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ABSTRACT

This study explores contrary predictions of workers' dispute resolution strategies by examining three different types of homecare businesses: a conventional, hierarchical business that is run for profit; a hierarchically organized charity; and a worker-owned, worker-managed co-operative. Some literature asserts that the structure of the organization will impact how workers address their workplace disputes. However, other literature argues the structure and culture of the industry will have greater influence than organization on workplace dispute resolution. The data in this study imply that the industry effects had the greater impact in the homecare industry. Members of the worker co-operative did not exhibit different dispute resolution behaviors; workers at all three businesses described similar dispute resolution strategies. The triadic structure of the homecare industry (i.e., employee-patient-manager), the clients' physical dependency on service, and the intense loyalty of workers for the clients obviated the need for many formal grievance strategies. In addition, the supportive managerial culture of the industry facilitated easy informal dispute resolution, resulting in workers at the co-operative, private hierarchy, and charity all favoring informal resolution over formal grievances, exiting, or toleration. These findings highlight the importance of including industry effects in employee dispute resolution research.

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INTRODUCTION

This article explores how the structure and culture of the homecare industry affects

workplace dispute resolution behavior. In contrast to the predictions of some scholars that

businesses organized as worker-owned would have substantially different dispute resolution

behavior than conventional businesses, workers in all three businesses (conventional, charity, co-

operative) reported similar dispute resolution strategies. Rather than tolerating problems, raising

formal grievances, or exiting to avoid disputes – as do workers in other industries – the

homecare workers resolved their disputes informally. This specific behavior might be these

homecare workers' main dispute resolution strategy because homecare involves caring for

vulnerable clients who would be negatively affected by some disputing strategies – particularly

exiting and formal grievances. Managers and employees both worked to avoid these disruptions,

thereby limiting the dispute resolution options available to workers. Additionally, the culture of

the industry allows for sufficiently successful informal dispute resolution so that quiet toleration

of disputes is not necessary, leaving informal dispute resolution as an appealing and accessible

option for homecare workers, regardless of the structure of their employers' particular

businesses.

THEORETICAL CONTEXT AND PREVIOUS RESEARCH

Scant research has investigated the effect of the structure of the organization and the industry on how workplace disputes are addressed. However, both of these factors could be important considerations. Some literature suggests that flattening organizational hierarchy will change how employees resolve their workplace disputes. Other literature rejects this possibility, implying that flattening the organizational hierarchy is not sufficient to alter fundamental dynamics of dispute resolution. Finally, other literature emphasizes the importance of the industry structure and culture in creating dispute resolution norms that are unique to the particular industry.

The Importance of Organizational Structure

Hierarchical Organizations Some scholars assert that the structure of the organization, more so than qualities inherent within individuals, promotes workplace activism (Pateman 1970). Pateman argues that workers in oligarchic organizations will be apathetic and passive, while workers in organizations which foster participation will respond with greater activism. Pateman maintains that people have a natural desire to control their own destiny, and, therefore, naturally prefer activism over passivity (see also Hodson 2001). People lack activism in oligarchic settings when they have not learned the necessary skills through prior participation in democratic organizations. She argues that, despite workers' natural tendency toward activism, without the necessary skills of democratic participation, they will not demand participation (Pateman 1970).

Research on conventional, hierarchical organizations has found that aspects inherent in the organizational structure can severely limit employees' attempts to raise concerns (see e.g., Edelman, Uggen, and Erlanger 1999; Felstiner, Abel, and Sarat 1980-81; Grillo 1991; Hirschman

1970; Hodson and Sullivan 2002; Hoffmann 2003; Miller and Sarat 1981; Morrill 1995; Silbey and Sarat 1989). For example, employees might hesitate to raise formal grievances because they fear that the struggle is "unwinnable" against the "tyrannical power" of managers (e.g., Bumiller 1988), are intimidated by managers or other powerful parties when raising the dispute as a grievance (Grillo 1991), contend with morale- and confidence-deflating managers (Hodson 2001), face a more strategically savvy managerial opponent (Galanter 1974), doubt the effectiveness of raising grievances (Hirschman 1970), or need to convince unsympathetic formal grievance gate keepers (e.g., Gwartney-Gibbs and Lach 1994b).

These factors might be particularly true for women workers (Bumiller 1988; Calhoun and Smith 1999; Grillo 1991; Gwartney-Gibbs and Lach 1994a). Additionally, by symbolizing legality, the employer's dispute resolution processes provide legitimacy to the employer and her/his practices and diminishes the strength of employees' rights and concerns; this increases workers' difficulties in internal dispute resolution because the workplace's dispute process reaffirms management's position as unquestionably correct (Edelman, Uggen, and Erlanger 1999).

Worker Co-operatives However, proponents of co-operatives would claim that such difficulties may be eliminated or reduced in a different type of organization: where the structure of the organization is flattened and workers enjoy greater equality. Worker co-operatives are businesses with flattened hierarchies in which all employees are owners and all owners are employees; and in which the employees, themselves, serve as worker-managers to run the business. In addition to these structural differences, worker co-operatives usually adhere to an egalitarian ideology that all members of the co-operative are equal (Cornforth, Thomas, Lewis, and Spear 1988; Linehan and Tucker 1983). A worker co-operative is wholly owned by its

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workers, without outside stock holders, in contrast to more mainstream uses of the co-operative concept, such as employee stock option plans (ESOPs) and employee management programs.

One way the flattened structure of a co-operative workplace could change workplace dispute resolution is if workers and worker-managers both perceive themselves as "on the same side," working toward the same goals, and engaging in interest-based bargaining. Indeed, some researchers emphasize that interest-based bargaining, sometimes referred to as co-operative interdependence, rather than rights-focused bargaining, significantly increases successful dispute resolution (Brett & Goldberg, 1983 in Tjosvold, Morishima, and Belsheim 1999).

For example, Tjosvold et al. (1999) identified three types of goal interdependencies: co-operation, when people believe their goals are positively linked; competition, when people believe that goal attainment by others diminishes the likelihood of their own goal attainment; and independence, when people believe that their goals are unrelated (Tjosvold, Morishima, and Belsheim 1999). Co-operative goals – in contrast to competitive and independent goals – promote open-minded discussions of disputes that result in resolutions that are mutually beneficial to both supervisors and employees, while workers in competitive interdependence were "closed-mouthed, inefficient, dismissed new ideas, and developed solutions that worked against employee interests" (Tjosvold, Morishima, and Belsheim 1999: 59). The co-operative supervisors and employees were often willing to compromise, assist each other, and work for a successful resolution to problems.

