Old norms in the new normal

Scholz, Frederike; Oliver, Liz; Tomlinson, Jennifer; MacKenzie, Robert; Ingold, Jo

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Old norms in the new normal: Exploring and resisting the rise of the ideal pandemic worker

1 | INTRODUCTION

1.1 | The ideal worker concept and the COVID-19 pandemic

Acker's description of the ideal worker as *"unencumbered with caring responsibilities and ready to devote his life to his job"* (Acker, 2006a, p. 69) becomes haunting when considered in the context of a global health crisis. When, on a global scale, human life became more vulnerable, care needs increased exponentially, and organizations demanded intense effort in their clamor for survival. Acker's (1990, 1998) ideal worker concept has captured the intellectual imagination of contributors to Gender, Work and Organization (GWO) for decades (Adkins, 2019; Pocock, 2005; Pullen et al., 2019). In this Special Issue of GWO we apply the ideal worker concept to the context of the COVID-19 pandemic to expose how implicit ideals about who workers are and what workers do interact with unprecedented organizational crisis management and other large-scale changes in practices and processes.

Since the 1990s, Acker's ideal worker concept has been used by gender scholars to expose how organizations are gendered and how organizing processes produce and reproduce relations that differentiate access to resources along various axes of inequality within and then beyond Western contexts (Brumley, 2014; Healy et al., 2011; Kelly et al., 2010). This disembodied, ideal worker is a male worker who is usually implicitly white, culturally Western, is able to undertake full-time work, is rational, a strong leader, committed to work, and free from family or other responsibilities (Acker, 1990, 2006a; Brumley, 2014; Martin, 2003; Williams, 2001). The organization of work on this implicit model is understood as one of the processes through which ongoing class relations are gendered and racialized (Acker, 2006a). This image of the ideal worker is said to be manifested within organizations that are described as *"inequality regimes in which the ordinary, ongoing activities of doing the work also reproduce complex inequalities"* (Acker, 2006a, p. 172). Thus the ideal worker and other organizing processes impact beyond organizations to shape wider access to the means of survival within capitalist economies. The authors of the papers within this Special Issue have interrogated what happened to these processes when "*the ordinary, ongoing activities of doing the work*" became massively disrupted on a global scale as established organizational logic gave way to the conditions of a pandemic. Their analysis shows how the implicit norms underpinning the organization of work are exposed and re-entrenched to the detriment of women workers.

Of course, the COVID-19 pandemic did more than simply change work practices and delivery. It endangered life and placed embodied-care work at the forefront of collective imagination. Yet public discourse paid scant attention to women's paid and unpaid labor (Ozkazanc and Pullen, 2021). The papers within this Special Issue develop our understanding of how the elevation of care and care work interacted with the ideal worker norm to shape an intense commodification of care within different national contexts. Through inequality, regimes reaching beyond organizations, images, and ideologies of idealized care workers together with the implicit male model underpinned the enactment of a self-sacrificing ideal (see Galanti, this issue).

The twin concepts of the ideal worker (implicit model) and the idealized worker used together show how divergences from the implicit model become projected onto workers in ways that legitimate inequalities and render certain work and risk less visible (Acker, 2006a; Galanti, this issue; Johnson, 2022). Within this issue, we see Acker's concept of inequality regimes put to use within intersectional analyses across a range of axes (class, gender, race, age, religion,

or cultural tradition). Such approaches have been used before to expand analysis beyond gender and race (Foster & Wass, 2013; Scholz & Ingold, 2021) and to incorporate a range of national and cultural contexts (Brumley, 2014; Healy et al., 2011; Wright, 2016). The papers in this special issue contribute empirical insights from the USA, Kuwait, the UK, and Italy. The analyses center on intersectional understandings of gender as they explore the delivery of embodied care (within the Italian health and social care (H&SC) sector and within the pre-pandemic UK) and reproductive work (delivered alongside work in corporate contexts in the USA and Kuwait) to incorporate an understanding of ways in which inequalities were reproduced through the pandemic.

We acknowledge that the selected papers in this special issue do not capture a panoramic view of the diversity of experiences (e.g., notably disabled workers or working fathers, experiences of job loss and furlough) (see, Balan et al., 2023; Goodley et al., 2023). However, the contributions of the papers within our Special Issue show that rather than leveling societal inequalities, the COVID-19 pandemic has widened global injustice, and the way organizations are organized around taken-for-granted ideal worker norms. They contribute to a growing body of literature (Johnson, 2022), that presses that a collective effort is required to dismantle inequality regimes and foundational legislative changes to counteract the production of inequalities prioritizing certain accepted ideal worker abilities and norms over others.

