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7 “Nice, Threat-Free, and Child-Friendly”*

Gendered Discourses in the Speech and Language Therapy Profession

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Introduction and Theoretical Background

Occupational Sex Segregation

“Occupational sex segregation” (Williams, 1993), the term used to describe the division (both actual and perceived) of jobs/work tasks into “men’s work” and “women’s work” (ibid.) has been problematised by social scientists as a contributory factor in gender inequality in the workplace. Labour Force Surveys carried out by the Office for National Statistics in the UK show that men and women are concentrated in different industry sectors: high concentrations of men are employed as “managers and senior officials” and in the “skilled trade occupations” (for example, mechanics, electricians, and plumbers), while more women are found in the “administrative and secretarial occupations” and “personal service occupations” (for example, nursery nurses, travel agents, and hairdressers) (ONS, 2018).

Two main accounts for how occupations become divided along gender lines have been proposed: structural forces and sociological accounts. In terms of structural forces, industrialisation has had a profound impact on the workforce: it has set up the conditions for women to be paid less, by subdividing jobs into tasks that require more technical skill to use new technologies (tasks typically allocated to men) and more routine and repetitive tasks (tasks typically allocated to women). As regards sociological accounts, feminist sociologists have critiqued the many ways in which tasks allocated to men are given higher social importance (Ortner, 1974), while women’s work has been consistently devalued. They have also considered the impact of gender bias or stereotypes, that is, “commonly accepted beliefs about the activities, roles, physical attributes, and personality traits that distinguish girls and women from boys and men” (Berndt & Heller, 1986, p. 889) on people’s occupation choices. Gender bias reinforces the constraints on

women and men as to what kind of work is considered appropriate for them (Francis, 2002). “Gender typing” operates from the early years and through primary and secondary school, where 14–16-year-old girls were found to still opt for creative or “caring” professions, while 14–16-year-old boys chose professions involving scientific, technical, or business-related skills (Berndt & Heller, 1986). Such choices are inextricably bound with the construction of identity, in particular gender identity; young people (especially boys) are reluctant to violate what are perceived as gender-appropriate professional choices by considering a career deemed untypical (Francis, 2002; Pickering, 1997; Gottfredson & Lapan, 1997).

Furthermore, the issue of occupational sex segregation is political and has significant implications for men and women in material ways. Studies have linked occupational sex segregation to women earning less than men, as they tend to be concentrated in low-status and low-pay “female” jobs (Williams, 1993; Bradley, 1993). Put differently, “the sex composition of jobs affects their wage level, so that jobs filled largely by men pay more than comparable jobs filled largely by women” (England & Herbert, 1993, p. 28); in fact, it has been suggested that for every 10% increase in men in an occupation, wages are 1.3% higher (House of Commons, 2005). Further, there is evidence that men in so-called female-dominated professions can experience a “glass escalator effect” (Williams, 1992, p. 256), that is, “they face invisible pressures to move up in their professions”. It has also been argued that, like women in male-dominated professions, men are subject to a “revolving door” that pushes them out of the so-called female occupation into male-dominated fields (Jacobs, 1993). We will return to these issues at the end of the chapter.

Gendered Discourses

In this chapter, we begin with Bradley’s (1993) point that structural forces typically merge with discourses of femininity and masculinity to render occupations gendered. We are particularly interested in the possibilities for discourse analysis to contribute to our understanding of gendered professions, and specifically how discourses around femininities and masculinities shape (support, contest, negotiate, change) people’s perceptions of these professions. Kress (1985, pp. 6–7) defines discourse as

systematically-organised sets of statements which give expression to the meanings and values of an institution by providing a set of possible statements about a given area, and organising and giving

structure to the manner in which a particular topic, object, process is to be talked about.

Over the past few decades, there has been a substantial body of work by both discourse researchers more generally and feminist linguists, focusing on the discursive construction of gender and gender identities. Despite a range of (to varying degrees different) discourse analytic methods, these researchers generally adopt the view that

Discourses represent and constitute a web of social themes, voices, assumptions, explanations, and practices—in short, ways of seeing the world, manifested in texts.

Discourses create specific subject positions for people and groups, and they also constitute and re-constitute ideologies which in turn shape a whole range of broader social practices.

Discourses are context-situated; recognisable; ideological; supporting, competing or conflicting; and meaningful in relation to other discourses.