Although previous scholarship on co-operatives literature (e.g., Cornforth, Thomas, Lewis, and Spear 1988; Honigsberg, Kamoroff, and Beatty 1982; Linehan and Tucker 1983; Mackin 1997; Rothschild and Whitt 1986; Thornley 1981; Tucker 1999) does not address dispute resolution strategies specifically, some inferences can be made. This literature suggests

that workers and managers in co-operatives might be more likely to share similar goals and enjoy cooperative interdependence. In contrast, employees and managers in more conventional, hierarchical settings might be more likely to be in competition with, or independent from one another, having antagonistic or indifferent relationships with their co-workers. Additionally, because each co-op worker is also an owner, each should be empowered to assert her/his needs, feelings, and frustrations without experiencing many of the barriers that would-be disputants experience in conventional, hierarchical organizations (see Bumiller 1988; Galanter 1974; Grillo 1991; Gwartney-Gibbs and Lach 1994a; Hirschman 1970; Hodson 2001; Pateman 1970). In addition, the constraints of gender norms that affect grievance resolution (see Blumenthal 1998; Hoffmann 2005; Oerton 1996; Welsh 1999) should be eliminated or reduced, since co-operatives, acting on their egalitarian ideals, make efforts to assist members to move outside of societally prescribed gender roles (Cornforth, Thomas, Lewis, and Spear 1988).

On the other hand, merely changing the employment situation to a worker co-operative might not substantially improve workplace dispute resolution. One could infer from some scholarship (e.g., Lipset, Trow, and Coleman 1956; Michels 1962; Weber 1946) that worker cooperatives, if they succeed as viable businesses, will fail as substantially different alternatives from conventional businesses and so will demonstrate little difference in dispute resolution strategies.

Furthermore, worker co-operatives could even exacerbate workers' inability to address disputes. For example, if workers perceive the needs of the co-operative as being more important or more valid than their individual needs, they may hesitate to raise problems and bring grievances forward. Some literature on co-operatives (although not on dispute resolution specifically) suggests that the collective-focused ideology could dissuade co-operative members

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from asserting their own rights and concerns, sublimating them to a perceived collective or organizational good (Kleinman 1996; Rothschild and Whitt 1986; Tucker 1999).

Moreover, Bumiller's work on grievances in hierarchical organizations further supports this as a potential hurdle for dispute resolution in worker co-operatives. She found that workers who did not raise formal grievances, despite having official rights to support their positions, often held the belief that the authority responsible for the unjust action was benevolent and would not deliberately harm them (1988).

Such beliefs may be even more pronounced in co-operative workplaces where collective-oriented workers might be hesitant to perceive other members of the co-operative or the co-operative itself as responsible for unfair treatment or unjust situations. However, by assuming this type of paternalism, a would-be grievant may fall into an acceptance of unfair actions and conditions, perhaps to an even greater extent than in the conventional organizations, even more severely inhibiting their ability to assert their needs and rights at each stage of the grievance process (Bumiller 1988; Felstiner, Abel, and Sarat 1980-81).

The Importance of Industry

Other studies suggest that the particular industry might affect what dispute resolution strategies employees use (Davis 1959; Dennis, Henriques, and Slaughter 1956; Gutek and Morasch 1982; Reskin, McBrier, and Kmec 1999; Swerdlow 1989; Toiskallio 1941). For example, Swerdlow's (1989) work on women rapid transit workers examines an industry with somewhat unique disputes. The transit industry she studied employed few women, so the women transit workers struggled to make places for themselves in this predominantly male industry. Swerdlow's findings suggest that industry, or at least industry composition, could affect the type

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of disputes that different categories of workers encounter as well as what sort of strategies these workers might rely on to resolve them.

Davis's (1959) and Toiskallio's (1941) studies of the taxicab industry discuss how the physical proximity and psychological nearness of the taxicab driver to the customer often makes "the urban taxicab a site of conflict" (Toiskallio 1941: 100). This research argues that the cab itself creates industry-unique conflicts over such issues as physical space and atmosphere within the cab. These scholars imply that other industries that do not involve the unique one-on-one, semi-intimate, "captured" nature of the relationship between the taxicab driver and the customer will not encounter similar workplace disputes.

The research by Kahn (1993) and by Marshall, Barnett, Baruch, and Pleck (1991) on the homecare industry describes great stress involved in homecare work. Many homecare clients are sick, disabled, or so elderly that they require assistance in day-to-day living. The emotional labor involved in this industry makes homecare work particularly difficult for some people and could affect the types of disputes that workers experience.

The work of Reskin et al. (1999) has documented how industry-specific factors such as the composition of the qualified labor pool and the qualifications for the jobs available in various industries affect the race and gender composition of organizations within those industries (Reskin, McBrier, and Kmec 1999). Similarly, Gutek and Morasch's research shows how the ratios of women-to-men found in different industries affects the pervasiveness and forms of sexual harassment in the workplace (Gutek and Morasch 1982).

SAMPLING AND METHODS

Sample

Homecare work refers to assistance in one's home provided by non-medical staff. Homecare workers usually work with people who have physical and/or mental disabilities. These workers do not administer medicines or do any other sort of nursing, but, instead, help people do what these clients would otherwise do themselves. The services include giving sponge and full baths, cooking meals, cleaning, dressing, getting the person out of bed, assisting in toilet usage and continence, shopping, and taking the person for walks. All three businesses had some clients who paid for their own care and others for whom a third party (such as the government or insurance) paid.

Sometimes homecare workers went individually to clients' homes. Other times, they worked in pairs. Homecare was often done in pairs when the clients required difficult physical assistance, such as lifting the client.

In between visits, as well as at the beginning and end of their work days, homecare workers often spent time at the main offices of their agencies. Some workers kept personal items at the office that they wanted access to during the day, but that they did not wish to take with them to client visits. Others simply wanted a place to pass the time when they did not need to be at a client's home. Others would come to the office to check on their schedule or speak with a manager and then stay awhile to socialize. During these periods of time, workers would spend time with their co-workers in the common break rooms and other areas of the offices.

In order to compare the effect of different organizational structures, I studied three different types of homecare agencies: (1) Private Homecare, which was owned by two women and run for profit, (2) Charity Homecare, which was run as a local charity, not-for-profit, and (3)

Cooperative Homecare, which was collectively run and owned as a worker cooperative for profit. All of the homecare businesses employed mostly women: Private Homecare: 91%, Charity Homecare: 90%, Cooperative Homecare: 82%. Although these businesses were not all located in the same cities, their cities were quite similar: somewhat small (approximately 300,000 population) with a diminished manufacturing economy and significant unemployment (Church 1996).

The size of each homecare business in this study was relatively small. Private Homecare employed 44 workers while Charity Homecare was somewhat larger with 51 workers. The size of Cooperative Homecare was between these two with 45 workers.

The pay scale at each of these businesses was modest, although not unusually low in relation to pay scales for other similar work in the same towns (Church 1996). The hourly wage at the time of this study was approximately $6.50 at Private Homecare. Employees at Charity Homecare earned slightly more: about $7.00 per hour. Workers at Cooperative Homecare also earned $6.50 per hour. However, in addition to wages, each Cooperative Homecare worker earned one share of the business (after six months of employment) which entitled the worker to a vote.