In turn, we now explore the six themes [see Table 1] that we identified and link these four articles and the overarching contribution to Acker's work that make up this special issue: (1) The disruption of "*the ordinary, ongoing activities of doing work*", (2) re-entrenchment of the ideal worker, its pervasiveness and adaptability to new spaces and conditions, (3) variations in the intensification of work and risk throughout the pandemic, (4) the centrality of care in challenging ideal worker norms, (5) heroism, guilt, and self-sacrifice, and (6) resistance to ideal worker norms and expectations.

1.2 | The disruption of "*the ordinary, ongoing activities of doing work*"

In the contributions made to this special issue, the authors show that the pandemic took organizations and traditional practices by surprise and exposed the fallibility of established ways of doing things. They speak to three main ways in which the COVID-19 pandemic disrupted "*the ordinary, ongoing activities of doing the work*" in organizations. The first is a rapid increase in employer demand for paid labor particularly in care contexts but also in corporate contexts; the second is a shattering of established infrastructures and strategies for linking paid work to the rest of life and the third is a rapid increase in demand for care and education (reproductive) work, by and within the household. Overarching these changes are the elements of time and space. Change happened rapidly and work and care often had to be delivered at the same time (within and beyond the standard working day) and within the same space (the household). Finally heightened risk and uncertainty were the context for and consequence of the changes. The pandemic was a global health crisis that created embodied risks to life and health whilst the public health policy responses to the pandemic precipitated economic risk and uncertainty. The papers within this special issue contribute to our understanding of inequality regimes by exploring whether the disruption of the ordinary business of doing the work so quickly, at such scale and in the context of such risk to life and need for care, challenged the ideal worker norm.

In this issue, Al-Asfahani, Hebson, and Bresnen note that fixed ideas about how the roles should be performed underwent change within just a few months. Zanhour and Sumpter document that the assumption and sustainability of the "work-first" organizational culture in the United States has never been so abruptly and forcefully challenged. Yet as the myths surrounding established practice became exposed and scrutinized, gender inequalities were reproduced through the work of adapting to the demands and conditions of the pandemic. Responses were organized on the assumption of full availability and commitment (Al-Asfahani et al., this issue; Galanti, this issue; Zanhour & Sumpter, this issue). Within corporate contexts, rapid restructuring activities redesigned jobs and whole departments (Zanhour & Sumpter, this issue). This in turn created increased demand for certain consultancy services (Al-Asfahani et al., this issue), whilst job insecurity supported forms of coercion through competition (Zanhour & Sumpter, this

TABLE 1 Overview of the six identified themes of this special issue.

Theme	Contribution	Mapping	Editorial development	Future horizons
The disruption of "the ordinary, ongoing activities of doing work"	Empirical evidence and analysis of experiences of the work of adapting and responding to the pandemic.	*Zanhour and Sumpter*: Experiences of working mothers across US organizations. *Al-Asfahani, Hebson and Bresnen*: Case study of Kuwaiti professional services firm. *Galanti*: Worker mobilization in the Italian health and social care sector. *Allard and Whitfield*: Pre-pandemic experiences of care workers and working carers in the UK. Connected to pandemic context via literature.		Application to a wider range of pandemic experiences for example, disabled workers or working fathers, experiences of underemployment, and job loss.
	Evidence of exposure and re-evaluation of taken-for-granted practices.	*Zanhour and Sumpter*: Documents experiences of ideal worker norms in organizations, at home and internally. *Al-Asfahani, Hebson and Bresnen*: Considers whether a pandemic exposes the socially constructed nature of organizational practices. Analysis of 'denaturalizing' old ways of working. *Galanti*: Identifies a self-sacrificing ideal and documents collective responses to it. *Allard and Whitfield*: Highlights guilt as a desirable ideal worker characteristic.		
	Analysis of reproduction of inequalities through pandemic work activities via inequality regimes.	Prominent in *Galanti*'s analysis. Also considered in *Zanhour and Sumpter* and *Al-Asfahani, Hebson and Bresnen*. The latter unpicks PSF ideals in Kuwait.		