(Litosseliti, 2006, p. 67)

For our purposes here, gendered discourses—which may be drawn on by people irrespectively of a speaker's sex (although sometimes *gender* and *sex* are misleadingly conflated)—may “represent, (re)constitute, maintain, and challenge gendered social practices” (Litosseliti, 2006, p. 67). Examples include a “compulsory heterosexuality discourse” (Rich, 1980), where the idea of heterosexuality as the norm becomes socially prescriptive, and a “gender difference discourse” (Litosseliti, 2006), which may reinforce or contest the distinction of “male” and “female” professions, or the idea that certain skills (e.g., caring, communication, people skills) are more “natural” to women. Wetherell, Stiven, and Potter's (1987) analysis of the views of final-year university students on employment opportunities for women has aptly illustrated how two discourses often co-occur in the same stretch of talk: “equal opportunities” constituted a form of talk endorsing egalitarianism and freedom of choice for the individual, while a “practical considerations” discourse drew upon distinct differences between men and women based upon “a biological inevitability or the ‘nature of things’” (p. 62), within which women become a risk as an employee by their increased responsibility for childcare. In effect, these discourses served to maintain a *status quo* within the workplace which often disadvantaged female employees.

We argue that the notion of gendered discourses is both broader and more flexible than the notion of gender stereotypes (introduced earlier) in two ways: it allows us to consider how language users sometimes maintain and other times resist or contest any given gender assumptions; and it

allows us to focus on the dynamics of the specific contexts or communities of practice where gender is enacted.

Gendered discourses position women and men in certain ways, and at the same time, people take up particular gendered subject positions that constitute gender more widely. Their examination involves asking what identities are created as a result of different positioning through different discourses, in different contexts; and what gender inequalities are created or maintained as a result. . . . Identity formation is an active process of affiliation and differentiation, and also involves attribution of identities by others. People *produce* or *construct* their multiple gendered selves (femininities, masculinities) through choices from different discourses that are available and appropriate in their social contexts; they *become* gendered, or *do* gender through discourse. This is a dynamic, ongoing process of negotiation and restatement, and one which is influenced by the enabling and constraining potential of doing gender appropriately.

(Litosseliti, 2006, p. 67)

When men enter non-traditional or “female” occupations, doing gender appropriately becomes crucial, and a number of studies have shown that men in those contexts sometimes draw on a “compulsory heterosexuality discourse” or “hegemonic masculinity” (Connell, 1995) to maintain and even exaggerate a masculine identity. Cross and Bagilhole (2002) discuss various discursive strategies employed by men working in occupational therapy, nursery nursing, and social work, aimed at minimising a perceived threat to their masculinity (see also Simpson, 2004). Francis and Skelton (2001) also describe how some male teachers can use homophobic and/or misogynistic discourse to position themselves as “one of the lads”, in their effort to keep discipline in the classroom.

It has therefore been argued that it may be easier for women to push into men’s jobs than men into women’s, as it is typically less stigmatising for women to behave in “masculine” ways than for men to behave in “feminine” ways (Simpson, 2004; Muldoon & Reilly, 2003; Henson & Rogers, 2001). Bradley (1993) maintains that while compromised femininity is still a possible female identity in the context of “male” jobs, the perceived threat to masculinity by entering a “female” profession is much greater. She further juxtaposes the gains for women entering “male” jobs (higher salaries, expanded opportunities, higher status, and authority) to the lower status, lower pay, and masculine identity threat likely to be associated with men entering “female” jobs.

The Case of Speech and Language Therapy

There is a persistent and significant gender imbalance in the Speech and Language Therapy (SLT) workforce in the UK. Recent figures

show only 3.2% of the UK SLT workforce being male (HCPC, 2019), while earlier studies reported this number to be 2.5% (McKinson, 2007) and 1.9% (Sheridan, 1999). Similar statistics can be found in Australia, where 3% of SLPs¹ are male (Speech Pathology Australia, 2012), and the USA, where male SLPs account for 4.1% of the workforce (American Speech-Language-Hearing Association, 2010). What is also striking is that the majority of SLT clients, both in paediatric and adult settings, are male. This raises the question of whether a heavily female workforce is always best placed to relate to the concerns of male groups, for example, young offenders or teenage boys, who often find it hard to admit to having difficulties and who arguably would also benefit from male role models. There is also concern more broadly about current images of the profession depicting limited professional demographics and client groups (e.g., paediatrics) (Byrne, 2018).

Despite the extreme occupational segregation in SLT/SLP, there is little research available in this area. Some studies have looked at the reasons behind people's career choices. A desire to help others has been cited as a key reason for people's choice of a career in teaching, social work, occupational therapy, physiotherapy, as well as speech and language therapy (Byrne, 2008). Both men and women state that they chose a career in SLT primarily out of a desire to help others and for the perceived job satisfaction (Whitehouse, Hird, & Cocks, 2007; Boyd & Hewlett, 2001; McAllister & Neve, 2005). Patterson and Woodward's (1996) study, however, suggested that there are some gender differences in that salary and career advancement are cited as more important for men, while opportunities to help and work with others appear to be more important for women. These factors can affect people's decision to enter a profession, as well as their decision to leave a profession (for example, if salary is not seen to be satisfactory; see also Greenwood, Wright, & Bithell, 2006).

