



Men Changing Nappies: Dismantling a Key Barrier to Gender-Diversifying the Early Years Workforce

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Keywords

Gender, Diversity, Early Years, Education, Workforce, Employment, Intimate Care

Introduction

Currently the number of men working in early years education in England is very low at 2% (DfE, 2022). This stubbornly resistant workforce pattern matters because it perpetuates the entrenched gender stereotype of young children's education and care as women's work. It is extraordinary to find this corner of gender stasis in a world that is supposedly in the grip of a gender revolution (National Geographic, 2017). This gender revolution does not appear to have impacted on, or even dented, the gendered nature of the early years workforce. This is all the more remarkable because early years staffing shortages have now reached crisis point (Lawler, 2021) in England (the country where the authors reside and where they have carried out the research referred to in this paper). The small minority of men that do take up work in this sector often work interchangeably with their female counterparts, adopting a range of roles and responsibilities including reading, rough and tumble, comforting and food preparation. The task of intimate care however, or more specifically 'nappy changing', remains an area of tension within men's presence in early years settings, with parents or carers sometimes requesting that male practitioners do not change their child's nappy or nursery managers removing men from this role. Although the Sex Discrimination and Equalities Act 2010 stipulates that no employee should be discriminated against because of their sex, a two-year study into the recruitment and support of men in early years education in England (Name of Project) shows that discriminatory practices around intimate care are very much alive.

An article published in *Nursery World* (Morton, 2019) highlights some of these tensions. In the article, MITEY (Men in the Early Years) – a strong advocate for increasing the number of men working in this sector – argues that 'employers give in to parents demands for them not to be involved in intimate caregiving' (Morton, 2019). In support of MITEY's work, Susie Owen, deputy director of early years at the Department for Education adds that 'parents cannot pick and choose who undertakes different activities based on whether they are male or female' (Safe Schools Alliance, 2019); she highlights the importance of gently reminding parents about centre policies and safeguarding procedures. The points raised in the *Nursery World* article were met with 'serious concerns' from the Safe School Alliance UK (2019), who argued that the viewpoints shared by MITEY and Owen are 'extremely detrimental to the parent-practitioner relationship' adding, 'it is paramount that parents are

comfortable with those caring for their children. Their wishes must be respected to establish trust'. Safe School Alliance UK concluded that any male practitioner who did not understand parents' objections was simply not cut out to work in this sector (Safe Schools Alliance UK, 2019).

Intimate care by male practitioners in early years education is clearly a site of tension. However, many parents appear to support a more diverse workforce. Surveys carried out by the Department for Education suggest that a large majority of parents (79%) are in favour of men working in early years education with 86% considering that male practitioners were involved in the same tasks and responsibilities as their female colleagues (Author, date). In spite of this, male practitioners 'work under a cloud of suspicion' (Sargent, 2004; see also Jones and Aubrey, 2019) although there are few studies which examine closely how this suspicion might be configured. Sargent (2004) argues that there is a particular focus around children sitting on laps with 'women's laps as places of love and men's laps as places of danger' (Sargent, 2005; 179). It may be that parents view male practitioners as potential sexual abusers; as potentially more violent or aggressive towards children, or as simply less caring. Further research in this field is needed. What is clear however is that male practitioners feel they are being watched by others through the lens of abuse in their place of work (Authors; see also Sargent, 2004) and this can lead practitioners to re-evaluate their roles and positions in early years education (Sargent, 2004; Bhana & Moosa; 2016). Furthermore, removing practitioners from certain tasks such as nappy-changing or intimate care, is sometimes positioned as a way to protect men from possible accusations of sexual abuse (Sullivan et al., 2021; see also Buch Leander et al., 2019).

In contemporary debates on this topic, parents' concerns and the building of trusting relationships are pitted against gender equality, the rights of early years practitioners and the need for legally sound, non-discriminatory practices. For many early years settings, which are predominantly run by private companies, heavily dependent on parent satisfaction for their survival and struggling with enormous social and financial pressures, this issue has become a minefield - with some settings veering away from the employment of male practitioners altogether.