(Continues)

TABLE 1 (Continued)

Theme	Contribution	Mapping	Editorial development	Future horizons
Re-entrenchment of the ideal worker	Interrogation of the processes and practices through which entrenchment occurred. Identification of key norms that were reinforced in different workplace and cultural contexts. Further development of twin concepts of ideal worker and idealized worker to understand the primacy of the implicit male model and the appropriation of divergences from the model along axes of inequality.	*Zanhour and Sumpter:* Central contribution in this paper. *Al-Asfahani, Hebson and Bresnen:* Documents reversion to pre-COVID practices. *Galanti:* Documents entrenchment of the self-sacrificing ideal.	Articulation as re-entrenchment to capture the tenacity of the norms and the continuity of ongoing unequal processes. Articulation of 'double re-entrenchment' to capture the dual process of fortification of the ideal worker and the idealized projection.	
Intensification of work and risk through COVID	Empirical evidence of the mal-distribution of work and risk through the pandemic.	*Zanhour and Sumpter:* A prominent theme within this paper in terms of gender and parenting responsibilities. *Al-Asfahani, Hebson and Bresnen:* Consider gendered implications of 'new ways of working'. *Galanti:* Considers risk in the context of resistance and mobilization.		Connection with wider understandings of precarity (job insecurity, migration status) and fuller intersectional analysis of different forms of gendered inequalities (race and disability for example) to further understand the nuance of unequal distributions of risk and work.
Centrality of care in re-entrenching the ideal worker norm	Identifying the interaction of care ethics and work ethics to fill gaps in resourcing (pre-pandemic). Empirical analysis of the processes of visibility and invisibility of certain forms of care work. Interaction of symbolism with inequality regimes and the role of public discourse in the pandemic.	Key theoretical contribution by *Allard and Whitfield* connecting care ethics and work ethics. Prominent themes in *Galanti* exposition of self-sacrificing ideals.	Use of Acker's notion of non-responsibility to connect care to the maldistribution of work and risk.	

TABLE 1 (Continued)

Theme	Contribution	Mapping	Editorial development	Future horizons
Heroism, guilt, and self-sacrifice as ideal worker characteristics through COVID	Evidence of how an internalized work ethic or sense of responsibility combined with emotions prompts the enactment of the ideal worker. Highlighting the connection between emotions and the enactment of norms in self-sacrificing ways.	Central contribution of *Galanti's* paper and *Allard and Whitfield's* pre-pandemic analysis. Internalized ideals considered in *Zanhour and Sumpter*. Management reliance on responsibility found within *Al-Asfahani, Hebson and Bresnen*.	Suggesting that responsibility and non-responsibility are allocated through emotions.	Relationship between insecurity (job, migration, economic), emotion and assumption of responsibility for care.
Resistance to the ideal worker norms and expectations through COVID	Evidence of resistance (principally micro). The dynamics of resistance were shaped by inequality regimes and the politics of the resistors. Empirical evidence of successful mobilization. Examples of dampeners on mobilization. The question of whether pandemic work constitutes an example of extreme commodification of the sought-to-trigger counter-movements.	Fully assessed in *Galanti's* paper, including different forms of resistance. Evidence of resistance also identified in *Zanhour and Sumpter and Al-Asfahani, Hebson and Bresnen*. *Allard and Whitfield* consider the power of guilt in dampening resistance to overwork and exploitation.		Relationship between the allocation of responsibility and dampening of mobilization. Further explanation of pandemic work as examples of extreme commodification.

issue). Likewise, the global health crisis massively increased the demand for, and symbolic visibility of, embodied care (Galanti, this issue).

Instead of creating the conditions for a shift in norms, the pandemic prompted a re-entrenchment of pre-existing ideal worker norms.

1.3 | Re-entrenchment of the ideal worker

A key contribution of this special issue is an interrogation of the processes and practices through which re-entrenchment occurred. The theme of entrenchment was central to Zanhour and Sumpter's paper which identified this experience as prevalent within their data and pinpointed a definition:

> By "entrenchment," we refer to how individuals experienced ideal worker norms as becoming more firmly established or fortified within organizational systems and experienced by organizational members. (7)

