



Employment and economy in Central and Eastern Europe
emecon.eu

Formal and informal care work in the hierarchy of occupational prestige¹

Olga Czeranowska

The hierarchy of occupational prestige is a valuable source of information about society's values. Unfortunately, in existing research, care work is mostly absent. For my PhD thesis I therefore conduct research on the new meanings of occupational prestige in care work, with a research plan based on a mixed-mode explanatory sequence design. It consists of quantitative research (desk research, PAPI questionnaire and media analysis) and a second, qualitative stage. On the basis of the quantitative research I identified occupational groups of high prestige, among which were elderly-care assistants. In the second stage I conducted qualitative interviews with an interview scenario focused on occupational prestige and identity, including such issues as relations between work and private life, and gender differences.

Key words: care work, occupational prestige, occupational identity

1. Introduction

Care work has always been present in society, but its character is currently changing, especially due to commodification (resulting from social and demographic changes). Contrary to most other forms of paid employment, crucial element of care work is impossible to measure and regulate in a formal way, e.g. by contract or other legal agreement. In this paper I analyse care work in terms of occupational prestige – a perspective that has been widely researched in relation to contract-regulated occupations. Research on occupational prestige is so interesting because of occupational groups' vital role in shaping societal structure in modern, free-market societies (Domański, Sawiński, Słomczyński 2007: 37). What is more, occupational prestige as a way of organising inequalities integrates society, because it legitimises the status quo and synthesises social connections to facilitate interactions (Domański 1991: 16).

I start with a brief theoretical background concerning two main concepts – care work and prestige. Some basic presuppositions and definitions are presented as a framework for further analysis. In the second part I present my own research on the opinions of elderly-care assistants about occupational prestige as a general concept and in relation to their work.

2. Theoretical background

2.1. Care work

In the introduction to the study by the International Labour Organization “InFocus Programme on Socio-Economic Security”, Standing writes that care work is a subject that has not received enough attention in mainstream economic and social policy analysis (Standing 2001: v). He predicts however that this situation will change, as the meaning of care work in the 21st century is bound to grow. There are several factors contributing to this: demographic

¹ The research described in this article is part of my doctoral thesis being prepared under the guidance of Professor Małgorzata Fuszara (Institute of Applied Social Sciences, University of Warsaw).

processes (ageing of western societies), the deconstruction of family models, changes in social and economic gender roles, and the overhaul of the welfare state (Standing 2001: 16).

Because of both its universality and diversity of forms (in terms of the situation, conditions and people involved), it is difficult to find a definition of care work that includes all possible variants without any loss of its utility as an analytical tool. Standing proposes a multi-dimensional understanding which consists of time (spent in actual work and “stand-by” readiness), effort, technique, social skills, emotional input and stress (fear of failing the recipient or observers and regulators). Care work is therefore the “work of looking after the physical, psychological, emotional and developmental needs of one or more other people” (Standing 2001: 17-18). The care-recipients are usually minors (infants and children of school age), sick, disabled or elderly people. Standing opts however for taking a “you-and-me” perspective, which means that all members of society need some kind of care. The providers of care can be professionals in public and private health services, state-regulated or paid social workers, public or private care-provider agencies, or temporary employment agencies. Care may be also provided by unpaid voluntary and community organisations or relatives, outside cash nexus (Standing 2001: 20).

According to Glucksmann’s “Total Social Organisation of Labour” model, care is an example of historically changing links and shifts between formal and informal provision (Glucksmann 2005: 29). Also, the broad empirical analysis conducted by Lyon and Glucksmann presents the multiplicity of the social organisation of elderly care in various countries. The configurational analysis includes four main actors (the family, state, market and voluntary sectors) and the connections between them (Lyon, Glucksmann 2008: 113-115).