– Table 1 About Here –

I conducted 49 interviews: 14 at Private Homecare, 10 at Charity Homecare, and 25 at Cooperative Homecare. The confidential identification number for each interviewee is shown in parentheses after each quote. I did not identify a specific group of workers whom I knew to have had "disputes" but spoke to all interviewees about their workplace experiences generally. I included a wide variety of interviewees to maximize the range of problems and experiences as

well as the variety of solutions and expectations to be included in this study. My sample includes present and former employees as well as managers and worker-managers. Interviewees also differed in terms of length of employment, sex, race, age, level of education, and socioeconomic status. Through careful sampling and the repetition of responses I encountered as interviewees spoke of similar themes, I have become confident that my findings are well triangulated and valid. Although these interviewees were not statistically representative of all the workers at their individual organizations, the diversity of this sample is helpful in developing conceptual models.

Methods

One of the key benefits of qualitative studies is the high validity possible: the researcher can understand the greater context, obtain a large overview, and can triangulate the accounts of differently situated interviewees with various bases of knowledge. In gathering data for this study, I interviewed workers, observed behavior, read related documents and articles, attended companies' business meetings and dispute hearings, and participated in aspects of some businesses.

All interviews were conducted in person, using a set of open-ended questions as initial probes on a wide variety of work-related topics. The main focus of the interviews was how the interviewee would handle potentially grievable circumstances. Some subjects drew on past actions, while others only spoke of anticipated future actions. Thus, the discussion of various dispute resolution strategies refers to both anticipated future behavior or reported past behavior.

Most of the interviews were conducted in public places or in private spaces at the companies themselves. Most interviews lasted between thirty and ninety minutes. All interviews and most site observations were tape-recorded and transcribed, so all quotes used here are direct

quotes. These data, interview transcripts and field notes, were analyzed with the aid of the qualitative data software NVivo. Generally, I approached interviewees myself, rather than requesting volunteers to come forward. Since a significant focus of this study is the raising of grievances, interviewing only those inclined to step forward could create an unrepresentative sample of perspectives on dispute resolution behavior. The assertiveness and extroversion necessary to volunteer to be interviewed by a stranger may be correlated with both attitudes on raising grievances and ability to resolve disputes. I arranged certain interviews in advance with key people and workers from underrepresented groups within the organization whom I wanted to be certain to include.

FINDINGS AND DISCUSSION: DISPUTE RESOLUTION STRATEGIES

Dispute resolution behavior includes four distinct strategies: formal processes, informal processes, toleration, and exit. Formal disputes are any disputes resolved through official action, such as raising a complaint through a company's grievance procedures. Informal disputes can be similar types of disputes, but are resolved through negotiation rather than a formal procedure. Toleration is taking no action to resolve problems, but instead developing coping skills or greater tolerance of the problems. Exit refers to leaving the job as a way to solve the workplace problem. In this study, exit refers specifically to quitting one's job as a dispute resolution behavior – not merely leaving for reasons unrelated to workplace disputes.

Although toleration and exit are not means for *resolving* disputes, they are, nevertheless, options for handling disputes. When workers faced workplace problems but could not or would not try to resolve them, formally or informally, they would either learn coping skills and allow the problems to continue (toleration), or would quit and leave the problem, as well as the job,

behind them (exit). Thus, when considering how a worker might approach a workplace problem, one must think beyond simply "formal" or "informal" means, and recognize all four possible strategies they could employ.

– Table 2 About Here –

Industry Structure and Culture Effects: the Homecare Industry

Rather than evidencing strong organizational effects, as suggested by some of the worker co-operative literature, data from the homecare businesses imply that industry effects might have greater influence on workers' dispute resolution strategies. Even though the three homecare businesses had different organizational structures (a worker co-operative, a hierarchically organized not-for-profit charity, and a hierarchically organized for-profit private business), their workers all described very similar dispute resolution strategies.

Instead of raising formal grievances, developing toleration skills to cope with problems, and exiting to avoid disputes – as earlier scholarship documents is typical of workers in other industries – the homecare workers resolved their disputes mainly through *informal* means. The data suggest that this dispute resolution pattern results from the structure and culture of the homecare industry, rather than the different organizational structures. Because homecare involves caring for vulnerable clients who would be negatively affected by some disputing strategies – particularly exiting and formal grievances – managers and employees both worked to avoid these disruptions, thus limiting the availability of formal dispute resolution by the workers. Moreover, the culture of the industry allowed for sufficiently successful informal dispute resolution that toleration strategies are not necessary.

This use of informal resolution, with little reliance on toleration, exiting, or formal grievances, is quite unique. Other scholars have found that workers usually employ a variety of

dispute-resolution strategies (e.g., Dennis, Henriques, and Slaughter 1956; Galanter 1974; Gwartney-Gibbs and Lach 1994b; Hoffmann 2003; Hoffmann 2006; Miller and Sarat 1981; Tjosvold, Morishima, and Belsheim 1999). Even businesses and industries where *formal* grievances are rare, employees will still rely on toleration techniques and quitting – often in addition to informal dispute resolution – to address their workplace problems (e.g., Felstiner, Abel, and Sarat 1980-81; Gwartney-Gibbs and Lach 1992; Hoffmann 2005).

Informal Disputes In the homecare industry, workers in the three different types of homecare businesses preferred to resolve disputes informally rather than through formal grievance procedures, as Table 2 shows. Their statements were remarkably similar.

As did many workers at all three businesses, the following woman from Co-operative Homecare explained that she resolved problems at work informally:

> We can all talk. If there's a problem, it's not like they're the big managers over there and you're just nobody. We can all work things out. You just say what's going on, or maybe someone talks to you if maybe you've done something. It's not a hard situation. Everyone can talk about things. (122)

Echoing the emphasis on informal dispute processing, a woman at Private Homecare stated that sometimes people forget themselves and one must be patient. This is why, she explained, she always tried to resolve issues informally.

> You have to talk. If someone does something or doesn't do something that they should, you have to remind them. You have to speak up but you have to be patient because everyone has other things going on [outside the job]. You need to have to talk when there's a problem. [074]

Similarly, the workers from the Charity Co-operative spoke about resolving disputes directly and informally.

> When there's a problem, I go [directly and confront the situation]. You can't just let something happen, you have to come forward. There's nothing bad about that. And if you've done something, they'll come and talk [directly] with you. [019]

Thus, their dispute resolution strategies were remarkably similar. Their workers consistently mentioned informal dispute resolution as the main way to resolve disputes.

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In discussing how conflicts were managed, workers often explained that they could resolve issues informally with their supervisors because they enjoyed good relations with them. Homecare workers at all three businesses spoke of feeling well supported with easy access to their managers.

For example, this 55-year-old woman at Co-operative Homecare contrasts how accessible her supervisors are at her present homecare job with those at her previous job in a nursing home.

> [Here] you can just come in and have a good chat. You can just go talk to them, just pop in and say, 'Oh can I have a word with you, Ellen?' [At my previous job] you had to knock on the door, wouldn't you? It's more like a distance between you, when you have to go at somebody's office and knock on the door. You'd have to ask him, 'Is it convenient?' It's going to be more official rather than just having a little chat. Different from when you just sort of like pop in and have a cup of coffee with somebody. [083]

The easy access to her present supervisors made her feel that less formal interactions were more possible than at her previous job.