Research into the reasons why *men* in particular become or do not become SLTs is scarce, but there is some evidence that boys and men have limited awareness of this particular profession (Byrne, 2010; McKinson, 2007) and that, more generally, little or incorrect information is offered about SLT to students by careers advisors (McAllister & Neve, 2005; Boyd & Hewlett, 2001). Another issue that remains unexplored is the anecdotal evidence in SLT workplaces that male SLTs are correlated with certain client groups, particularly adults with neurological difficulties. This has been observed in nursing, where despite similar motivations to enter nursing, male and female nurses are represented in different proportions according to their chosen specialism: midwifery, paediatric nursing, and care of the elderly are typically undertaken by females, whereas learning disability and psychiatric or mental health nursing are typical specialisations pursued by males (Muldoon & Reilly, 2003). Choosing to work with certain client groups within a profession could be one way of negotiating the gender identity issues

discussed previously, i.e., being a strategy employed by men who feel under pressure to maintain a “masculine” self-identity within a profession perceived as “feminine”. Research is needed to help us understand such motivations and negotiations.

Research Questions, Data, and Method

In this chapter, we focus on data collected for a funded research project which aimed to explore the relevance and impact of gendered discourses for the research participants’ decision to pursue a career in speech and language therapy, and to make recommendations in this area for SLT recruitment and practice.

The study adopted a qualitative design, appropriate for eliciting views and experiences from a sample of key individuals: SLT graduates/students, SLTs, SLT university lecturers, and careers advisors.

The data collection involved two iterative phases: preliminary data phase and focus group phase. The preliminary data phase involved face-to-face semi-structured interviews with nine newly qualified graduates in speech and language therapy (four male and five female) and nine face-to-face interviews with practising SLTs (four male and five female); and questionnaires by 32 undergraduate SLT students. In the focus group phase, a total of 33 participants were involved in six focus groups. Two focus groups were held with SLTs ($n = 11$; eight female and three male), two focus groups were held with SLT lecturers ($n = 10$; nine female and one male), and two focus groups were held with careers advisors ($n = 12$; nine female and three male). The mix of methods in the two phases allowed, first, the identification of key issues in participants’ individual responses, and subsequently the use of key issues to design the topic guide and questioning route of the focus groups, where participants could explore key topics in depth.

During the interviews, which were facilitated by a research assistant/qualified SLT, participants were asked general questions about their decision to pursue a career in speech and language therapy (for example, “Were there any circumstances in your life which contributed to your decision to become a speech and language therapist?”) and questions around gender (for example, “Do you feel that your gender has been a facilitator/an advantage in any way during your training/profession? Can you think of any examples?”). The questions were the same for the interviews and questionnaires. Interviews were tape-recorded and transcribed.

A topic guide and questioning route, which included all the key topics raised in the preliminary data phase, was then developed for the three sets of focus groups. A number of considerations, other than topic-related (as suggested by Litosseliti, 2003), were taken into account in developing the questioning route: general, simple, factual, and important questions preceded complex, controversial, specific, cued, and less significant ones;

open-ended rather than closed questions were used; and a range of introductory, key, transition, and ending questions—as well as probes—were used. Focus groups were tape-recorded onto an MP3 format, and Adobe Audacity software was used to support the transcription.

The sampling method used in the main/focus group phase followed general qualitative research principles (Curtis, Gesler, Smith, & Washburn, 2000; Miles & Huberman, 1994): samples are small and intensively studied; sample selection is driven by the conceptual framework and the research questions, rather than statistical probability; samples generate rich descriptions/explanations of the phenomena studied; and allow for observation of cases against wider theoretical constructs (thus theory drives the selection of cases *and* analysis of cases may lead to the building of theory).

SLTs and SLT lecturers were recruited by invitation through the authors' contacts, while the careers advisors were approached by contacting careers services directly. The SLTs were practising in different NHS trusts, local education authorities, and private schools in London; SLT lecturers were employed in two London universities; careers advisors were based in two local Connexions branches in various parts of London. There was a range of ages across the groups and differing levels of experience (2–35 years). All groups consisted of practising professionals of both sexes, but with smaller representation of men overall (which is reflective of representation in the SLT profession). Ethical approval for the research was obtained from City, University of London, UK.

The data were analysed qualitatively using grounded theory principles (Glaser & Strauss, 1967), where key themes emerged from the coding of the data and were refined from each stage to the next. Grounded theory is often described as a research method which begins with data collection rather than a formulated hypothesis. Once the data are collected and transcribed, the text is coded, and the codes are grouped into similar concepts that form analytical categories. There were three key stages in the analysis:

1. *data reduction*, where categories and connections between a category and its sub-categories were developed, by filtering information relevant to the research topic;
2. *data organisation*, where the data were then organised into themes and “open coding” (Glaser & Strauss, 1967) was used to identify, describe, and categorise concepts found in the data. The data were compared to find sub-categories. Comments that were repeatedly made in the transcripts were coded and illustrative quotes were identified to saturate the themes; and
3. *data explanation*, where different ways in which categories fitted together were identified and evident explanations were drawn.