As scholars in this field of study, our 'position' is that people of all sexes and genders should be involved in all aspects of caregiving with young children. However, we recognise that this is complex terrain with much at stake for all sides. In this paper, we wish to step back a little from these positions of 'for' or 'against' and instead to focus on the ways in which some early years settings are managing this issue. We wish to identify not only current practices within early years settings but also some of the understandings which favour one approach over another, and we hope to unpick some of the tensions around intimate care and gendered workforces. We ask what can be learnt from these practices and what is the best way to 'move forward', defined in this paper as moving towards a de-

gendered early years education workforce in which practices and relationships are not marked by gender, gender systems or values. We begin by outlining the (Name) study, which supports the discussions presented in this paper.

The (Name of Project) Study

(Name of Project), standing for '(Name of Project) is the title give to a project undertaken by (Name) University and the (Organisation) between 2018 and 2021 on the recruitment, support and retention of men in early years education. The methodology for the study consisted of four elements. There was a three day Knowledge Exchange workshop with Norwegian early years practitioners and academics from the (Name of University) where the aim was to develop a network of partners and to share good practice in the recruitment and support of male teachers (Norway being the leader in this area, (Peeters et al., 2015)). Following on from the Norwegian visit, we conducted eight case studies of early years settings, based in four areas which had shown a keen interest in this topic (Southampton/Brighton, Bristol, London, and the Bradford/Yorkshire area). The case studies comprised a two- to three-day visit by the researchers to the setting, to conduct observations of staff/child interactions and undertake interviews and focus groups with managers and staff, both male and female. The team also conducted interviews with 15 individuals involved directly in the early years profession or in recruiting and training such as early years consultants, teacher trainers, recruitment officers, careers personnel in schools, colleges and recruitment agencies, and representatives from key early years organisations. For the final part of the study, we conducted a survey of early childhood education managers and staff to gain a snapshot of current numbers of male employees in the sector and obtain relevant demographic information about them.

There were 3 stages of data analysis. Survey items were initially mapped onto the project's broad research questions to ensure a consistency of focus within the project's scope of inquiry. Analysis was undertaken through Qualtrix and centred around two broad questions: how many men are employed and who are they? The qualitative data was analysed using NVivo software following the model of thematic analysis promoted by Braun and Clarke (2006). Initially, a set of broad analytic themes derived from the project's key research questions were identified (e.g Mens Routes into EYs, Recruitment, Support, Relationships, Roles). In the first instance, the data was coded and thereafter organised into themes and sub-themes from which the analysis was undertaken. The analysed data was then linked back to the main analytic themes in order to establish how the data responded to the research questions.

Following the production of a reduced set of quantitative and qualitative findings the research team undertook an individual revisiting of the project's main research questions and each produced a set of four overarching key messages from both the analyses. This created an analytic rigour and collaborative process for checking and agreement of each team member's interpretations of the data. This was then discussed in a collaborative negotiated manner by the four team members and led to our final overview of integrated findings in the form of four key messages (Author et al., 2020).

The project was submitted for ethical approval by Lancaster University Ethics Committee. In relation to the case studies, families and members of staff were provided with information about the project, and written consent for taking part in the interviews, or being present during observations was obtained. We also sought to establish, as far as possible, informed consent from the children, following the principles outlined in BERA ethical guidelines that are based on the United Nations Convention on the Rights of the Child. We worked with practitioners to deliver a suitable, simple explanation for our presence and we allowed opportunities for children to express concerns, using the idea of 'continuing consent' (Author, 2011). We also give significant consideration to the interviews with male practitioners and how to sensitively facilitate conversations around experiences of suspicion or potential allegations of sexual abuse. We ensured that such conversations were initiated by the interviewees and that resources were made available to support practitioners if needed.

1. Theoretical Framing/Background Literature

Gender Balance and Gender-Flexibility

There are a number of debates supporting the campaign to recruit more men into early years education. A focus on 'gender balance' in which equal numbers of men and women care for young children is often viewed as a means to establishing a more gender egalitarian society. Aligned with this argument is the understanding that men can act as male role models (Martino, 2008), Furthermore, men in early years are often considered to have a positive influence on the behaviour and achievement of boys, or on children whose fathers may be 'absent' (Parkin, 2009, Cushman, 2008), providing more traditionally masculine forms of play such as 'rough and tumble' or 'risky play'. This gender binary is a popular, easy to use tool for making comparisons between girls and boys or claims about the benefits that mixed gender workforces can bring. However, we recognise that the notion of 'gender balance' has a re-gendering effect (Martino & Rezai Rashti, 2012) in that it views men and women as complementary, with each gender offering 'essential' masculine and feminine qualities, located in specific male/female bodies. Thus, it reproduces the same gender stereotypes

that we wish to move away from; to deconstruct or simply 'undo'. Our discussions in this paper are supported by arguments of 'undoing' gender' (Butler, 2004) or moving beyond the gender binary.