In their work, Zanhour and Sumpter identified a reinforcement of the masculine aspects of work culture, combined with absent, temporary, or insufficient support for workers conducting unpaid caring work. Al-Asfahani, Hebson and Bresnen also identified the entrenchment of ideal professional norms. Their paper highlighted the client ethos as a key factor in preventing the changed organizational practices within a Kuwaiti professional services firm from challenging gendered ideal norms. That paper highlighted how the crisis associated with the pandemic revealed how deeply institutionalized ideal worker norms were, both within service-providing organizations and client expectations of 'good' service. Key norms like availability for clients acted as a thread of continuity between pre-pandemic and pandemic contexts and became particularly important in signaling professionalism and instilling client confidence. The papers exploring health and care workplaces confirmed the entrenchment of the implicit ideal worker model through the pandemic (Galanti, this issue), or in times of care crises (Allard & Whitfield, this issue). The ideas developed by Galanti help to reveal what we could describe as a 'double entrenchment of ideal worker norms' amidst the delivery of care throughout the pandemic. Galanti's paper showed how the implicit model of an unencumbered, disembodied (male) worker is allied to an "idealized worker" onto whom (gendered, racialized, class and age-based) characteristics are projected through organizing processes and through public discourse and adulation. This double process of conceiving workers as available and disposable whilst celebrating their angelic or heroic nature produced the self-sacrificing pandemic worker. These class processes were gendered and racialized in interaction with other axes of inequality through inequality regimes in the Italian H&SC sectors (Galanti, this issue).

1.4 | Intensification of work and risk through COVID

The papers in this special issue demonstrate that the entrenchment of ideal worker norms went hand in hand with a maldistribution of risk and work intensification. Themes of risk and the intensification of work run throughout the four papers, both regarding their maldistribution associated with ideal worker norms in general but also in terms of the specific effects of the pandemic. That COVID had a deleterious economic impact is widely recognized but the distribution of risk was unequal and heavily gendered. The sectors that were hit hardest by employment cuts and furlough were dominated by female employment (Al-Asfahani et al., this issue), which was reflected in both falling labor market participation for women and a reduction in working hours that fell disproportionately on mothers compared to fathers (Zanhour & Sumpter, this issue). The reduction in paid working hours for women was offset by an overall intensification of unpaid work. Many households adopted gendered strategies for working from home, with male-paid work protected and female work roles deprioritized to accommodate a reversion to a maldistribution

of household and family responsibilities. As a result, working mothers' careers suffered more than working fathers, compounded by an unequal distribution of the risk of damage to professional reputations based on gendered ideal worker norms (Zanhour & Sumpter, this issue). The move toward home working in response to the pandemic saw the double shift of paid work and family-oriented activities experienced by many mothers turn into a triple shift, as women took on additional roles in terms of supporting the learning and development of children and following public health guidelines - in addition to providing psychological and emotional support (Al-Asfahani et al., this issue; Zanhour & Sumpter, this issue). For many other women, homeworking was not an option, as women were more likely to fill key worker roles that were not subject to homeworking.

Across the four papers, workers experienced a gendered intensification of work as employers responded to the pandemic in different ways. The shift to home working reported in both Zanhour and Sumpter's US-based study and Al-Asfahani, Hebson and Bresnen's case study of a professional services firm in Kuwait led to an intensification of work associated with expectations of availability and connectivity. Zanhour and Sumpter (this issue) report increased workload as employers responded to the turbulent economic situation and adjusted to homeworking, compensating for the absence of physical presence by creating more video meetings to impose structure and managerial control. Moreover, expectations of connectivity and availability, even outside of conventional working hours, were reinforced by customer demands in both the USA and Kuwait-based studies; reinforcing ideal worker norms that paid work would take priority over increasingly intensified family responsibilities. In Allard and Whitfield's (this issue) UK-based study of care workers and working carers, work intensification was a result of budget cuts leading to staff shortages, compounded by emotional blackmail by management pressuring workers to provide additional or unpaid labor. A narrative of *heroism* led to extra work being normalized as part of the job and also meant the additional risk taken by workers during the COVID-19 pandemic went unacknowledged. Similar processes are reported in Galanti's (this issue) study of various occupational groups in the Italian healthcare sector. The narrative of *heroism* was used to promote the self-sacrificing worker ideal as workloads increased under COVID in a sector where workers routinely experienced job intensification but now also faced a higher risk of contracting a deadly virus, compared to other workers.

