

Margarethe Kusenbach

**Catherine Theodosius, Emotional Labour in Health Care: The Unmanaged Heart of Nursing. London and New York: Routledge, 2008, 232 pp.**

(doi: 10.2383/32071)

Sociologica (ISSN 1971-8853)

Fascicolo 1, gennaio-aprile 2010

**Ente di afferenza:**

()

Copyright © by Società editrice il Mulino, Bologna. Tutti i diritti sono riservati.

Per altre informazioni si veda <https://www.rivisteweb.it>

**Licenza d'uso**

Questo articolo è reso disponibile con licenza CC BY NC ND. Per altre informazioni si veda <https://www.rivisteweb.it/>

**Catherine Theodosius, *Emotional Labour in Health Care: The Unmanaged Heart of Nursing*. London and New York: Routledge, 2008, 232 pp.**

doi: 10.2383/32071

“As long as the patients are washed and they are in clean beds, that is all that matters now. They can be having the most difficult time of their life, thinking about what the doctors have told them without any nurses going to see how they feel, if they have any questions. That is not nursing care, that is total crap” [p. 12]. The quote illustrates a frustration with today’s priorities and practices in patient care that is widespread among the nurses in the interesting study by British scholar Katherine Theodosius. The nurse cited here bemoans the loss of what Theodosius calls “therapeutic emotional labour,” meaning the work nurses do to create emotional well-being in their patients as an end in itself. This type of patient outcome has been overshadowed by an endless array of technical nursing tasks, meaning work that might also require emotional labour yet only as a means to a different end. Theodosius therefore describes and investigates this second effort as “instrumental emotional labour.” The distinction between these two types and functions of emotional labour is one of the most notable outcomes of her study. In what follows, I further summarize and comment on the monograph (somewhat mysteriously) titled *Emotional Labour in Health Care: The Unmanaged Heart of Nursing* by Katherine Theodosius.

*Emotional Labour in Health Care* is a volume in an international series that is called “Critical Studies in Health and Society” and edited by Simon J. Williams and Gillian Bedelow. Following a brief introduction, the book is divided into two parts that consists of five chapters each. The first part is theoretical in nature; its goals are to critically review Hochschild’s classic theory of emotion work (chapters 1 through 4), and to merge it with contemporary ideas by Margaret Archer in order to better fit the case of nursing (chapter 5). The author generally advocates the need for a more complex theory of emotion as a prerequisite to understanding emotional labour in professional contexts. Theodosius emphasizes the “bio-psychological” (in addition to social) aspects of emotion and she develops a closer link between emotion and identity. She also makes a case for emotion as a genuinely interactive practice.

Theodosius utilizes lengthy data excerpts and commentaries from her research to illustrate the theoretical concepts and ideas reviewed in the first part of her book. In fact, each of the book’s ten chapters is prefaced by a shaded box that contains a long data excerpt – most are continuous sections from interviews or audio diaries yet a few are composites of selected passages. While this is an innovative strategy that allows the author to showcase more data in her book, it also inflates the theoretical part (unnecessarily, in my view), thus taking away space that might have been used for a more grounded interpretation of some of these examples in the actual analysis.

The second, empirical part of the book also consists of five chapters yet only the middle three are entirely analytic. Chapter six largely functions as a methods chapter. In it, Theodosius discusses the physical and social features of the fascinating setting – a 34-bed vascular and surgical ward in a large hospital in England – and the strategies of collecting and analyzing the predominantly narrative data. While working in her fieldsite

as a nurse for over fourteen months, Theodosius recorded her own experiences in a “participant observation diary.” Additionally, she enlisted fifteen nurses to record audio diaries over several weeks and later interviewed all participants separately.

Chapters seven, eight and nine are the heart of the book. The main analytic themes and findings of each are nicely summarized in tables on pages 147, 163, and 182. Each table differentiates the overall purpose, occurring emotions, utilized skills, and related feeling rules of one type of emotional labour: therapeutic emotional labour in chapter seven, instrumental emotional labour in chapter eight, and collegial emotional labour – referring to the management of nurses’ relationships with colleagues, doctors, technicians, students, and other professionals – in chapter nine. As indicated above, I wish Theodosius would have devoted more time to illustrating and developing each field in the three tables. Readers would benefit from a step-by-step analysis of her data before being asked to enter into dialogue with other thinkers in each of these chapters. All examples in the core part of the book are drawn from only three of the fifteen participating nurses. I believe that a greater variety of empirical evidence in support of the developed models could have helped reduce the gap between data passages on the one hand and conceptual claims on the other. The book’s original analysis is wrapped up in a complex flowchart [p. 196] that summarizes the social factors and processes of each dimension of emotional labour. The conclusion in chapter ten contains a summary, more commentary on Hochschild’s theory, and a scant two pages on policy implications and application of the presented research. Surely, in a series aiming to appeal to “professionals, practitioners and policy makers” in addition to researchers, the author would have done well to say a bit more in this regard.