According to Folbre (2015), care work includes connecting with others and helping them meet their needs. Care-receivers can be elderly, ill or children (care can be connected with learning). Care may be economically rewarded or unpaid, but in both cases, internal motivation (a passion or personal engagement) is crucial. Attitudes of care providers are expected to guarantee a high quality of care, as even with low-end pay levels they are not likely to strike or protest (Folbre also mentions that people who need care are usually in a bad financial situation, which forces down the price of the service). Folbre describes this situation by the term *prisoner of love*, meaning that their attachment to the receivers of care prevents the providers from negotiating the conditions of their work. She writes also that this kind of work is traditionally associated with femininity, and therefore the social construction of gender roles may motivate women to work in the care sector (Folbre 2003).

Also Daly puts emphasis on the fact that care was originally a “woman-specific” concept, referring mostly to unpaid domestic labour. The lack of economic reward means that dispositions, orientations and attitudes related to care have a non-material basis – they have the logic of a gift or of personal responsibility. Worthy of note in Daly’s definition is that care work includes both the *activities* and the *relations* involved in caring for the ill, elderly and dependent young (Daly 2001: 34). Similarly, Cancian and Oliker define care as a “feeling of affection and responsibility combined with actions that provide responsively for an individual’s personal needs or well-being in a face-to-face relationship” (Cancian and Oliker 2000: 2). The relational character of care not only makes it immeasurable (and therefore difficult to reward according to market logic) but also *hampers* the possibility of economic and sociological analyses.

England (2005) divides sociological studies on care into five theoretical frameworks: *devaluation perspective*, *public good framework*, *prisoner of love*, *commodification of emotions* and *love and money*.

The *devaluation perspective* concentrates on the gender bias connected with care work. Cultural beliefs and deeply rooted patterns lessen the value of femininity, which contributes to discrimination on the labour market. Differences in women’s and men’s situations include the gender pay gap – a consequence of women’s lower pay for the same work and generally lower pay in feminised sectors. This tendency is especially visible in the case of care work, because not only are sectors and occupations connected with care feminised, but also care in

itself is part of the traditional female role (England 2005: 383). England points out that the same process may occur on the basis of race discrimination; therefore it is possible to see intersections between some categories of employees who might be discriminated against for more than one reason (England 2005: 384).²

According to the *public good framework*, care work gives more indirect social benefits than other kinds of production or service work. Public goods are characterised by the fact that it is not possible to directly measure their outcome and turn them into profits. They are therefore underprovided by markets that function purely on economic logics (England 2005: 387).

Feminist studies focus on the unique character of caring motives that are the opposite of the traditional economic understanding of work as activity pursued in order to obtain material rewards (England 2005: 389). Also, according to Abel and Nelson, the care-giver provides both love and labour, breaking the Parsonian distinction between instrumental tasks and affective relations (Abel and Nelson 1990: 4). The fact that workers have internal motivations and their work brings intrinsic rewards (feeling of fulfillment, positive emotional responses from care-receivers, etc.) results in the situation described by Folbre's concept of the *prisoner of love* mentioned earlier. That they (care workers) are often "emotionally hostage" enables employers or managers to adopt cost-cutting strategies (sometimes even taking advantage of a worker's willingness to make personal sacrifices to maintain quality of care when staff and resources are scarce).

The *commodification of emotions* perspective is based on the term *emotional labour* coined by Hochschild. It means the "management of feeling to create a publicly observable facial and bodily display; emotional labour is sold for a wage and therefore has exchange value". (Hochschild 2003: 7). Paula England considers this theoretical framework to be the opposite of the *prisoner of work* perspective, because it concentrates not on non-pecuniary amenities, but emotional and mental costs (England 2005: 392). Also Hochschild argues that emotional labour has a specific cost on a personal level, as it affects workers' ability to listen to their feelings and – in extreme cases – to feel them at all (Hochschild 2003: 21). It is worthy of mention the alternative concept of *organised emotional care* described by Lopez on the basis of his empirical studies in nursing homes. Contrary to *emotional labour*, this organisational approach provides support for emotional authenticity (Lopez 2006: 155). Organisational rules and procedures are therefore aimed at creating possibilities for shaping real caring relations (Lopez 2006: 137).

