? But we built up a relationship . . . I got to learn his triggers, what would set the behaviours off . . . I could see when he was coming off baseline, you know? I could see; I could tell; I could feel it.

Emotion management skills involved staff learning to anticipate when clients were distressed and intervening before their anxiety levels rose to avoid behavioural outbursts and to mediate clients' anxiety:

Once you get to know somebody, it's fantastic, because you get to know their little ways, their behaviours, and helping them manage their behaviours so their anxiety levels don't go off the scale. (Jenny)

By emphasizing the considerable hidden emotion management skills involved in this work, meaning was constructed as resistance to the prevailing depiction of care as undervalued and low-skilled work. In so doing, workers gained a sense of dignity and recognition through acknowledging their contribution to making a difference to the lives of their clients.

Resisting the undervaluation of disabled clients through advocacy

Deep client relations encouraged by the cooperative context also enabled care staff to extend the opportunities for users to exercise their voice and have a greater say in the nature of their support. In this context, care staff were provided with the organizational space to enact 'value discretion' (Jenkins and Delbridge, 2017). Value discretion centres on how under normative forms of control, workers use their space and discretion to enact the values of the organization. Within this setting, this involved workers interpreting the rights and values of clients to lead more independent lives by advocating for clients who often encountered prejudice and stigma, as Jenny noted:

I believe there's still a big stigma with regards to people with learning disabilities, you know? People kind of look at them and think they've got a learning disability, they can't do that . . . but being valued and having them go out there and have the opportunities that they get is one of our main things, you know.

Fiona was asked if she saw herself as an advocate for the people she supported:

Yeah, yeah, exactly. I was saying, especially as they haven't got a voice, we're their voice so we've got to speak up for them and if we think something's not right, it's down to us, we're the ones who look after them and it's down to us to speak on their behalf and make sure they get the right care and the right things they need.

In this context, care workers crafted a role as advocate for the rights of disabled people to resist the barriers they encountered and challenge social norms:

Just because they've got a learning disability, why should they be shut away? They can be part of the community . . . we're encouraging this independence and choice . . . Don't tell me that we can't do it. Yes, he can . . . I'm going to make it happen for him, yes. Why can't they do these things? (Fiona)

Workers' advocacy was most evident in relation to opposing their clients' attendance at local authority day-care centres. Even if their clients did not want to attend, they had little choice if it was included in their statutory care plan. Jenny identified that her clients' behaviour deteriorated because she didn't want to attend the day centre: 'Just because the service user has got a learning disability, doesn't mean they need to be stuck in a day centre'.

For care staff who identified with values of personalized care, the day centre was perceived as a return to institutionalized care. In this way, the centres contravened the values of personalization by removing the choice and control of their clients. Frances noted how some clients 'disliked the day centre so badly' they resorted to using their own money to pay for extra support so as not to attend the centre. Consequently, the staff established their own community group as an alternative day centre where their clients could attend more flexibly:

They much prefer their own community groups, it's the staff they know, there's no hard and fast rules, there's no: 'Ten o'clock you're doing this; 11 o'clock you're doing that'. There's none of that. It's so laid back. (Pam)

Advocating for their clients enabled workers to gain a sense of meaning because it emphasized the influence care staff had to improve the lives of those they supported. By extending Laaser and Karlsson's framing to incorporate how the agency to construct meaning also includes informal resistance, the study identifies how care workers were not passive beings, but knowledgeable and capable agents who were evaluative of their position and sought to resist the undervaluation of their work. In this way, Laaser and Karlsson's model is extended by emphasizing how constructing meaningful work can be expressed as a form of resistance to factors beyond the workplace. By resisting the perception of care as low-value and low-skilled work, care workers sought to achieve dignity and recognition for the ways their hidden skills and advocacy for their clients improved the lives of those they supported.

However, constructing meaningful work through relations with clients also reveals the 'dark side' of meaningfulness (Bunderson and Thompson, 2009) as deep and close relational bonds between clients and staff which resulted in high levels of emotional intensity. As such, workers reported their difficulties in 'switching off' from work:

Until you work in it you don't realize how much it entails . . . when you are a carer, it's alright to say I go to work, and I come home at 5. But, you get attached as well, you don't finish at 5. If someone is ill and you've left them, you want to know how that person is. You are constantly thinking about if they're okay. So, it's not the type of job where you can just go home and forget about it. (Ellie)

Furthermore, care staff often reported being unable to detach their emotions: 'I go home at night thinking, I could've done so much more' (Jenny).