A unique feature of the book lies in its nineteen black and white cartoons and comics strips that illustrate various dilemmas and scenarios in nursing. The whimsical, amateur-style drawings are loosely related to themes discussed in the book. Drawings, shaded excerpts, boxed commentaries, tables, and figures do a good job at breaking up the, at times, dense prose and the relatively compact formatting of the book. Overall, *Emotional Labour in Health Care* is a fine and nuanced treatment of some emotional dilemmas and practices in hospital-based nursing. Aside from greater knowledge and understanding, Theodosius’ study is likely to increase sympathy and respect for nurses among both outsiders and insiders to this type of work.

I would like to conclude the review by raising two more general, critical points. First, despite promises to the contrary, the author does not open a live window onto the “lived experience” [p. 6] of nursing. “The aim of the empirical data collection (...) was to experience and capture the emotions and emotional labor carried out by the qualified nursing staff as they naturally occurred within the nursing context” [p. 6, emphasis added]. While there can be no doubt that Theodosius, as a long-term worker and colleague, experienced emotions and emotional labour of nurses first hand, she does not capture them in their natural contexts – at least not in the narrative data presented in her book. Data excerpts are overwhelmingly based on either interviews or audio diaries that were both produced away from the workplace. All data, therefore, are purposefully created and narrative, meaning they are stories told specifically to the researcher, filtered through post-hoc recollection and reflection. The methods of the study thus did not allow for the capturing of emotions in situ – i.e., within the exceedingly messy and ur-

gent interpersonal, embodied, practical, technical, and otherwise complicated contexts in which they pop up and change from one moment to the next. Despite Theodosius' deep immersion as a participating observer, her book is an interview-and-diary study rather than an ethnography built on situated fieldnotes. While the author repeatedly tells us that emotion and emotional labour are essentially interactive, evidence of how they are actually accomplished in concert with other people is conspicuously missing from the book. Consequently, Theodosius' conclusion that all emotion management is necessarily "reflexive" [chapter 10] appears to be more of a function of her data collection and analytic strategies than a genuine facet of what people do when dealing with their own and other people's feelings.

My second general criticism aims at the author's treatment of the work of others in her area. The book glosses over an important body of work – the sociological literature on emotions in the workplace beyond the world of nursing. As one would expect from a good dissertation, Theodosius' book earnestly and critically engages Hochschild's theory, as well as other general thought, on emotion in the quite extensive theoretical section of her book. However, the author overlooks the bulk of the research that has been done in the US and in other countries on emotions at work as an application and development of Hochschild's groundbreaking ideas. More concerning than a scarcity of references is a lacking consideration of the many new issues and concepts brought forth in this literature. For instance, discussions of emotional labour as positive identity work, structural contexts of power and inequality, many kinds of emotion management strategies, and the concept "managing the emotions of others" represent ideas that Theodosius could have used to take her own analysis of emotional labour in nursing to the next level. I believe that the author's interesting distinction of three types of emotional labour would be greatly enhanced by a more comparative framing. After all, instrumental and collegial emotional labour, as ingredients of virtually all interactive work settings, have been studied and described extensively before; and even therapeutic emotional labour has been found to exist outside of the health professions (for instance, in certain education, counseling, and service professions). In short, a productive review of the larger field would have befitted a book that aims to broaden our general understanding of emotion and emotional labour. This missed opportunity is clearly one of the book's weaknesses as a monograph.

In conclusion, Theodosius' empathetic study is of interest to both sociologists of emotions and sociologists of work, and especially to those working at the intersection of these fields. It will also appeal to nursing and health care scholars with a special interest in theory. The book appears less suited for undergraduate and professional audiences due to the theory-heavy first half and a largely missing discussion of practical implications. However, sociology and nursing graduate students will likely enjoy, and benefit from, reading *Emotional Labour in Health Care* as an in-depth study of emotion management in the health professions.

Margarethe Kusenbach  
University of South Florida