The last of the perspectives described by England rejects the dichotomy between love and money, which is underscored by the assumption that material rewards would spoil the authenticity of care. (England 2005: 392). For example, Zelizer (2010) contests what she calls the *hostile worlds* view, according to which contact between the spheres of monetary transfers and social relations leads to moral contamination of the latter. She opposes also the *nothing-but* view that describes contact between the two spheres (monetary transfers and emotional relations) in the very simplistic view of a usual rational exchange, an expression of wider cultural norms or coercion. In place of these two options Zelizer proposes the *differentiated ties* view, reflecting the complexity of the economic dimension of emotional relations (Zelizer 2010: 182).

All these approaches show that care work is in many ways different from any other kind of work. In my opinion these differences make most forms of care at least to some degree informal (by which I understand that it cannot be fully regulated by a legal contract). According to the International Labour Organization definition, the term '*informal economy*' refers to "*all economic activities by workers and economic units that are – in law or in practice – not covered or insufficiently covered by formal arrangements.*" (ILO 2002). Similarly the Organisation for Economic Co-operation and Development definition states that

² I think this may also referred to care work of immigrant and older workers, which is also frequently informal.

the level of organisation in the informal sector is low and the labour relations are not based on contractual arrangements with formal guarantees.

Due to the growing demand, care services are becoming more professionalised, but contracts or other agreements can only cover measurable elements of care (food preparation, medical and hygienic procedures etc.), while the relational component will always stay indefinable. This does not mean of course that care work should not be regulated in order to provide the workers with the “Four Pillars of Decent Work”: employment, rights, social dialogue and social protection (ILO).

2.2. Prestige

Occupational prestige is a widely explored research problem (Domański 1991: 227). However, most of the existing research is focused on the macrostructural perspective on the prestige hierarchy of occupational groups. My focus is therefore on the individual point of view, and aims to analyse occupational prestige in the occupations not included among previous Polish studies found in my desk research (such as elderly-care assistant).

Prestige as a concept was first introduced into the social sciences by Weber, who included it in his three-component theory of stratification, according to which it was (with power and wealth) one of the factors that shape social structure. Weber’s multidimensional approach to social stratification was based on the interplay of these factors. Social structures can therefore be founded on different kinds of differences – status groups, classes and parties. The meaning of belonging to status groups, related to the level of prestige, was crucial in traditional, feudal societies; however Weber noted that in modern times some occupational groups seem to have inherited some elements of their *modus operandi* such as endogamy, emphasis on lifestyle and formalised ways of showing respect (Weber 1975: 415-428).

Prestige is also an important element in the functional theory of stratification. In their classic text *Functional necessity of stratification*, Davies and Moore claim that stratification is essential for the welfare of society. According to this theory, in order to survive, every group needs to ensure that crucial social roles will be performed properly. Important positions should be therefore filled by individuals with the required qualifications and high motivation to perform the prescribed duties (Davies and Moore 1944: 242). For that reason, society uses different kinds of rewards (built into the positions) as incentives for its members who have the required skills (or are able to gain them) to take the position and perform the duties connected with it. The degree to which the position is rewarded depends on two elements: the first its functional necessity for a society as a whole, and second, the scarcity of personnel resulting from the uncommonness of the competences required and the difficulty in obtaining them (Davies and Moore 1944: 243).

In terms of occupational prestige Domański, instead of focusing on the single person or situation, defines prestige as a system of criteria integrating the assessments in social situations of groups and individuals (Domański 1991: 11). He sees prestige as both a subjective and objective phenomena (Domański 1991: 5).

Domański is also the author of a typology of prestige, which divides it into personal, positional and situational types. The first type is associated with personal traits and charisma; the second with the social role performed, and the third, with interactions in a particular situation (Domański 1991: 41-42). To this basic division Domański added the formal dimension of institutionalised prestige, that is, prestige derived from the observance of legal or moral norms. In modern societies that are contract-based (not status-based), these norms tend however to become gradually less strict (Domański 2012: 49).

The length of this paper limits my theoretical introduction to the high points. Nevertheless they demonstrate that the hierarchy of prestige can be seen as a source of sociologically important data. Another element these three theoretical approaches have in common is the meaning of the social division of work and occupational roles for prestige exchanges (both on the micro and macro level).