When describing the process of conflict management, nearly all the homecare workers emphasized that the encouraging and understanding manners of the supervisors contributed to their ability to rely so heavily on the informal dispute processing. Research on carework does emphasize the importance of managers' supportiveness in buffering the workloads and emotional demands of caregiving work (Abel and Nelson 1990; Kahn 1993). The nature of carework often demands that care workers are accessible to clients emotionally, physically, and intellectually. As discussed more below, this can be very demanding and can create very meaningful relationships between care workers and clients (Marshall, Barnett, Baruch, and Pleck 1991). Kahn reports that care workers perform best when they receive the same level of support and nurturance from the organization as they are expected to provide to clients (1993). Similarly, workers "felt frustrated and angry when superiors inappropriately withheld care" (Kahn 1993: 545).

Exit Exiting was not an option regularly considered by the workers at the three homecare businesses. When they did cite this as an option, it was generally voiced as a last resort. For example, this member of Co-operative Homecare contemplated her hierarchy of options in considering future workplace problems.

> I think I'd try and work it out first with the co-operative. If I couldn't get anywhere then, and I just didn't like the situation at all, I don't know whether I would bring [our labor union] into it. If I really felt necessary, I might. The very last option would be to leave. But hopefully that wouldn't happen. [005]

At most, 20% of the homecare workers (at Charity Homecare) said they would consider leaving as a response to a dispute, with 7% at Private Homecare and 12% at Co-operative Homecare voicing similar opinions.

Toleration Additionally, when discussing how they handled their workplace conflicts, homecare workers at all three sites seldom discussed dispute resolution strategies that included toleration (14% at Private Homecare, 20% at Charity Homecare, 16% at Co-operative Homecare), emphasizing their preference for informal dispute processing. Sometimes the strategies of toleration and informal dispute processing merged. An example of this was when a worker had an assignment she/he did not like, but no substitute worker could be found to replace her/him immediately. In situations such as this, the worker often discussed the situation with the manager(s) and reached an agreement to be switched as soon as this was possible (informal resolution), but, until the worker was switched, she/he had to cope with the arrangement temporarily (toleration). In this way, the client still received the necessary care, but the care worker's difficulty was also addressed. The following description by a young woman from Co-operative Homecare offers an example of this situation.

> There was one place I particularly didn't want to go back to. I came in and said to [a worker-manager] I'm not that happy about going there, but [I then agreed that] I'll do it if you can't get anyone, because I knew how bad it was to get people, especially on short notice. [111]

However, workers at all three businesses emphasized that coping with an unpleasant situation was rarely necessary because one could usually switch out of such situations easily. For example, a woman at Private Homecare said:

> If you are not happy in an assignment, you don't have to go. [The managers] are very good about that. You want to like where you're going, otherwise you're not doing your best, are you? So, if you're not happy, you can change to a different assignment quite easily. [172]

Indeed, the managers of all three businesses emphasized that they made great efforts to quickly move workers out of unpleasant situations, trying to facilitate workers liking their placements. This was done not only out of concern for worker morale, but as a practical matter in order to deliver quality service to the clients.

Formal Disputes As with exiting and toleration, very few homecare workers anticipated using formal procedures to resolve disputes (7% at Private Homecare, 20% at Charity Homecare, 12% at Co-operative Homecare). This reluctance to raise formal disputes stemmed from both the workers' and managers' belief that formal disputes were disruptive and adversely affected client care. Such actions, they asserted, divert caregivers' and managers' efforts away from their "most important duty": caring for their clients. Formal dispute resolution options that would severely disrupt care – such as slow-downs, working-to-rule, or striking – were not even mentioned. Other formal options, such as raising formal grievances, were only mentioned as options that they and their co-workers would rarely consider. For example, a formal grievance to refuse to visit a specific client for a valid employment reason (e.g., harassment by the client, health concern, over-scheduling) would directly disrupt care and so would be seen as putting concern about workplace problems above concern for clients. Nevertheless, at each business they were aware that the formal procedures existed as a possible option. A man at the co-operative

homecare business described how he and his co-workers can resolve problems informally, but

emphasized that he's glad the formal procedure is available.

> We have a whole formal procedure, but I don't think anyone's used it. We can all talk together. We can work things out (informally). But it's good to have the formal procedure, just in case. [012]

However, the homecare workers in this study were not opposed to formal disputes being raised

by other workers in different occupations. Indeed, approximately one-third of the interviewees

responded that they had brought a formal grievance, or been part of a grievance, at *previous* jobs.

Discussion of Industry Effects on Dispute Resolution Strategies

In contrast to literature that implied that the structure and culture of the *organization*

would have the greatest impact on workers' dispute resolution strategies, the data from these

homecare businesses suggest that, for this industry, the structure and culture of the *industry*

might be more important. Although three differently organized homecare businesses were

studied – a worker co-operative, a charity, and a for-profit private business – all workers

expressed similar informal dispute resolution strategies. The combination of several distinctive

characteristics of the homecare industry may account for this: (1) the triadic structure, (2)

managerial stress of filling shifts, (3) workers emotional bonds with clients, (4) workers' self-

sacrificial loyalty to clients, (5) industry culture of procedural justice and moralistic relationships

with clients having time-sensitive needs

Triadic Structure of the Homecare Industry: managers, workers, clients An important

factor why the industry appears to be more important than the organization in workplace disputes

may be the triadic structure of the homecare industry. In the other industries, workplace conflict

generally involves two parties, the worker and the manager or the worker and another worker (see

e.g., Hoffmann 2001; Tjosvold, Morishima, and Belsheim 1999). But labor issues in the homecare

industry involve three parties: the worker, the manager, and the client. Unlike in other industries, in homecare, the managers are concerned about staffing shifts, and the workers are similarly concerned that the clients receive timely and appropriate service. Research on nurses, teachers, and nannies (e.g., Abel and Nelson 1990; Grimwood and Popplestone 1993; Marshall, Barnett, Baruch, and Pleck 1991) indicates that managers often exploit workers' concern for their patients, students, and charges to avert disputes from formal processes. With the formal grievance options thwarted in this way, homecare workers only have informal means to resolve disputes.

Although other care-giving work, such as that in nursing homes, also has this triangular structure, the triadic relations in the homecare industry are particularly acute. The individual caregiver-client relations in homecare are between individual workers and clients, rather than being diffused across many caregivers and many patients in, for example, nursing home wards. Thus, these homecare worker-client relations may be more intense – creating greater loyalty and stronger bonds between worker and client, as discussed below – and so can be more powerfully exploited.

The Managerial Stress of Filling Shifts Because the homecare industry deals with people with time-sensitive needs, managers and owners face staffing challenges that those in other industries do not. These staffing pressures compel managers to do whatever they can to ensure that all shifts are adequately filled, including deterring formal grievances and exiting, since these behaviors could leave shifts unstaffed.