Although within contemporary debates, sex is often viewed as a fixed corporeal base onto which gender is inscribed, our theoretical framing approaches both gender and sex as 'becomings' or activities; constructions with a purpose (Butler, 2004). They are neither fixed nor essential, and offer 'shades of difference and similarity much more than clear opposites' (Hird, 2004;25). Nonetheless, we acknowledge that although we wish to move beyond the sex/gender binary, we draw here on the category 'men'. We consider that a greater involvement of 'men' in care and education of young children can support a transformation of gender relations (Connell, 1995; Williams, 1995; Murray, 1996, King, 1998; Drudy et al., 2005; Author, date; author, date). We recognise, however, as Mohandas highlights, the recruitment of men cannot be the only narrative within the gender diversification of the early years workforce (Mohandas, 2022).

To manage these tensions, we move away from the gender of practitioner towards gendered practices. We draw on the term 'gender-flexibility' (Author, date) which locates the male early years practitioner as a chameleon-figure who can change their role or character according to the child's needs (Author, date). It enables staff to avoid restricted gender roles and draw on a range of skills needed to work with young children including reading, 'rough and tumble' comforting and intimate care. Gender emerges here as a 'free floating artifice' which can be performed by men and women in different ways (Butler, 1990; 6). The chameleon figure strongly aligns with EY pedagogy and values. It means that early years practitioners can adapt to the needs of the individual child and offer personalised learning. The variety inherent in early years work is also recognised as key motivation for men that taken up a career in this sector (Lewis, 2002).

Research has shown however that despite examples of gender-flexibility in early years settings in England, gender stereotypes slip into everyday practices (Authors, date). Findings from the (Name of Project) study showed that significantly more men than women engaged in 'rough and tumble' (Authors, date; see also Cremers, Krabel and Calbach 2010) and were less involved in record-keeping (Borve, 2017) or learning assessments (Authors, date) . Men may be given heavy lifting or discipline roles (Mallozi & Galman, 2014) and extensive research has shown how male practitioners are often excluded from intimate care responsibilities (Authors, Sak et al., 2019; Tufan 2018). Few studies have focused on how setting manage this area of care. One exception to this is a study by Swedish researchers (Hedlin & Aberg, 2019) who discuss 'dialogue-based approaches' to managing intimate care in pre-schools. This involved active 'parent care work' by staff and gender sensitivity activities to

support discussions around gender norms in everyday situations. We observed elements of gender sensitivity in the findings of our study which we outline in the following section.

(Name of Project) Data

In the following section, we focus on a number of themes which have emerged from the (Name of Project) study in relation to intimate care and the presence of male practitioners in early years settings. We examine the ways in which settings respond to parents' concerns around men and nappy changing. We also explore some of the discourses and practices, which not only legitimise the removing of men from intimate care responsibilities but also make this request possible. We draw on extracts from interviews with managers of early years settings, and male and female practitioners to support our discussion.

Refusing Parents' Requests: "If you don't want men to change your child's nappy then this isn't the nursery for you"

The early years settings from the (Name of Project) study adopted a range of positions when managing intimate care and the role of male practitioners. Managers often considered that although most parents and carers were 'happy' or accepting of male practitioners to undertake nappy changing, they acknowledged that there was a small number of parents that either questioned or disagreed with this. Parents sometimes expressed their concerns in the form of a question, 'Who will change my child's nappy?' or as a request, 'I do not want a male practitioner to change my child's nappy'. These concerns would often be voiced to either female practitioners or managers of settings.