Occupation is a basic indicator of the individual’s place in a social structure, and has a strong impact on behavior (Domański, Sawicki, Słomczyński 2007: 15). This characteristic is also very convenient from a methodological point of view: Foremost, data on occupation are

relatively easy to obtain (most people don't consider it too intimate to give information about their income or education). In addition, categorisations can be created that make possible historical and diachronical analyses.

Due to its significance as a source of sociological data, research on occupational prestige has a very long tradition. The first study on a nationally representative sample was conducted by the American National Opinion Research Center in 1947. It established what may be called the *classical methodology for occupational prestige research* – that is, a list of occupations with a scale on which respondents rate each one (Domański, Sawicki, Słomczyński 2007: 32). A first Polish occupational prestige study was conducted in 1958 by Wesołowski and Sarapata of the Polish Radio Public Opinion Research Centre³ (on the sample of the Warsaw population). (Domański 1991: 84). Domański observes that changes in the hierarchy were rather insignificant both during the state-socialist PRL and after 1989. In all studies the highest prestige enjoyed occupations that demanded specific competences. This means that the shape of the hierarchy corresponds, at least to some extent, to the functional theory of stratification, because high-prestige occupations are difficult and meet society's basic needs – security, education and health (Domański 2010: 113)⁴.

Care-work professions are not very visible in existing research on the occupational prestige hierarchy. On the Public Opinion Research Centre (CBOS)⁵ questionnaire from 2013 here were two health-care professions: nurse (fifth in the hierarchy of thirty-three occupations), and medical doctor (eighth). Also the profession of teacher may be related to care (seventh). No care professions in the narrower sense (such as elderly-care assistant or child-minder) were included. Certainly, the construction of the questionnaire may itself be seen as information about what society (or rather the authors of the study) considers *work*.

3. Quantitative study

The research plan for my PhD thesis was based on the conception of the triangulation of methods and sources of data. I used an explanatory sequential design, by which the choice of interviewees for the qualitative interviews was based on the secondary data (CBOS study from 2013) and findings from my own quantitative research.

Because one of my main research problems was the perception of occupational prestige by high-prestige groups, I decided to conduct a survey on a sample of students at the *Main School of Fire Service (MSFS). I chose this group because it is the most prestigious occupational group according to the latest CBOS poll of a nationally representative population sample. In this paper I present the results relevant to the topic of care work.

“The Main School of Fire Service (MSFS) is an academic facility of state services subordinate to the Minister of Internal Affairs. It educates the firefighters of the State Fire Service, officers of other services and guards, subordinate to the Minister of the Internal Affairs. MSFS also trains civilians.”]

3.1. Methodology

Thanks to the help of MSFS authorities I was able to conduct my study using an auditory PAPI questionnaire. To make conclusions about the process of shaping the occupational identity of the students, I aimed to collect opinions from respondents at various stages of their education. In total I obtained 280 questionnaires from three classes of students at the Faculty of Fire Safety Engineering, both full-time and extramural (firefighters on active duty).

³ Ośrodek Badania Opinii Publicznej przy Polskim Radiu

⁴ In his analysis professor Domański included studies from the years 1958–2008, but his conclusions also agree with the most recent Public Opinion Research Centre study.

⁵ Centrum Badania Opinii Publicznej - CBOS

3.2. Findings

I used the same question about prestige of occupations as in CBOS poll. I decided that possibility of comparisons was prevailing the methodological problems with question in which the place of word *prestige* (pol. *prestiz*) other one is used (pol. *powazanie* – which is semantically closer to *respect* or *esteem*). This construction of a questionnaire is a “tradition” in Polish research on occupational prestige, though Professor Irena Reszke considered it a result of a “*terrible methodological chaos*” (Reszke 1984: 17).