In many ways, the COVID-19 pandemic reinforced longer-standing problems. The risk of nonconformity to ideal worker norms, such as exclusion from promotion opportunities, has always fallen disproportionately on women. Under COVID women paid a higher price for compliance with ideal worker norms and faced higher risks of appearing non-compliant. Zanhour and Sumpter (this issue) recount women's reluctance to ask for help or access support where it was offered by the employer for fear of signaling weakness or lack of commitment. Al-Asfahani et al. (this issue) similarly relate women's concerns that the take up of flexible working could be perceived as nonconformity to the worker ideal and again risked being interpreted as a lack of commitment. Such concerns are also reflected in Allard and Whitfield's (this issue) report of care workers not taking time off to deal with their own caring responsibilities or availing themselves of extant support in the form of care leave. As Galanti (this issue) reminds us, women suppressing their own needs in order to conform to ideal worker norms creates inherent gendered inequalities between workers in the same organization in terms of the costs of compliance.

1.5 | Centrality of care in re-entrenching the ideal worker norm

During the pandemic, the symbolic value of care work was heightened whilst the material resourcing of care-providing sectors was limited and constrained (Galanti, this issue; Allard & Whitfield, this issue). Moreover, many workplaces (predominantly office-based and education work) moved to an online, work-from-home, mode of delivery. The delivery of paid productive work and unpaid reproductive work became enmeshed in time and space within the household. Households were subsumed within organizations as disembodied online workers delivered services remotely (Al-Asfahani et al., this issue). Organizations were subsumed within households as embodied care and educational work were delivered simultaneously to online remote work (Zanhour & Sumpter, this issue). The distribution of this

unpaid work occurred through gendered household relations with women taking on the bulk of responsibility and sharing the bulk of their space (Zanhour & Sumpter, this issue). Moreover, the visibility of this work varied as women, to conform to high expectations of availability, went about the work of masking the degree of multitasking they undertook (Allard & Whitfield, this issue; Zanhour & Sumpter, this issue), and as idealized projections masked the labor of certain care workers (Galanti, this issue). Central to the gendering processes through which women took on overwork are the "neighboring concepts" of "care ethic" and "work ethic" and the role of emotions in reconfiguring and enacting an ethic of care as a work ethic (Allard & Whitfield, this issue).

1.6 | Heroism, guilt, and self-sacrifice as ideal worker characteristics through COVID

All papers within this special issue show how an internalized work ethic or sense of responsibility combined with emotions to prompt the enactment of the ideal worker. The sense of responsibility of workers became an important management resource where material tools were unavailable (see Al-Asfahani et al., this issue). Acker (2006a) highlights the ways in which corporations and states claim and defend their nonresponsibility for human and environmental health and wellbeing. The papers in this special issue show how emotions play a powerful role in the enactment of ideal worker norms in self-sacrificing ways that maintain the nonresponsibility of organizations and in some instances the state. Care work has become more central in the lives of many through and since the pandemic. Yet as Galanti correctly states, care under the current conditions has become more unsustainable, in part through unrealistic ideal worker norms and expectations placed on workers at the organizational level. This unsustainability is also partly due to the longstanding under-investments in care infrastructure, a widespread under-valuing of care across most if not all country contexts through its association with women's unpaid labor. Allard and Whitfield's contribution, which explored a pre-pandemic H&SC workforce, centered on ideas of work ethos and care ethos to understand the use of a particular emotion, guilt, to manage care workers and working carers within a context of high pressure. Analyzing the experiences and perspectives of care workers and working carers (both disproportionately made up of women) they highlight how guilt connects to ethics of work and care, and results in harder intensified work. The authors note that if care workers did not take a sacrificial approach as part of their work and care ethics, they often felt guilty, something that employers often exploited when trying to cover gaps in work schedules and secure overtime from already exhausted workers. This paper demonstrated how certain workers, particularly women, can become vulnerable to exploitation in times of crisis. Themes were echoed in Galenti's account of self-sacrificing norms amongst care workers during the pandemic. New conceptual tools through which to analyze care and understand how care is extracted and exploited from workers are identified in this special issue, through the ethics of guilt and sacrificial ideal (Allard & Whitfield, this issue; Galanti, this issue). Both are important conceptual developments in placing care more central to the debates on ideal worker norms. The double entrenchment of ideal workers and idealized workers and the allocation of responsibility (and nonresponsibility) through emotions are gendered processes that help to explain how care came to be prized yet unvalued and celebrated yet invisible throughout the pandemic.