Early years settings responded in different ways. In some cases, managers informed parents that nappies would be changed by both male and female practitioners; if parents were not comfortable with this, it was suggested they look for an alternative setting. Below is an example of this:

Manager: *I got a male teacher in September and one of my parents said, oh I don't want the male teacher to change my child. And I had to have that conversation and say, all of my staff are DBS checked. I trust all of my staff in the building, we've all had the same training. There is no difference in our practice between male and female teachers, so my male teacher if needed during the routine of the day will change your child's nappy. And then it's down to the parents to decide whether you're going to stay at my nursery or you're going to leave my nursery, because we are an inclusive nursery and we're not going to you know treat our male or female teachers differently because of their sex...*

For managers of early years settings, such requests were common and staff drew on a range of strategies to navigate these including DBS checking (Disclosure and Barring Service which conducts criminal record checks on individuals for employers) the notion of trusting relationships between managers and practitioners, and gender equality. Although the overall position was that 'men do intimate care here', the manager created a position of defence within a framework of accountability, trust and equality and expected or hoped that this would be enough to eliminate parents' concerns.

It is important to consider what difference a position of defence makes to parents. For example, the manager made reference to DBS checking; DBS is a legal (and symbolic) tool signifying that individuals (in this case, both male and female practitioners) are 'safe' on an institutional level beyond the nursery. It means that accountability is in place through formally recognised institutions, such as the government or the police. However, it is unclear what value DBS holds for parents when considering who cares for their children. The manager also emphasises relationships of trust through ideas such as 'my staff' 'my male teacher', 'my nursery'; but parents – especially those new to the setting - are often located outside of these relationships. In their final strategy, the manager drew on the notion of gender equality; male and female practitioners are "the same" suggesting that male and female practitioners are interchangeable and engage in the same tasks and roles. Indeed, the findings of our study showed that male and female practitioners often (but not always) engaged in the same task and in many settings worked interchangeably. However, it is also clear that parents did not express concerns around female practitioners and nappy changing; parents did not view male and female practitioners as *exactly* "the same".

Building Trust: "Let's work with the parent"

Our data shows that managers anticipated questions or concerns from parents around the presence of male practitioners and intimate care. Although early years teams were well-rehearsed in their responses, their 'position of defence' often came on the back heel – once parents had expressed concerns or made their request. This meant that discussions on gender and the early years workforce were often marked and framed by sentiments of suspicion or danger. However, some settings adopted a slightly different approach. Sometimes managers introduced discussions around gender and the workforce as part of their ethos on promoting diversity. The manager of this setting describes their approach below:

Manager: *We have recently added into our working with parents policy the fact that if you want to come and be part of this community, it's important that you accept the professionalism and the way that this community runs. Part of that is there is no*

gender difference between roles, therefore men will change nappies. Sometimes the family might come in and say, well I really can't handle that and, we have the inclusion lead who would work with that family to hopefully build up their trust and confidence in the way that we work so that that became acceptable to them. ...[...]So we talk to them and explain...we also have a commitment to actually have integrity to the values of the organisation and actually I believe that overcoming some of those things is about opening up rather than closing down..

Through meetings with parents or through centre policies, this setting sought to make parents aware that male and female practitioners would undertake care in their setting. They located gender diversity within a framework of early years professionalism and community practice. They created a supportive platform to work with parents on gender issues through their nominated 'inclusion lead'. This led to a 'gender diversity contract' between families and settings; a commitment to move towards new spaces of gender and kind of 'opening up' rather than closing down.

We saw further examples of settings 'working with parents', particularly where families requested a change of 'key worker'. Key workers take responsibility for the care of a specific group of children and intimate care is part of this. In some settings, parents requested that their child's male key worker be replaced with a female practitioner, which was viewed, in some cases, as a way to foster rather than force positive relationships between staff and parents. A male practitioner reflects on this practice in the following extract

Male Practitioner: *That's going to be a helluva job for me if I'm kind of forced on them as their child's keyworker and I've got to initiate and then maintain that relationship for 12 months starting off like that. I don't think that's a very good idea at all. But then again, I wouldn't be happy if the parents said over the phone, oh I don't want that man to be my child's keyworker. He's a bloke. That's too weird. And the office just say, oh we'll find someone else. I want a conversation. I want to introduce myself and explain why I think I'll actually do a really good job of being their child's keyworker.....*

In the above extract, the practitioner expresses his concerns about forcing relationships between families and staff. He also highlights the importance of taking part in any decision-making in relation to key worker roles. For this member of staff, meeting with parents represented an opportunity to change perceptions not only with regard to his skills as an early years practitioner but also more generally to engage in discussions about mixed gender workforces. The meeting between male practitioners and families was viewed as an opportunity for change.