Because of the limitation on the questionnaire’s length I didn’t include all thirty-three occupations from the 2013 CBOS study, using instead four of them: two with the highest prestige level (firefighter and university professor) and two with the lowest (Member of Parliament and political party member). I added also six other occupations, half of which I called operationally *modern labour-market occupations*, and the other half, *show-business occupations*. The first group included occupations relatively new and typical for a service-centred economy (elderly-care assistant, PR agent and call-centre worker), while the other occupations were in the media and popular culture (actor/actress⁶, dancer and model).

Occupations from the CBOS study were rated very similarly to those in the nationally representative study. In contrast I found the rest of the answers very intriguing. Elderly-care assistant was considered by the respondents the occupation with highest prestige among the ones I added – 161 respondents (57.50 percent) chose answer *very high* or *high*, while only 39 respondents (13.93 percent) chose *very low* or *low*.

Analysis of the answers of respondents from the different classes shows that the extramural students (firefighters on active duty) most often chose the answer *very high* or *high* in regard to elderly-care assistants. This may result from the fact that this group is generally older and more probably has faced the problem of elderly care in their families.

Table 1. Occupational prestige of elderly-care assistants as perceived by students of the Main School of Fire Service by year of studies

| Level of prestige | Year | | | | | | | |
|-------------------|-------|--------|----|--------|----|--------|----|--------|
| | Total | | I | | II | | IV | |
| Very high/high | 161 | 57,50% | 66 | 53,23% | 67 | 67,8% | 28 | 49,12% |
| Very low/low | 39 | 13,93% | 16 | 12,90 | 11 | 11,11% | 12 | 21,05% |

Source: PAPI (n=280)

4. Qualitative study

The qualitative study was the second stage of my research plan, focusing on the personal and biographical perspective on occupational prestige and comparing the experiences and feelings of people whose prestige was of a different nature. Moreover, the aim was to explore the meaning of occupational identity, occupational prestige and career in their private lives.

The gender perspective was important in all of my research and therefore I included in the interview scenario questions about their experiences with gender differentiation on the labour market and especially in the interviewees occupational groups.

4.1. Methodology

For the semi-structured, personal in-depth interviews I prepared a scenario with the main questions (relating to my research problems), but the trajectories and lengths of interviews were different. On the basis of the secondary data as well as my own quantitative research, four occupational groups, including elderly-care assistants, were chosen. Between July and August 2015 I conducted 20 interviews (five with elderly-care assistants). The quantitative character of the study meant that non-probabilistic, theoretical sampling (snowball technique) should be used.

⁶ I used both gender forms for every occupation, though some may seem unnatural because of their novelty. However my research is sociological and not linguistic, and consequently grammatical purism is not my priority.

In line with the topic of this paper I present only the analysis of interviews with elderly-care assistants.

4.2. Findings

The qualitative content analysis of gathered material uses methodology inspired by Professor Kristi Maletrud's "systematic text condensation" (Maletrud: 2012). The main threads I identify in the conversations are: the definition of prestige, interviewee's personal prestige, and the unique character of care work.

The interviewees perceive prestige as a dual concept with two opposing sets of meanings. The first, commonly shared by a majority of society, is associated with external, measureable characteristics like good working conditions, high income, many possibilities of employment, fame or a high formal education level. Examples given of high-prestige occupational groups in this sense are actors, politicians and IT experts.

The second meaning of prestige is less measurable and comprises personality, attitudes towards others (clients, patients, co-workers), but mostly – personal satisfaction.

In my opinion, yes, it's occupational prestige that gives [us] satisfaction from [this] work. (M26) [1]

These two possible meanings of prestige could be related to the formal and informal dimensions of care work. While in terms of objective working conditions (e.g. income, legal contract, security, duties), the informal side of work may not earn much respect, it does reflect values that are shared, at least on the declarative level, by a significant part of society – altruism and empathy. Therefore the prestige of an elderly-care assistant is low in the sense of *formal work*, but it is much higher as *informal work*.

In the interviews the elderly-care assistants underscore the autotelic value of their work: the significance of doing what they want, and especially, of helping others. A high quality of work (especially when based on self-imposed standards), as well as being humble even when one is admired, is also mentioned as important.