1.7 | Resistance to the ideal worker norms and expectations through COVID

So were we naïve to inquire as to whether the pandemic would challenge the hegemony of the ideal worker? After all, Acker (2006b) herself developed her thinking about inequality regimes whilst trying to comprehend the disappointing results of change projects in which she had been involved (Acker, 2006a, p. 131). She highlights that obstacles to change are embedded and opposition is active. This is well known. All of the papers in this special issue identify forms of opposition to and resistance to ideal worker norms. Yet the enactment of resistance was complex and entailed both rejection and appropriation of the norms. The scale of resistance was often micro even amidst mobilization and collective action (Galanti, this issue). Nevertheless, there were differing fissures in which resistance could occur. In Zanhour and Sumpter's study, navigating the new reality of the pandemic and lockdowns involved jostling with resistance to the ideal worker norm. The principal space for resistance was where women had autonomy and power as small

business owners, consultants, or freelancers. For Al-Asfahani, Hebson, and Bresnen, the pre-pandemic need to be in the office or at client sites was replaced by an intensification of temporal availability from the space of the home which left little space for resistance. Yet they highlight some ways in which working from home helped women to challenge cultural barriers specific to the Kuwait context, to develop voice and to make the case for the effectiveness of flexible work. One mechanism was switching off cameras during video calls, which some associated with assertiveness and voice, but conversely it challenged the discourse of the personalized client-consultant relationship and led to misinterpretation or faulty judgments. Consequently, workers reverted "back to normal" at the behest of clients, including returning to the office. Hiding the realities of the non-professional home environment by switching off cameras during video calls may be seen as reinforcing the ideal of the disembodied worker, unencumbered by non-work responsibilities. However, this also raises interesting issues regarding non-western gender identities in the context of the inequality regimes within a Kuwaiti professional services firm, where women navigate reconciling local cultural and religious expectations regarding appearance with dress and embodiment performances more associated with the West.

The dynamics of resistance were shaped by inequality regimes and the politics of the resistors. Drawing parallels with Allard and Whitfield's findings and analysis, Galanti (this issue) positions healthcare workers in her study as simultaneously 'national heroes' and 'disposable workers'. She explores how healthcare workers resist the 'self-sacrificial' ideal worker through various means and notably collective action. Focusing on three different occupations: doctors in training, healthcare workers, and social care workers focused on their 'needs and demands as workers', seeking allyship with social movement networks and trans occupational unions. Critically they sought to challenge their association with self-sacrifice by 'framing their work as exploitation rather than vocation' (p14).

Galanti concludes that the differences in the way that the self-sacrificing ideal was negotiated in each case were not simply determined by inequality regimes but were also the outcome of political choices, shaped by the political culture of each group. In Allard and Whitfield's and Galanti's studies, a critical brake on radical industrial action mobilization was the 'burden of responsibility' toward the person being cared for. In Allard and Whitfield's study guilt led to a reluctance to push for improvements to pay and working conditions and guilt about the notion of utilizing unions. Similarly, in Galanti's study doctors in training who mobilized struggled with not conforming to the self-sacrificing ideal based on a moral commitment to their patients.

Collective action was successful in some contexts. As Galanti identified, "Politicisation of caring" (Briskin, 2012, 2013) created solidarity between care workers and led to effective forms of resistance. It is in Galanti's study that resistance to the norms and expectations of the ideal worker is most visible. The backdrop was a H&SC sector that even pre-COVID-19 was characterized by cost-containment through under-staffing, job intensification, low pay, atypical contacts, and outsourcing (p.3). The "politicisation of caring" (Briskin, 2012, 2013) created solidarity with other H&SC workers (H&SCWs) and took the form of formal letters; campaigns conducted through the media; strike action; demonstrations; broad coalitions of established associations and new networks; and rank-and-file unions. Both nurses and doctors were ultimately successful in their mobilisations for improved wages and conditions as well as in reshaping their ideal worker image. Nurses publicly rejected the label of 'hero' ("I am a professional, not a hero" p.9) and doctors reshaped the 'cultural imagination' of the doctor as not merely young or wealthy (p.7). A key feature of resistance for doctors in training and nurses was the leveraging of the exceptionalism of their profession, however challenging gender stereotypes at the same time increased class segmentation by distinguishing themselves from other occupations such as healthcare assistants. Social care workers did challenge ideal worker norms by seeking to construct a SCW identity by distinguishing themselves from volunteers and being recognized as public sector workers. They saw some success at organizational levels however their campaigns to insource services to municipalities were ultimately unsuccessful.