When the data on how conflicts are managed in these three homecare businesses are compared with findings from other industries, the pressure on management is even more obvious. Unlike in other industries such as the coal industry (Hoffmann 2001), the auto industry (Gruber and Bjorn 1982), and the taxicab driving industry (Hoffmann 2003), should a staffing

problem occur at a homecare business, the greatest risk is not lower coal output, fewer cars, or waiting passengers, but bodily, possibly fatal, injury to clients.

For example, elderly or disabled clients might fall trying to do for themselves what a care worker should have been doing, such as bathing, cooking, or even getting out of bed. This severely intensifies the anxiety for managers who risk missed shifts due to labor problems. Even in the similar business of nursing homes, staffing is a less frantic concern, since workers can, and often do, watch additional "beds" if a particular shift is understaffed.

However, homecare workers cannot easily cover co-workers' missed shifts since this would involve extensive travel time to the additional clients' homes – a much more difficult circumstance than supervising another nursing home hallway. As echoed by managers at the other two businesses, the manager at Charity Homecare explained how stressful it is to oversee sufficient staffing.

> If it's moving smoothly – because a lot of the care attendants have regular work they do every day or every week, then it's [only] a matter of covering those [shifts]. But if somebody goes off sick at quarter to eight in the morning and they should be doing a day's work, then obviously that's a real headache to arrange. At the end of the day, you've got to cover it, because we're going into vulnerable people, often with either a long-term health problem or a disability.
> It's not like saying well, I won't do that paperwork today, but I'll do it tomorrow. There's somebody needs to be got out of bed or put to bed. Can't leave them to stay in bed all day, can you? It's got to be done, even if I've got to go and do it myself. (022)

She emphasized that keeping all shifts covered is vital by adding that she does the work herself in emergency situations.

One of the two owner/managers at Private Homecare described a recent situation where a client's scheduled visit was missed. As did other managers, she feared that such action could result in injury or death.

> The thing is, last night, a Mrs. [name] was missed. She was fine. Great. But that person could have died because [she] didn't have that call. Anything could have

> happened. That person could have fallen downstairs from the top to the bottom
> and be dead.
>
> > It really has to be brought home: it is a big, big responsibility that the staff
> > have. There's no getting away with it. There's not many jobs where you are so
> > responsible. To most staff it comes very, very natural. If you're that type of
> > person that cares enough, everything comes natural. [071]

She concluded that the staff was generally capable of this high level of responsibility and caring.

Interestingly, this Private Homecare owner emphasized the responsibility of the care workers, not the managers, unlike the Charity Homecare manager's statement which focused on her own responsibility. The Private Homecare owner even stated, as did other managers as well as workers, that these homecare workers were "naturally" suited for this responsibility because they seemingly *cared enough*.

This view, often shared by both labor and management, that homecare workers were "extra special" because they "cared so much," could easily be exploited. The combination of intense pressure on management to have perfect staffing and the potential to exploit the caregivers' ethic of responsibility leads to a high level of emotional manipulation by management in order to control labor. An important aspect of this emotional manipulation included channeling all disputes to informal methods, specifically avoiding formal grievances and abrupt exiting that could disrupt staffing.

Although this emotional manipulation is not the sole dynamic, managers' capitalizing on workers' emotions to lessen management difficulties may be a key aspect of managing a homecare business, as demonstrated by the three homecare businesses in this study. For example, one of the worker-managers at Co-operative Homecare described how she appealed to workers' sense of "the big picture" when they wanted more money or better hours.

> Much as they might be nice people, they still got their own agenda. As an
> individual – and [since] it's approaching Christmas – they want money. They got
> pressures on them financially, 'cause it's not a well-paying job. And they see the

wrong circumstances and forget the bigger picture. I try to tell them about the bigger picture. Sometimes it works. Sometimes it doesn't. [069]

She explained that if Co-operative Homecare raised the wages it paid, even as a co-operative, they would have to raise the rates they charge, resulting in losing government contracts and becoming too expensive for clients who pay out-of-pocket. By reminding the workers of the importance of their work to their clients, the managers could appeal to their sense of altruism – in the above scenario, to work for less pay, or, in other situations, to resolve a dispute informally rather than exiting or bringing a formal grievance.

Workers' Emotional Bonds with Clients These reminders about the needy clients who depend on their homecare workers deterred formal grievances and exiting, partly because of the strong emotional bonds between worker and client, mentioned by nearly all interviewees. For example, a woman at Private Homecare explained that she feels one inevitably develops strong emotional bonds with one's clients.

> You're always going to get close to them, at least to some of them. You can't not. You see them often – sometimes you're the main person they see, besides their families, and some don't have any family. So you get real close to them. It becomes the emotional part of the job. [151]

While the literature talks about workers in various caring professions (e.g., teachers, nannies, and nurses) developing emotional ties to their charges, interviewees asserted that homecare workers developed closer relationships with their clients than workers in hospitals or residential nursing homes. A woman at Charity Homecare explained that close bonding is difficult in hospitals because one cares for so many patients at once.

> In the hospital, you don't build up a relationship with a ward with 30 people on it, but here [in homecare] you go to people week in, week out, and you build a rapport...you see them in their homes; you know them. [092]

Similarly, in nursing homes, workers interact with many patients, spending less time with each and, subsequently, developing weaker bonds.

Both managers and workers acknowledged that close ties could form between the cared-for and homecare worker. For example, this woman from Charity Homecare described how fulfilled she felt by working with a little girl with brain tumors.

> I've got a little girl that I'm working with. They said she wouldn't walk until maybe she was four or five. She walked at two. They didn't really think she'd get any speech, because she has tumors of the brain, but she's talking. So that's been a big achievement to me, because I've been going to her since she was about six months old, and she's now four... so that's really satisfying. [027]

Indeed, 80% of the workers mentioned the emotional bonds with clients as part of the "good" in their jobs. With these strong and highly valued emotional bonds, few workers were inclined to engage in any behaviors that would jeopardize their clients' welfare, such as formal grievances or sudden exiting.

Workers' Self-Sacrificial Loyalty to Clients These bonds often developed into great loyalty toward clients, in turn, affecting, dispute resolution strategies by making some dispute resolution options unappealing or even inconceivable. Illustrating the power of workers' loyalty to clients, a woman at Co-operative Homecare explained that she came to her present company because the client with whom she had been working changed agencies.

> What happened was, I was looking after a client in this private agency. And, the client wasn't happy with [that agency], so he joined this homecare agency. Once he transferred over, he wanted to keep me as a carer. I liked this gentlemen so much I decided to stay with him and move to [Co-operative Homecare] myself. And, here I am. [068]

Echoing this same sentiment but with an opposite situation, a woman at Private Homecare spoke of how she considered quitting and changing to another company where she could make more money, but wouldn't leave her clients.

> Because I started with Private Homecare [as opposed to another company] I've got used to my clients. But really I'm cutting my nose off to spite my face. Because, if I swapped over to the other company, I would get loads of work, loads more money. [066]

Not only might loyalty to clients determine where workers were employed, this loyalty would often motivate them to do work without pay. A woman at Private Homecare described how she occasionally stays longer than she is paid to visit.