(about compliments)...well yes, there are those kind of words. But for me, well it's okay, because it's nice sometimes, but one shouldn't get into self-praise, because it's not [the main thing]... You should just do the best you can. (M58) [2]

Interviewees are quite ambiguous about the prestige level of their own positions. While feeling proud and satisfied, they assume that, for the majority of society, their work is not considered prestigious (which can be regarded as example of the pluralistic ignorance syndrome). There appear two types of attitudes on the part of other people towards care work, which can be thought of as a dual understanding of *formal work prestige* and *informal work prestige*. Those who value the first will appreciate hard, monotonous and low-paid work. However, other people may esteem higher the moral value of this work and correspondingly show their respect for elderly-care assistants.

I've heard a lot of good words about it [my work], that someone can still achieve something like that. (...) because I wasn't one of the nicest people and that's why they saw it that way (...) And for that they kind of admire me. (M58) [3]

To be honest I also had girlfriends who used to laugh, 'oh, you're working with [old] grannies'. But I think this is just because of [their] lack of knowledge. (M26) [4]

[work as elderly-care assistant] is respected by people, say, over 35 years old, it's respected. But by those between 18 and 29 not so much (...) maybe because they don't have experience themselves. For example, [if] their grandmother or grandfather died early, or they didn't have grandparents at all. Because those who did, see it another way. (M34) [5]

Also relations with the care-receivers and their families can be both rewarding and difficult. Some family members have a lot of respect for the elderly-care assistant and value

their work, admitting that it would be emotionally too difficult and physically hard for them to do themselves. Their gratitude is therefore a kind of non-monetary reward and can express itself in more or less symbolic gestures that transform the relation from one of “client and service provider” to that of friends.

Well, her daughter also respected me and everything... later, when she [the mother] died, she let me live there over a month because I'd cared so well [for her mother] and because I'd shown the daughter how to care for her mother. (W35) [6]

By contrast, others are ungrateful and demanding, sometimes confusing the elderly-care assistant with a housekeeper or medical personnel, in the latter case perhaps meaning the attribution of higher prestige, but also expectations on the assistant that may be impossible to meet. The behaviour of the care-receivers may be even more extreme, especially in the case of those with cognitive problems. While it is obvious that some of them cannot be blamed because of their physical and mental condition, in other cases this can be seen as a negative consequence of formalising care.

And sometimes [they're] ungrateful, because old people are various, they may have problems with memory, they can blame you for something or throw you out of the house, and other situations, so it really takes patience. (W35) [7]

Another important issue appearing in the interviews is the meaning of occupation for the individual's self-concept. Interviewees describe their work as fulfilling in a moral sense, and a concept of *having a clear conscience* appears in some of the conversations. Care work is also generally seen as having a positive influence on self-confidence.

Well, yes, I'm a modest person, but I do think that what we do is very noble. (M26) [8]

They are also aware of the competences they have. In some narrations appear comparisons with other elderly-care assistants who do not have the right attitude and are therefore not able to build a relation with particularly difficult care-receivers. Interestingly, not much is said concerning formal qualifications, although some interviewees have them.

I think that, in some way, one should understand people, and a bit of psychology, because it's [in] our mind how we approach a person, especially somebody (...) living in their own world. This too is very important. Well, I was very proud that [when] no one was able to do this, and I was; yes, that's just what I mean. (W35) [9]

In all interviews the unique character of care work is highlighted, with elderly-care assistants expressing that the work should not be considered “just another job”. This may also relate to the fact that elderly care in Poland is only just starting to undergo a process of professionalisation.

How is this different from professional work? Perhaps, professionally, you don't get so involved emotionally. In professional work you're not so concerned about everything. (W35) [10]

It turns out that some interviewees also have experience with voluntary care work or caring for elderly relatives. One “District Welfare Home” (public care facility) worker even compares his occupation to voluntary work because of the need for internal motivation. The fact that care is perceived as a universal concept, no matter if paid or not, makes the boundary between formal and informal care work even more blurred.