Nonetheless, such attempts to foster positive relationships between families and male practitioners can serve to locate the 'problem of men in early years' as a problem *for* men in early years. Alongside

managers, male practitioners can prepare their 'defence' but this may result in personalising the tensions around men in early years education. The problem of men in early years and intimate care may become reduced to individual male practitioners and managers.

Men can't change nappies on religious grounds

Our data shows that some settings report families having requested that male practitioners not change a child's nappy because it was against their religion. In some cases, this was considered a legitimate request by families and early years staff. However, it was also considered acceptable to question this and seek further guidance. In one such case, staff consulted with a local Imam who advised that intimate care of children by male practitioners was indeed acceptable until the age of puberty; thus, the families' concerns in this setting were resolved. In some settings however, such requests were not challenged, and removing intimate care from male practitioners' responsibilities was considered acceptable and appropriate. Below is an example of this:

Researcher: *Have you worked in a nursery where men couldn't change nappies?*

Manager: *Yeah but that was for a religious reason. I think [the parent] was Muslim or something like that and the culture, the men don't, so it was like men in general, that one was different so yeah.*

Researcher: *Do you think it's acceptable in that case?*

Manager: *I don't know, cos it's like you're dismissing their religion so I don't know how you would. Because I have a crucifix and my sons wear a crucifix so they are exempt from the no chain rule from school. ..they're exempt from it because of religious reasons so I don't know if you could technically say that...*

In the example above, the request for a change in practitioner (male to female) based on religious grounds refers to all men as a category, and not as individual practitioners. Removing male practitioners on religious grounds was considered an 'impersonal' or depersonalised (and therefore legitimate) discriminatory practice. Removing male practitioners for other reasons (i.e parents do not trust men with their children), it seems, would be personal – targeted at a specific practitioner - and therefore unacceptable.

However, in the (Name of Project) study, there were no examples of families requesting a change of practitioner because they did not like that particular member of staff. Indeed, our data showed that

families often requested a change in staff without knowing individual male practitioners; either they/their child were new to the setting or the male practitioner had recently begun to work in the nursery. The families' concerns around intimate care were directed towards male practitioners as a gendered group ("men"), not as individuals. This was an impersonal, depersonalised and very much gendered practice. This would suggest therefore that religious and non-religious motives for removing male practitioners from intimate care function in very similar ways.

Missing Strategies: I think we wouldn't discriminate but I'm not sure...

The settings that took part in the (Name of Project) study were supportive of gender diversity in the early years workforce. All of the settings employed male practitioners (albeit a small number) and most had contact with individuals or groups that supported the men in early years movement. The managers of settings were clear about their responses to parents that expressed concerns around nappy changing, as outlined in the discussion above. For the practitioners however, intimate care and male practitioners emerged as a grey area. Although they too were supportive of gender diverse workforces, they did not emit the same confidence or certainty around policies and practices, as the following participant indicates:

Female Practitioner: *I don't know if we'd do that..[remove male practitioners from nappy changing]. I think we'd probably sort of just... I don't think we would because then that's actually discriminating them isn't it completely. So, I don't think we would, no. I don't think so...*

The practitioner's response above is marked by uncertainty. They 'think' that male practitioners would not be removed from intimate care duties; they assume that this would be discriminatory and 'wrong'. However, the practitioner is unsure about this and they do not make any reference to setting policies or discussions on this topic between staff. Practitioners commonly responded with uncertainty when discussing tensions around intimate care, or they indicated that managers would be responsible for dealing with concerns of this nature. It was felt that such issues were not within the remit of the practitioner role, but instead were considered to be a 'management issue'.