> Sometimes I stay beyond my time because you can't say no. You think to yourself, there's a few of them are on their own. They never see anybody. There'll be some that haven't got any family. Just to chat with them keeps 'em going. Probably I feel sorry for them, sometimes. [030]

Similarly, a woman at Charity Homecare spoke of making extra visits when some clients could not pay for them.

> [Sometimes] somebody needs the service. And, the money isn't there to give it. And, you think, the money shouldn't be involved, when it is. It's the major part of care. But, because like I'm the sort of person that do take things to heart, [it becomes] a problem shared. But you're important anyway, so you have to; that's all. [119]

A member of Co-operative Homecare described a client whom she drove to the doctor and whose dog she watched when the client was hospitalized during the homecare worker's off hours.

> I looked after her dog. I didn't get paid. She paid us something but I didn't expect anything and I treated her more like a friend. I used to go on my own time and look after her dog and feed him when she was in the hospital. And I used to pick her up from dialysis in my car for no extra cost or anything. [111]

For her, it was a point of pride that she did some work for no pay. She felt that this demonstrated that she was a "good person," who was not in the job only for the money.

Loyalty and this ethic of sacrifice also occasionally affected workers' rights consciousness directly. The man quoted below had been a miner before being laid off and coming to Charity Homecare. Although he defined himself as a socialist, he said that, as a homecare worker, he wouldn't join their union because he didn't want to take part of any formal action.

> You see, social services is quite a large organization and has a lot of people working for them and everybody in that industry is represented by [the union]. It's important that you are part of that, but [now], it really wouldn't matter. I mean, if I was in [the union] and they decided, 'Right, we're going to have all of our members on strike until we achieve a basic minimum wage of whatever.' I mean, I'm not going to go on strike here...just wouldn't do it. [082]

He emphasized that, although he was usually very in favor of collective action, he did not believe in it within the homecare industry.

Industry Culture of Procedural Justice and Moralistic Relationships The rare mention of toleration in the homecare industry (see Table 3) makes that industry's dispute resolution pattern particularly unique from the patterns of most other industries, where workers who did not bring formal disputes would either quit or tolerate their problems (Gruber and Bjorn 1982; Gwartney-Gibbs and Lach 1994a; Hoffmann 2006; Mansbridge 1982). In contrast, the workers in the homecare businesses gained sufficient satisfaction through informal means so that very few employees felt forced to quit or learn coping skills in order to tolerate problems. Indeed, the data in this study indicate that homecare industry also appears to produce an industry culture that makes informal dispute resolution particularly satisfying for workers, so that toleration, exiting, and formal procedures are not needed. The homecare culture observed in these businesses supports perceptions of procedural justice on the part of management and emphasizes morality over legality.

The literature on procedural justice helps explain this dispute resolution behavior. Tyler and Lind found that people are more flexible in accepting a wider range of distributive justice outcomes if they are treated fairly ("procedural justice") (2000). If the homecare workers felt that their managers were engaged in procedural justice, informal dispute resolution may have provided sufficiently successful dispute resolution to decrease the need for toleration of unresolved disputes. As mentioned above, Tyler and Lind assert that a disputant will see treatment as being procedurally just if the disputant (1) trusts the authorities handling the problem ("trust"), (2) feels that s/he is seen by the authorities as a having full status in the group

("standing"), and (3) believes that s/he received nondiscriminatory, neutral treatment ("neutrality").

In analyzing how conflicts are managed, my data indicate that all three aspects of procedural justice ("trust," "standing," and "neutrality" (Tyler and Lind 2000) were present in the homecare businesses. The workers trusted the managers and cited many instances of managerial fairness, such as when workers described managers putting in their own overtime, sitting with them after the death of a client, or supporting workers faced with unreasonable requests or complaints from clients. People infer trustworthy motives when authorities act with flexible, informal justice, rather than blindly following formal rules (Tyler and Lind 2000). The managers in the homecare businesses were able to communicate their trustworthiness because, according to Tyler and Lind, informal dispute resolution allows the managers to engage in more discretionary actions. An example of this is when workers spoke of trusting managers to consider extenuating personal circumstances and make necessary allowances unique to that particular situation. The statement from one homecare worker was typical of all the homecare workers: "I trust that if I go to Ellen, she'll sort it all out." (151).

The workers also felt that they had full standing. Workers at all three businesses spoke of feeling included in the enterprise. The managers were seen as comrades in the homecare effort. In this case, because all three businesses' managers began as rank-and-file workers in homecare, they easily accorded their workers full status in their shared endeavor of providing quality care. Because of the managers' practical experience in the field, several workers specifically spoke of the managers as understanding what the workers were facing and valuing their insights and opinions, rather than simply giving unilateral, uninformed orders.

Additionally, the homecare workers saw the actions by the managers as being neutral and fair. Unlike in other companies where a frequent complaint of workers was favoritism of others by the managers/owners (e.g., Burawoy 1979; Hodson 1991; Hoffmann 2004; Paap 2006), I heard no one at any of the homecare businesses express this complaint. The only complaint, albeit indirectly along this theme was from some male homecare workers. They resented that some female clients would request only women homecare workers, making for fewer available hours for male workers. However, none of them blamed the managers for this. Rather, they saw it as the prejudice of personal taste and a result of the demographic of many of the clients: elderly women who were uncomfortable being bathed and dressed by men.

Tyler and Lind emphasize that, if people perceived procedural justice, they believe they can obey the authorities' orders without fear of exploitation, but, if authorities seem to act unfairly, obedience is less likely because the people will fear abuse. When people feel they are fairly treated, they enter "group mode," in which they are cooperative and establish behavior based on fairness rather than expected outcomes. In contrast, when they feel poorly treated, they enter "individual mode," in which they pattern their behavior to maximize short-term outcomes (Tyler and Lind 2000). Because the homecare workers, operating within a group mode, experienced procedural justice from the managers, their primary dispute resolution strategy could be informal dispute resolution, rather than formal grievances, exiting, and toleration skills (Tyler and Lind 2000).

Tjosvold et al.'s theory of "cooperative interdependence" also explains the dispute strategies found in the homecare industry by looking at how the structure and culture of the industry reinforces the industry norm of informal dispute resolution (1999). In the homecare industry, a formal grievance is not simply between the individual worker and the manager, but

involves the client, too. This, substantially changes the nature of any disputes as any formal action could negatively affect the clients' care. Neither the managers nor the workers wanted this; for their shared goal was quality client care. Tjosvold et al. found that workers with cooperative or aligned goals achieved "cooperative interdependence" and could resolve disputes informally with mutually satisfactory outcomes.

This "cooperative interdependence" is similar to the "moralistic" discourse, rather than the "legalistic" or "therapeutic" discourses, that Merry reported in her study of courts and court mediators (1990). The homecare workers eschewed the "legalistic" approach to dispute resolution, i.e., formal grievances, yet directly confronted their problems, unlike the nonconfrontational "therapeutic" perspective. Rather than embracing either legalistic or therapeutic discourses, the homecare workers focused on relationships, obligations, and responsibilities, engaging in a moralistic discourse that resulted in their emphasis on informal dispute resolution.