Well, ... you could also call this senior care 'volunteer' work. Well, I won't deny it, it's very hard work, and takes a lot of patience. And in my opinion, in centres like ours [Senior's Community Centre, part of District Welfare Home], work [only] people who [really] want to work with seniors. (M26) [11]

Has it [work of elderly-care assistant] changed anything? No, it hasn't, because earlier I helped my grandmother – she was very ill. (M34) [12]

Interviewees also think that, though courses for elderly-care assistants may be useful, the most important elements of their work cannot be learned in formal education. Fundamental qualifications are hard to define, since they include interpersonal skills and personality. Sincerity is extremely important in relations with the elderly and ill, who, even if they are losing some of their mental capacities, are able to recognise the real attitudes of their carers.

It's hard to say, because actually, one person has it [sincerity], and another doesn't. (M58) [13]

The sick person knows right away if someone near them really wants to help, or wants just to get the work done – they'll know. (M58) [14]

They also underscore the negative effect of institutionalisation and formalisation of care, especially in the public sector, where the pay is very low. Interesting again is the focus on the interpersonal components of care. Due to the shortage of staff, even with very good infrastructural standards, patients' emotional needs are not met.

I was several times in a welfare home... it's very sad that, when I used to arrive everyone there would grab my hands, they're so needy... they may have very good conditions – it's very clean, they get everything – but they don't get the warmth [they need], isn't that it? (W35) [15]

However, other interviewees also see a positive aspect in formal, institutional care, and highlight personnel's efforts to maintain a high level of care and teamwork. They consider themselves part of an institution and are proud of that. Moreover, they feel that they should represent their place of employment also in their everyday private life.

Yes, in my private life I still have to decently represent our Centre. So any kind of behaviour that might be seen as deviant are out of discussion. (M26) [16]

Interviewees see both the emotional costs and rewards involved with the work of elderly-care assistant. Among the most important costs are stress connected with patients' and their families' behaviour, and a feeling of impotence when they are not able to help others in their pain. Of course the most difficult situation is the death of the care-recipient. After that kind of experience some carers may come to the conclusion that they should avoid too-strong emotional attachments.

This person was barely older than me, she had cancer, her name was Ela. We became very close friends and that was a mistake. (W55) [17]

Emotional rewards that elderly-care assistants gain from their work are positive changes in their own characters, and a deeper understanding of human nature. They feel they are attaining such personality traits as patience and honesty, and are generally growing into better people. It can be said therefore that many of them perceive their work as a path to personal development.

For me, this is a kind of learning how to be human, growing to humanity and learning from these patients. When I'm helping them in some way, (...) I also learn a lot from them. (...) while working in a hospice I faced death every day, had various experiences with that and learned a lot, and I felt less that I was giving to them, than that they were giving to me. (M58) [18]

...well, as I say, through this work I completely changed my attitude toward the elderly. It's not that I used to have such a bad opinion of them, only, not having worked in such a centre, through lack of knowledge you can still offend somebody. (M26) [19]

I guess that I am learning humility and patience. And ... that we won't be forever young, that one should respect old age, because no one knows what awaits us later.
(W35) [20]

All respondents (both men and women) see care as feminine work. They notice that for some tasks (for example with bedridden patients) men's physical strength may be required, but still think that women have more of the characteristics important in care work e.g. patience or interpersonal skills.

Maybe men are a bit shy, ...more introverted. (...) ...it's just that women are naturally caring. It's the woman who gives birth to a child, she is already naturally so caring, and yes, so understanding, and men would rather just look for some other occupation. (M26) [21]

It's always a woman who has more warmth than men and can give it to others.
(M58) [22]

5. Conclusion

The results of both my quantitative and qualitative research show that care work (analysed on the example of elderly-care assistants) has a unique status. The opinions of members of a high-prestige group (students at the Main School of Fire Service) indicate that the prestige of the care assistant occupation can have a functional basis, similarly to that of firefighters and professors. All three are characterised by a high level of functional necessity and relatively rare competences are required. In the case of care work, these competences have, of course, a specific character, which is strongly underscored in the interviews.