These excerpts demonstrate the double-sided nature of relational work – as a source of joy and pain. This interpretation is reflective of the humanist tradition within the meaningful work literature which acknowledges that meaningful work can have a 'dark side' (Bunderson and Thompson, 2009); indeed, as well as being rewarding, this work can also be effortful, challenging and difficult (Bailey and Madden, 2017; Lips-Wiersma and Wright, 2012). In this respect, the study departs from Laaser and Karlsson's (2023: 152) framework as they argue that the 'dark side' of meaningful work is meaningless waged labour and hence, reject the potential for negative traits associated with meaningful work. However, examining relational work acknowledges the innately human bonds and ties which are rich, enduring and deep which can also make meaningful work paradoxical – involving both positive and negative dimensions – resulting in the struggle for meaning, rather than resulting in meaninglessness.

Discussion

Laaser and Karlsson's (2022, 2023) framing integrates objective and subjective features of autonomy, dignity and recognition which can enable and/or constrain work meanings. The empirical findings apply this framework to demonstrate and explain the paradoxical nature of constructing meaning in care work. In so doing, the study both extends and amends Laaser and Karlsson's conceptualization of how meaningful work is constructed. This is not only because of the specific features of care labour, but also because this type of care work and the cooperative organizational context promoted personalized and co-designed approaches to care marked by deep relational bonds with clients, many of whom had been supported over numerous years. These factors meant that the labour process was reflective of 'responsible autonomy' (Friedman, 1986) as workers had the space to exercise their 'value discretion' (Jenkins and Delbridge, 2017) by interpreting how best to support their clients' independence. Furthermore, this work also incorporated 'hidden' emotion management skills to support clients with complex needs. Despite these features of work, the broader social context and material rewards were perceived by care workers to undervalue their worth and contribution. Adopting Laaser and Karlsson's (2022, 2023) framing, the work in this case demonstrated features of objective and subjective autonomy, but achieving dignity and recognition remained a source of struggle. Although, at the organizational level, workers gained both recognition and respect for the contribution of their work, it was the broader social level which transmitted the undervaluation of this work. Hence, to gain meaning, workers used their agency to resist the depiction of their work as low-value, low-skilled work by emphasizing their contribution to enhancing the independence of their clients' lives and advocating for their choice and control.

The study contributes to conceptualizations of how meaning-making is enabled and constrained in three ways. First, the case study emphasizes the importance of the organizational context in which the labour process is embedded for enabling and/or constraining work meanings. For example, how the surplus is extracted and managed, and processes of commodification are influenced by the institutional level. As Paul Thompson elucidates, ownership matters, such that under a financialized regime of accumulation,

capitalism becomes disconnected from established institutions (Cushen and Thompson, 2016; Thompson, 2003; 2013). Within adult social care, ownership includes both private equity firms as well as care cooperative and non-profit providers; hence, the organization and control of the labour process reflects how surplus is extracted. As Brown et al. (2019) demonstrate, employee ownership models overcame the consequences of disconnected forms of capitalism. However, matters of ownership are more complex in marketized contexts such as care because of the impact of cost-based competition to win contracts (see Jenkins and Chivers, 2022). Marketized pressures arising from the political economy of care have led to a convergence of poor pay and employment conditions across providers in adult social care (Cunningham, 2016). Nevertheless, the cooperative context enabled spaces for agency, including supporting staff to advocate for the rights of their clients. These spaces for resistance enhanced the dignity and respect of care staff and the mutual recognition they received within the organization. Arguably, one of the areas of neglect in the current framing of meaningful work, is the influence of the corporate/organizational level in how meanings are constructed.