However, homecare workers' moralistic perspective was not accidental. Just as Merry's court mediators actively and intentionally reframed would-be litigants' concerns from a legalistic frame into a moralistic or therapeutic frame, homecare managers try to reframe workers' concerns away from the legalistic and toward the moral in order to avoid formal dispute actions and the subsequent difficulties in scheduling these would provoke. Legalistic disputes would be appropriately settled through the quasi-legal forums of formal dispute resolution, which managers want to avoid because they are seen as burdensome, time-consuming, and distracting from their care-giving mission.

In contrast, moralistic problems would be better addressed through informal means. Therefore, homecare managers emphasized the morality of the job, such as the earlier quote from

one of the Private Homecare owners. They also tried to refocus workers' concerns onto the greater businesses' needs rather than on workers' personal needs, as reflected in the earlier comment from the worker-manager at Co-operative Homecare regarding how she dealt with workers' desire for more money around the holidays. When this reframing is successful – that is, when the workers, too, see their problems in moral terms – they are satisfied with informal dispute resolution, not relying on coping skills, much less exiting or raising formal grievances.

CONCLUSIONS

The findings of this study highlight the importance of examining industry effects when researching workplace dispute resolution. Although some research has found organization effects to have significant impacts on dispute resolution in other industries, in the homecare industry, these data suggest that those effects may not be as substantial as the industry effects. Thus, broadening the research focus beyond the organization to also include industry-level effects further enriches the sociological understanding of dispute resolution dynamics.

The results speak to the power of framing disputes into moralistic discourses. Other studies (e.g., Merry 1990) have shown how moving disputes into moralistic discourses can prevent those disputes from being addressed formally (e.g., brought into court, in the case of Merry's research). The results from the homecare industry demonstrate how similar moralistic framing can prevent workplace issues from being raised as formal actions. While some disputes might be able to be successfully resolved informally, the lack of formal procedures implies that workers' rights might be more easily trampled (e.g., Edelman, Erlanger, and Lande 1993; Silbey and Sarat 1989). This is significant, especially when one considers the many health and safety risks of homecare work. In addition, the risk to vulnerable clients if disputes are not successfully

resolved heightens this concern over potentially undermined rights. The rights talk of care professionals, such as teachers and nurses, often includes both the workers' needs and the needs of their students and patients (e.g., Grimwood and Popplestone 1993). If homecare workers are not able to assert their rights through formal grievance processes, then both they and their clients are at greater risk.

The homecare industry data also are linked with procedural justice. The homecare workers perceived their managers as being procedurally just and so were willing to enter a "group mode" (Tyler and Lind 2000) in which they focused more on fairness and the best result for everyone involved, rather than on their own needs and wants. As with the moralistic framing of disputes, entering into a group mode mentality could permit workers' rights to be circumvented under the guise of procedural justice. Indeed, Tyler and Lind (2000) note that it is merely the *perception* of procedural justice by the would-be grievant that affects grievance behavior – not the actual presence of procedural justice. In fact, a degree of false consciousness regarding procedural justice on the part of the workers and managers would still produce a group mode, with all of its cooperation and focus on the needs of others. The acceptance of a wider range of distributive justice could leave workers very vulnerable and unable to raise potentially necessary formal grievances. Since, as mentioned above, homecare grievances could protect workers' and clients' needs, blocked formal grievance avenues could result in harm to both groups.

The data in this study are drawn from only three businesses. Given this limited sample, the findings must be viewed as exploratory and the subsequent conclusions drawn from them as somewhat tentative. Additionally, the data might have a suppressed measure of workers who would exit as a strategy for resolving disputes, since some of these workers might have already

done so and, therefore, would not have been interviewed as part of this study. (However, several former employees from each business were interviewed in an attempt to capture this perspective.)

Future research might explore these effects in other helping professions that have the possibility of the four conditions present in homecare, such as nannies and social workers, or even more predominantly male occupations, such as parole officers. Additionally, future research might also examine organizations that decouple egalitarian ideology from flattened organizational structure, such as privately owned organizations that allow the employees to collectively manage aspects of the business or businesses with well-participated employee stock option plans (ESOPs).

REFERENCES

Abel, Emily K. and Margaret K. Nelson. 1990. *Circles of Care: Work and Identity in Women's Lives*. New York: State University of New York Press.

Blumenthal, Jeremy A. 1998. "The Reasonable Woman Standard: A Meta-Analytic Review of Gender Differences in Perceptions of Sexual Harassment." *Law and Human Behavior* 22:33-57.

Bumiller, Kristin. 1988. *The Civil Rights Society: The Social Construction of Victims*. Baltimore: The John Hopkins University Press.

Burawoy, Michael. 1979. *Manufacturing Consent*. Chicago: University of Chicago Press.

Calhoun, Patrick S. and William P. Smith. 1999. "Integrative Bargaining: Does Gender Make a Difference?" *The International Journal of Conflict Management* 10:203-224.

Church, Jenny. 1996. *Regional Trends*. London: Government Statistical Service.

Cornforth, Chris, Alan Thomas, Jenny Lewis, and Roger Spear. 1988. *Developing Successful Worker Co-operatives*. London: Sage Publications.

Davis, Fred. 1959. "The Cabdriver and his Fare: Facets of a Fleeting Relationship." *American Journal Sociology* 65:158-165.

Dennis, Norman, Fernando Henriques, and Clifford Slaughter. 1956. *Coal is our Life: An analysis of a Yorkshire mining community*. London: Tavistock Publications.

Edelman, Lauren B., Howard S. Erlanger, and John Lande. 1993. "Internal Dispute Resolution: The Transformation of Civil Rights in the Workplace." *Law and Society Review* 27:497-534.

Edelman, Lauren B., Christopher Uggen, and Howard S. Erlanger. 1999. "The Endogeneity of Legal Regulation: Grievance Procedures as Rational Myth." *American Journal of Sociology* 105:406-454.

Felstiner, William L. F., Richard L. Abel, and Austin Sarat. 1980-81. "The Emergence and Transformation of Disputes: Naming, Blaming, Claiming…." *Law and Society Review* 15:631-654.

Galanter, Marc. 1974. "Why the 'Haves' Come Out Ahead: Speculations on the Limits of Legal Change." *Law & Society Review* 9:95-127.

Grillo, Trina. 1991. "The Mediation Alternative: Process Dangers for Women." *Yale Law Journal* 100:1545-1610.

Grimwood, Cordelia and Ruth Popplestone. 1993. *Women, Management, and Care*. London: Macmillan Press.

Gruber, James E. and Lars Bjorn. 1982. "Blue-Collar Blues, The Sexual Harassment of Women Autoworkers." *Work and Occupations* 9:271-298.

Gutek, Barbara A. and Bruce Morasch. 1982. "Sex Ratios, Sex-Role Spillover, and Sexual Harassment of Women at Work." *Journal of Social Issues* 38:55-74.

Gwartney-Gibbs, Patricia A. and Denise H. Lach. 1992. "Workplace Dispute Resolution and Gender Inequality." *Sociological Practice* 10:79-96.