2 | CONCLUSION

Two elements of Joan Acker's theorizing are used and extended in this special issue. Firstly Acker's theory of gendered organizations, the home of the ideal worker, provides scholars with the tools to illuminate the taken for granted

processes and practices that reproduce gender inequalities in and beyond organizations. Secondly, Acker's (2006a) theorizing about class and the gendered substructure connects organizations and organizing practices to the means of provisioning and survival within society. In the midst of the pandemic Ozkazanc-Pan and Pullen (2021, p. 2) noticed that the emergent organization of domestic work, childbirth/care, and eldercare laid "bare the very ways in which work is dependent on gendered labor". The important empirical insights contributed to this issue carefully detail how, through the work of adapting and responding to the pandemic, organizations maintained their non-responsibility for caring work in gendered ways. And how the enactment of ideal worker norms through inequality regimes (Acker, 2006b) distributed responsibility for vital caring work along pre-existing axes of inequality. As scholars set about explaining the impact of the pandemic on social and economic life and as these fundamentals of collective human existence are reimagined in the shadow of the pandemic the papers in this issue offer key insights into the resistance of insidious ideals.

CONFLICT OF INTEREST STATEMENT

There is also no conflict of interest associated with this paper and my co-authors and I are the only authors of this manuscript.

Frederike Scholz[1,2] 🆔
Liz Oliver[3]
Jennifer Tomlinson[3]
Robert MacKenzie[4]
Jo Ingold[5]

[1]*HU University of Applied Sciences Utrecht, Utrecht, The Netherlands*
[2]*Tilburg University, Tilburg, The Netherlands*
[3]*University of Leeds, Leeds, UK*
[4]*Karlstad University, Karlstad, Sweden*
[5]*Deakin Business School, Burwood, New South Wales, Australia*

Correspondence
Frederike Scholz.
Email: frederike.scholz@hu.nl

DATA AVAILABILITY STATEMENT

I declare that this manuscript is original and that it has not been published before or is under review elsewhere.

ORCID

Frederike Scholz 🆔 https://orcid.org/0000-0003-0858-1172

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AUTHOR BIOGRAPHIES

Frederike Scholz is an associate professor of Organizational Change and Digital Transition at HU University of Applied Sciences Utrecht in the Netherlands. She is also working as an assistant professor in the Department for Human Resource Studies at Tilburg University. Her academic pursuits primarily focus on issues around diversity, inclusion, and equality in the workplace for minority groups (such as disabled people), but also the impact of digital transformation in organizations, such as the use and influence of AI technologies on healthcare professionals and the implications of AI-enabled recruitment for disabled jobseekers. Her research has been published in Human Relations and Gender, Work, and Organization, where she also sits on the Editorial Review Board.

Liz Oliver is a lecturer in Employment Law within the Work and Employment Relations Department at Leeds University Business School. Her socio-legal research explores work and employment with a particular emphasis on equalities. Most recently she has published research in the areas of parental leave litigation and disability inclusive job design.

Jennifer Tomlinson is a professor of Gender and Employment Relations and Director of the Center for Employment Relations Innovation and Change (CERIC), University of Leeds. Her research focuses on various aspects of gender and (in)equalities in organizations, occupations and labor markets, as well as social theories of gender relations. She has researched and published on topics including: gender inequalities and part-time work; flexible working time arrangements and flexible careers; women returners and occupational gender segregation; gender and ethnicity in the legal profession and working conditions in the Early Years sector through COVID. Current research includes work on EDI in Construction and the Early Years sector both in terms of workforce sustainability and gendered impact on work. She has published in journals including Human Relations, HRMJ and Work, Employment and Society, Sociology and the British Journal of Sociology on these subjects. She was an Editor of Work, Employment and Society 2010–2013 and an associate editor of Gender, Work and Organization 2012–2020.

Robert MacKenzie is a professor of Working Life Science at Karlstad University, Sweden. His work links the social and economic experiences of workers with broader patterns of socioeconomic restructuring and changes in the regulation of the employment relationship. His research has explored the role played by multiple stakeholders, contract form, technological change and occupational identity in mediating the experience of restructuring. He is also a senior editor of *New Technology, Work and Employment*.

Jo Ingold is an associate Professor of Human Resource Management at Deakin Business School, Deakin University, Melbourne. Her research covers employability and skills, employer engagement, recruitment and talent acquisition, and workplace inclusion. Jo is Editor of the academic journal *Work, Employment and Society*.