Second, centring the study on care demonstrates the role played by the broader social and economic context in shaping notions of value and worth, especially relevant for understanding how work meanings relate to dignity and recognition. Meaning-making in the context of care work thus represents a heightened struggle because of the broader social devaluation of care in society. The continued association of care work with femininity contributes to gendered and classed constructions of skill (Cockburn, 1983; Philips and Taylor, 1980) which undermine the skills involved in care labour, rendering invisible skilled emotion management (Bolton, 2005a). Thus, factors outside of the workplace can influence how meanings are constructed. This point is particularly relevant for assessments of meaning-making in gendered work contexts. These features align with the dirty work literature which demonstrates how gender and class can be resources which enable or constrain reframing work as positive (Deery et al., 2019; Tracy and Scott, 2006). Additionally, the study demonstrates that meanings were developed not only from relations with co-workers, but also with their clients (Stacey, 2011). These relations, despite providing workers with a sense of meaning, also resulted in emotional intensity which exposes the 'dark side' of meaningful work. For Laaser and Karlsson (2023), the 'dark side' of meaningful work is meaningless work. However, this study amends this understanding to demonstrate that, in the context of deep relational work, human attachments and deep bonds can make meaningful work a struggle.

Finally, the case extends the framework of work meanings with reference to our understanding of how agency is exercised in different contexts to construct work meanings. Spaces for agency incorporated informal resistance and, as such, insights from feminist scholarship broaden our understanding to identify how resistance can also be enacted in opposition to ideological values and power relations (Gottfried and Graham, 1993: 622). Given the significance of the broader social context for understanding dignity and recognition within care work, resistance beyond workplace relations represents an important consideration. As Nancy Fraser argues, resistance in gendered work can incorporate both a political economy perspective, as in calls for fairer redistribution, as well as in the cultural and social realm in response to a fairer recognition of worth and value. Fraser's (2000: 118–119) 'status model' seeks to integrate both to

exemplify how status subordination cannot be understood in isolation from economic arrangements, nor status recognition abstracted from economic distribution. Furthermore, studies of informal resistance in care work extend insights into how care work shapes agency (Baines, 2016; Crocker, 2019), such that the political economy of care and the devaluation of care work can influence the nature and shape of resistance, and thus this can be expressed as a 'moral project' to include battles for space and meaning (Baines, 2016: 137). As is the case in this study, advocating for the rights of disabled adults was a form of resistance to the broader social context and enabled workers to exercise agency to gain dignity and recognition.

Conclusion

The study brings into sharp relief the paradoxical nature of care work, which underscores the struggle for meaningful work. These struggles include how the autonomous nature of work is accompanied by onerous levels of responsibility, how the job requires high levels of skill, which are often hidden within the formal labour process, and how work devalued by society nevertheless makes a considerable difference to the lives of the disabled adults they support. Finally, the study identifies how in-depth relations with clients can be a source of meaning as well as illuminating the 'dark side' of emotional intensity in meaningful work.

Through an empirical examination of care work, the article makes a broader contribution to our conceptualization of meaning-making by applying Laaser and Karlsson's (2022, 2023) recent work meanings framework. In so doing, it emphasizes the importance of incorporating the role of organizational contexts in enabling and constraining conditions for meaning-making, including how ownership matters for the design of the labour process (see Thompson, 2003; 2013). Further studies of work meanings could therefore compare the influence of ownership on work meanings by undertaking comparative case studies. It also illustrates the importance of factors beyond the workplace, such as the broader socio-political context, specifically relevant for examining how issues of dignity and recognition in gendered care work influence meaning-making. In this respect, further research could assess how the broader context influences how work meanings are constructed by examining different nations. Consequently, understanding workplace agency in a context whereby care workers are often represented as passive victims of a broken system of social care, illuminates how the struggle for dignity and respect reveals potential spaces for informal resistance, even in contexts where there is limited evidence of formal resistance. In this way, the study makes a broader contribution to the under-researched study of agency and resistance in care work (Baines, 2011, 2016; Crocker, 2019; Lee-Treweek, 1997). An examination of work meanings thus explains the paradox of why some remain within the social care sector, while recognizing how finding meaning from work is an ongoing source of struggle for worth and value, dignity and respect.

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ORCID iD

Sarah Jenkins  <https://orcid.org/0000-0001-8754-1544>

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Sarah Jenkins is Professor of the Sociology of Work and Organizations at Cardiff Business School, Cardiff University. Her current research interests focus on the social care workforce and alternative organizational forms including social care cooperatives. Sarah is the National Lead for Wales of the IMPACT Centre (Improving Adult Social Care Together) and is part of the Executive Team for the recently established CARE Research Centre at Cardiff University where she co-ordinates the Social Care Workforce research theme. She has published in journals such as *Gender, Work & Organizations*, *Organization Studies*, *Organization Theory and Work*, *Employment and Society*.

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