—. 1994a. "Gender and Workplace Dispute Resolution: A Conceptual and Theoretical Model." *Law and Society Review* 28:265-296.

—. 1994b. "Gender Differences in Clerical Workers' Disputes over Tasks, Interpersonal Treatment, and Emotion." *Human Relations* 47:611-639.

Hirschman, Albert O. 1970. *Exit, Voice, and Loyalty: Responses to Declines in Firms, Organizations, and States*. Cambridge: Harvard University Press.

Hodson, Randy. 1991. "The Active Worker: Compliance and Autonomy at the Workplace." *Journal of Contemporary Ethnography* 20:47-78.

—. 2001. *Dignity At Work*. Cambridge: Cambridge University Press.

Hodson, Randy and Teresa A. Sullivan. 2002. *The Social Organization of Work*. Belmont, CA: Wadsworth/Thomson Learning.

Hoffmann, Elizabeth A. 2001. "Confrontations and Compromise: Dispute Resolution at a Worker Cooperative Coal Mine." *Law & Social Inquiry* 26:555-596.

—. 2003. "Legal Consciousness and Dispute Resolution: Different Disputing Behavior at Two Similar Taxicab Companies." *Law & Social Inquiry* 28:691-715.

—. 2004. "Selective Sexual Harassment: How the Labeling of Token Workers Can Produce Different Workplace Environments for Similar Groups of Women." *Law and Human Behavior* 28:29-45.

—. 2005. "Dispute Resolution in a Worker Cooperative: Formal Procedures and Procedural Justice." *Law & Society Review* 39:51-82.

—. 2006. "Exit and Voice: Organizational Loyalty and Dispute Resolution Strategies." *Social Forces* 84:2313-2330.

Honigsberg, Peter Jan, Bernard Kamoroff, and Jim Beatty. 1982. *We Own It: Starting and Managing Coops, Collectives, and Employee Owned Ventures*. Laytonville, CA: Bell Springs Publishing.

Kahn, William A. 1993. "Caring for the Caregivers: Patterns of Organizational Caregiving." *Administrative Science Quarterly* 39: 539-563.

Kleinman, Sherryl. 1996. *Opposing Ambitions: Gender and Identity in an Alternative Organization*. Chicago: University of Chicago Press.

Linehan, Mary and Vincent Tucker. 1983. *Workers' Cooperatives: Potential and Problems*. Midleton, County Cork, Ireland: Litho Press Co.

Lipset, Seymour M., Martin A. Trow, and James S. Coleman. 1956. *Union Democracy*. New York: Free Press.

Mackin, Christopher. 1997. "Employee Ownership and Industrial Relations." *Perspectives on Work* 1: 21-24.

Mansbridge, Jane J. 1982. "Fears of Conflict in Face-to-Face Democracies." 132-167 in *Workplace Democracy and Change*, edited by F. Lindenfeld and J. Rothschild-Whitt. Boston, MA: Extending Horizons Books.

Marshall, Nancy, Rosalind C. Barnett, Grace K. Baruch, and Joseph H. Pleck. 1991. "More Than a Job: Women and Stress in Caregiving Occupations." 224-246 in *Current Research on Occupations and Professions*, vol. 6, edited by H. Z. Lopata and J. A. Levy. Greenwich, Connecticut: JAI Press Inc.

Merry, Sally Engle. 1990. "The Discourses of Mediation and the Power of Naming." *Yale Journal of Law & the Humanities* 2:1-36.

Michels, Robert. 1962. *Political Parties*. Translated by E. Paul and C. Paul. New York: The Crowell-Collier Publishing Company.

Miller, Richard E. and Austin Sarat. 1981. "Grievances, Claims, and Disputes: Assessing the Adversary Culture." *Law and Society Review* 15:525-561.

Morrill, Calvin. 1995. *The Executive Way*. Chicago: University of Chicago Press.

Oerton, Sarah. 1996. *Beyond Hierarchy: Gender, Sexuality and the Social Economy*. Briston, PA: Taylor & Francis.

Paap, Kirsten. 2006. *Working Construction: Why White Working-Class Men Put Themselves and the Labor Movement in Harm's Way*. Ithaca, NY: Cornell University Press: Industrial and Labor Relations Imprint.

Pateman, Carole. 1970. *Participation and Democratic Theory*. London: Cambridge University Press.

Reskin, Barbara F., Debra B. McBrier, and Julie A. Kmec. 1999. "The Determinants and Consequences of Workplace Sex and Race Composition." *Annual Review of Sociology* 25:335-61.

Rothschild, Joyce and J. Allen Whitt. 1986. *The Cooperative Workplace: Potentials and Dilemmas of Organizational Democracy and Participation*. Cambridge: Cambridge University Press.

Silbey, Susan and Austin Sarat. 1989. "Dispute Processing in Law and Legal Scholarship: From Institutional Critique to the Reconstruction of the Judicial Subject." *Denver University Law Review* 66:437-487.

Swerdlow, Marian. 1989. "Men's Accommodations to Women Entering a Nontraditional Occupation: A Case of Rapid Transit Operatives." *Gender and Society* 3:373-387.

Thornley, Jenny. 1981. *Workers' Cooperatives: Jobs and Dreams*. London: Heinemann Educational Books.

Tjosvold, Dean, Motohiro Morishima, and James A. Belsheim. 1999. "Complaint Handling on the Shop Floor: Cooperative Relationships and Open-Minded Strategies." *The International Journal of Conflict Management* 10:45-68.

Toiskallio, Kalle. 1941. "In an Urban Taxicab." *Sosiologia* 31:100-111.

Tucker, James. 1999. *The Therapeutic Corporation*. New York: Oxford University Press.

Tyler, Tom R. and E. Allan Lind. 2000. "Procedural Justice." Pp. 65-92 in *Handbook of Justice Research in Law*, edited by J. Sanders and V. L. Hamilton. New York: Kluwer Academic/Plenum Publishers.

Weber, Max. 1946. *From Max Weber: Essays in Sociology*. Translated by H. Gerth and C. W. Mills. New York: Oxford University Press.

Welsh, Sandy. 1999. "Gender and Sexual Harassment." *Annual Review of Sociology* 25:169-90.

TABLES

Table 1: Sample Organization and Interviewees

	type of organization	location	interviewed	total employees
Private Homecare	conventional hierarchy	Midlands (U.K.)	14 (32%)	44
Charity Homecare	hierarchical charity	Coventry (U.K.)	10 (19%)	51
Co-operative Homecare	worker co-operative	Sunderland (U.K.)	25 (55%)	45

Table 2: Dispute Resolution Strategies

	Formal Processing	Informal Processing	Toleration	Exit
Private Homecare	7% (n=1)	100% (n=14)	14% (n=2)	7% (n=1)
Charity Homecare	20% (n=2)	90% (n=9)	20% (n=2)	20% (n=2)
Co-operative Homecare	12% (n=3)	84% (n=21)	16% (n=4)	16% (n=4)

note: percentages sum to greater than 100% because the categories are not exclusive; some interviewees mentioned more than one dispute resolution strategy.