The interviewees see prestige as a dual concept, consisting of two sets of meanings, the first refers to the formal conditions of work, and the second, to its informal, relational and ethical meaning. In the case of their own work they see therefore ambiguity, but personally concentrate on the value of this work and the satisfaction derived from helping others. This pattern is similar to the (opposed i.a. by Zelizer) *hostile words* view, and may be responsible for elderly-care assistants' accepting bad conditions of work (as well as low *formal work prestige*). They are aware of the emotional costs as well as practical difficulties connected with their work, but also think of it as a path to personal, moral development. The thread of a unique character of care work is clearly visible in all the interviews.

Certainly, the results of my research must be treated only as initial findings. In order to deepen them and make possible a theoretical discussion, further research should be conducted, preferably on a larger sample including elderly-care assistants with differing occupational biographies and experiences (for example care-work immigrants in Western Europe, or volunteers). It may also prove interesting to compare the experiences and opinions of elderly-care assistants with other care professions such as disabled-person assistants or childminders.

Bibliography

- Abel E., Nelson M. (1990), *Circles of care. Work and identity in women's life.*, State University of New York, Albany
- Cancian F., Oliner S. (2000) *Caring and gender*, AltaMira Press, Thousand Oaks
- Daly M. (2001) *Care policies in Western Europe* in Daly M., *Care work. The quest for security*, International Labour Office, Geneva
- Davies K., Moore W (1944), *Some principles of social stratification*, American Sociological Review, Vol. 10, No. 2, 1944 Annual Meeting Papers
- Domański H. (2012) *Prestiż*, UMK, Toruń
- Domański H. (1991) *Wzory prestiżu a struktura społeczna*, Ossolineum, Wrocław
- Domański H., Sawiński Z., Słomczyński K. (2007) *Nowa klasyfikacja i skale zawodów*, IFiS PAN, Warszawa
- Domański H., Sawiński Z., Słomczyński K. (2010) *Prestiż zawodów w obliczu zmian społecznych: 1958-2008*, *Studia Socjologiczne*, no. 4 (199): 79-119
- England P. (2005) *Emerging theory of care work* in *Annual Review of Sociology*, Vol. 3: 381-399
- Folbre N. *Praca opiekuńcza* - transcription of interview conducted by O. Ressler, online access 03.09.2015 <http://eicp.net/transversal/0805/folbre/po>
- Glucksmann M. (2005) *Shifting boundaries and interconnections: Extending the 'total social organisation of labour'* (in:) *The Sociological Review Special Issue: Sociological Review Monograph Series: A New Sociology of Work?*, edited by Lynne Pettinger, Jane Perry, Rebecca Taylor and Miriam Glucksmann Volume 53, Issue Supplement s2 December: 19-36,
- Hochschild A. (2003) *The manager heart. Commercialization of human feeling*, University of California Press, Berkley and Los Angeles, California
- Maletud K. (2012) *Systematic text condensation: A strategy for qualitative analysis*, *Scandinavian Journal of Public Health*; 40: 795-805
- Lopez S.H. (2006) *Emotional Labor and Organized Emotional Care. Conceptualizing Nursing Home Care Work*, *Work and Occupations*, Volume 33 Number 2, May: 133-160
- Lyon D., Glucksmann M. (2008) *Comparative Configurations of Care Work across Europe*, *Sociology*, Volume 42(1): 101-118
- Standing G. (2001) *Introduction* in Daly M. (ed.), *Care work. The quest for security*, International Labour Office, Geneva
- Weber M. (1975) *Klasy, stany, partie* in Derczyński W., Jasińska-Kania J., Sztompka P. (ed.), *Elementy teorii socjologicznych*, PWN, Warszawa
- Zelizer V. (2010) *Economic Lives: How Culture Shapes the Economy*, Princeton University Press, Princeton
- OECD Glossary of Statistical terms – on-line access 12.09.2015: <https://stats.oecd.org/glossary/detail.asp?ID=1350>
- The General Conference of the International Labour Organization *Resolution concerning decent work and the informal economy*, 90th Session, 2002
- CBOS, BS/164/2013. *Prestiż zawodów*, Warszawa, listopad 2013.