However, managers often assumed that practitioners would know about policies or practices in relation to intimate care, especially if the setting as a whole promoted gender diversity. This can be observed in the following extract from a nursery manager:

Manager: *When I first started working in early years I had one parent withdraw their child from the nursery ..[...] and two parents refused to have me change their child's nappies, and the nursery went along with it. I think, I would hope my practitioners do realise that if I was put in the same position we would handle it better so that you know we would be talking to parents about who we're employing and why and promoting the positive benefits of, you know having a diverse workforce...*

In the extract above, the manager describes his own experiences of discrimination in a nursery setting. He draws on this experience as a platform to improve the support for gender diversity in early years and he lists how he, and the setting he manages, would do this (talking to parents, promoting diversity). Managers may sometimes assume that if they embody and 'do' diversity in their setting then practitioners will be empowered to do the same (a kind of leading by example). In this sense, gender sensitivity is viewed as 'passed on' or as automatic. It is assumed that practitioners will understand issues around gender and will know what to do or what to say, for example when families express concerns around nappy changing. However, for many practitioners there was uncertainty around specific policies or practices; how these should be talked about or what words should be used; what can and cannot be said. Furthermore, for male and female practitioners that develop strong and close working relationships, discussions around intimate care and gender may feel awkward or conflictive.

Silences around nappy changing

The gaps mentioned above form part of the many silences around intimate care and male practitioners in early years education. Managers generally chose not to discuss gender and roles with parents or staff until a concern was expressed. There was often an implicit understanding that men and women undertook the same roles and anything contrary to this would be discriminatory; it would therefore be considered too obvious or too awkward to discuss. Furthermore, by not engaging in discussions around roles, settings hoped to avoid drawing attention to this topic and inviting conflict. A nursery manager gives an example below of how he tried to manage these tensions:

Manager: *I had a bit of an argument with my boss over [nappy changing] because they were sort of saying, well say that we can't guarantee that they won't be changed by a man. And I was saying, well actually this sounds like we're trying to avoid a conflict and I don't think we should be. I think we actually just need to be taking on the fact that we're an equal opportunities employer and that men do the same tasks as women and that they will be changed by a man because we trust the men in the same way that we trust the women because our safeguarding processes are robust. Not playing around with the semantics of it...*

How to address gender and nappy changing is a site of tension for many settings. The ‘boss’ in this case preferred to draw attention away from male practitioners, suggesting that they may be involved on occasions. Their approach indirectly confirms parents’ perceptions of male practitioners as potentially dangerous or risky. Equally they are suggesting that because of the way the setting is staffed, sometimes children may have to be changed by men and therefore engage with this risk. It is a confusing and contradictory message to parents. The manager in contrast suggests an approach whereby settings engage ‘head on’ with the conflict that nappy changing roles may bring.

Discussion

This paper has examined the ways in which some settings are managing tensions around the undertaking of intimate care by male early years practitioners. The findings from our study show that requesting a change of practitioner on the basis of gender was viewed by both parents and settings as a legitimate request. Settings responded to such requests in different ways; sometimes providing a ‘defence’ as to why men were employed in the setting and should undertake this work. Sometimes settings worked with parents in order to build up trust and tried to embed this in their policies and ethos. In contrast, some settings removed male practitioners from intimate care as their default position. Such cases had a negative impact on male practitioners in terms of well-being and mental health, with male staff eventually moving on to other settings, or leaving the early years sector altogether.

For the settings that took part in our study, gender diversity was clearly on the early years agenda and often at the forefront of managers’ and practitioners’ minds. In spite of this, approaches to gender diversity, and intimate care practices, were fragile or fragmented with ‘nappy changing’ located as a stand-alone issue, firmly located within male bodies. Most notably, settings and practitioners lacked a script for how to engage with parents and each other on this issue: of what to say, how to say it (which words to use) and when. In sum, our findings show that there are three important (and interlinked) areas to consider in managing tensions around gender and intimate care, which include *focus, frame* and *script*.

Focus

In the first instance, we suggest a *re-focus*. Some settings are currently working hard to increase the number of male practitioners in their settings and whilst this is important, without wider cultural changes, new employees will be difficult to retain. We suggest zooming out and allowing for wider

range of view to include a focus on gendered practices of care, and specifically strategies to de-gender early years care.

What might such practices look like? Perhaps they would involve systematically addressing gender from the outset; building this into policies, everyday activities and also the materials used by the settings. It might include using images of male practitioners in caring roles such as changing nappies or wiping snotty noses. Settings may also include images where gender is ambiguous. Where it is not possible to use photographs (for example in the case of intimate care), drawings may be used such as the one below:



A shift in focus from male (and female) bodies to different ways of doing care allows settings to draw attention away from sexed and gendered bodies and to explore new forms of doing care.

Frame

The practices outlined above also help to *frame* discussions around gender and care with families, and to provide a more robust platform on which these can take place. It does not mean that concerns around men undertaking intimate care should not be voiced or heard, or that settings should not ‘work with parents’, as some of the settings had selected to do so in our study. Instead, it creates the best conditions in which these concerns or questions may be laid out. It indicates to settings and families that gender will not be one or two conversations between one of two families but instead will be

open, ongoing and run through everyday practices. It represents, as one of our participants described, an 'opening up' rather a 'closing down' of discussions around gender and care workforces.

Script

De-gendering care would also entail a whole setting approach in which early years teams - practitioners of all genders – develop 'scripts' to discuss gender and intimate care in terms of what should be said, how, through which language and when. Currently, this issue 'belongs to' male practitioners and managers. Our data shows that female practitioners sometimes felt awkward and uncomfortable in addressing parents' concerns, particularly when male and female colleagues had developed strong working relationships. Staff often wished to avoid 'drawing attention' to the issue. However, lack of critical discussion around gender and intimate care means that these tensions drift towards male bodies as a 'natural fit'. Through the notion of *framing* we argue that settings have an opportunity to reshape this discussion by actively drawing attention to the de-gendering of care. Ultimately, settings must try to reframe the concept of care by engaging in debates on who gets to care.

Conclusion

The need for a setting to have a clear policy on intimate care, based on the 'focus', 'framing' and 'script' points made above is part of the broader aim to promote gender diversity. A setting's policy should be 'owned' by all staff and parents through: staff induction; formal and informal staff training on gender and safeguarding; responsiveness to discussing gender issues when and as they arise; through formal and informal rapport-building activities with parents at the outset of the parent/setting relationship and ongoing.

We bring the reader back to our opening debate where we juxtaposed the comment from Safe School Alliance UK about the need for EY staff to understand parental perspectives on intimate care and the comment in the Nursery World article about EY settings who should stick firmly to their anti-discrimination policies and not 'give in' to parental demands which perpetuate a gender inequality in the division of labour.

This paper argues for the value of having both an anti-discriminatory policy on intimate care at the same time as a strong inclusion policy that takes all parental worries seriously as the basis for parental trust of men's competence and professionalism. It is not enough to simply advocate that there should be a policy in every ECEC setting. It is not enough for a manager or practitioner to respond to parental worry by simply pointing to 'our policy'. Instead, as Hedlin and Aberg (2019) advocate, it is necessary to talk it through to create a mutual understanding about why it matters that men and women should

be equally involved in nappy changing. So it is necessary for a setting to have the relevant policy in place but also to create and harness discussion opportunities between parents and EY staff. The parent who is turned away by a manager insisting on their anti-discrimination policy, with no opportunity for discussion, is unlikely to change their views. The parent who gradually builds trust in the male practitioner, after initial prejudice, has managed to break down a significant gender stereotype.

The degendering of early years education, and specifically the themes outlined in this paper, represent a major diversity challenge. Early years settings cannot address this issue alone or as individual companies, each doing their own thing. In order to effectuate change, key strategies on how to degender the early years workforce must be developed, implemented and supported at a national level with the input of educational institutes and organisations. We also need to consider how the considerable challenges currently facing the early years sector in the UK, including poor working conditions, staff shortages, underfunding and increased regulatory practices, provide further hindrances to the broad aim of de-gendering early years education. The UK Government has indicated that increasing the number of men in early years education is a key priority (DfE, 2017). However targeted efforts have yet to emerge (Authors, date). Whilst the DfE funded the MITEY Guide to Communicating with Parents about Male Staff, (MITEY, 2020) there has been no other government funding, training, or support on how to handle this issue and it is not covered in Ofsted inspections.

This paper has addressed a very specific element of EY practice which might seem somewhat trivial to some, but which we believe has been sidelined and silenced. We consider it to be of utmost importance. Indeed, we conclude that complexities and sensitivities concerning the allocation of male practitioners to intimate care are operating as a 'key barrier', as our title suggests, in the development of a gender diverse workforce for the early years.

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Data Availability Statement

The quantitative data that support the findings of this study are available upon request from the corresponding author.

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