Alongside the iterative thematic analysis described here, the study also drew on discourse analysis—which explicitly goes beyond the text, in the tradition of Fairclough, 1992; van Dijk, 1998—to relate the themes to broader social (gendered) practices. Discourse analysis was suitable for exploring the gendered discourses participants drew on in their talk (for example, reinforcing or contesting the idea of women as “natural” communicators). Finally, content analysis was suitable for drawing together participants’ recommendations for SLT recruitment and practice (not discussed in this paper, but see Litosseliti & Leadbeater, 2013).

Results and Discussion

Among our groups of participants, there were some common factors (also highlighted in the literature) raised as key in deciding to pursue a career in speech and language therapy: exposure to the profession through personal experience or through observation of an SLT at work, a desire to help people, and the perceived job satisfaction that derives from that desire. We have discussed these factors in detail elsewhere (Litosseliti & Leadbeater, 2013), while in this chapter we focus on the gender discourses drawn on by participants across the focus groups analysed. These are summarised and discussed as follows alongside selected illustrative examples.

Discourses of SLT as a Gendered Profession

To begin with, discussion of SLT as a gendered profession revolved around the gender imbalance in terms of numbers, before exploring any perceptions about “women’s work” and “men’s work” (more on which later). As one female careers advisor put it:

I think certain kind of healthcare professions are very, they are female dominated and that message filters down through”.

(Female careers advisor)

This issue was also approached, particularly by speech and language therapists and SLT lecturers, from the angle of wording of the job title in the UK context: participants suggested that the words *speech* and *therapist* connote *female*, and therefore SLT connotes a “women’s profession”, as in the following examples:

In terms of the word therapist. You know, you think of the word therapies, you tend to think of a woman and therefore, men will not perhaps go for a job that says therapy in the same way, just without a lot of conscious thought about it.

(Female SLT lecturer)

I think the perception's always there that it's a female profession right from the word "go". I think the word therapist is generally quite female orientated on its own, and speech just always seems to be there doesn't it?

(Female speech and language therapist)

In addition, family considerations can be a factor in people's decision to enter the profession:

I think it's just seen as a nice, threat-free profession that one can have, and one can still have when one has babies.

(Female SLT lecturer)

child friendly and a kind of vocational career that I could do once I'd come back off maternity leave, that was, you know, quite important.

(Female SLT)

In our small sample, there was no evidence of male SLTs mentioning family or flexibility as factors in their decision-making. The groups of careers advisors did not discuss this either, probably because their experience involves working with 14–19-year-olds, who may be less likely to place high priority on having a family as part of their career decision-making at that stage. What is clear from the examples on SLT as a "child-friendly" career, and as one that is fundamentally perceived as "women's work" (see following discussion), is that gender operates at a discursive level that goes beyond the words participants use. *Child-friendly* and *nice, threat-free* become codes for *female*, and as well-established discourses, these are typically left unquestioned by the participants.

"Gender Differences" Discourses

"Gender differences" discourses in the data took the form of men and women doing things "differently", having different priorities (as illustrated later), or having different skills and competencies (as exemplified in the two sub-sections that follow). Speakers draw on a "gender differences" discourse to reinforce and maintain it, and other times to resist and contest it. Careers advisors and SLT lecturers, for example, echoed the gendered perceptions of job satisfaction (see earlier discussion), highlighting the importance of high status and good salary in a profession as particularly important for boys:

A lot of my boys, to be honest, they want to be engineers or they want to earn lots of money in the city.

(Male careers advisor)

I think, you know, that one of the contributing factors when men look at this as a profession could be . . . the [unsatisfactory] career progress, the career structure, and the pay-scales.

(Female SLT lecturer)

Participants also reinforced the idea of gender differences in occupational choice, despite sometimes similar motivations. One female careers advisor explains:

Boys do sometimes say I want to help people, but then they say therefore I want to become a police officer or a firefighter, so the underlying need to care for people is there, but there are different outlets.

A desire to help people therefore may be gender neutral, but society’s perception of what are appropriate occupations for men and women may be stronger (see Williams, 1993 for an excellent discussion). However, some speech and language therapists in our data resisted, or certainly attempted to qualify, the gender differences discourse, illustrated as follows:

I know some men and some women who make very good SLTs and vice versa and so I don’t think there is a male/female distinction; I think it more comes down to personal qualities which men or women can have.

(Female SLT)

Any “natural” gap in communication skills between the two sexes is likely to be small enough that qualification and training will go a large way to reducing it further.

(Female SLT)

Working in an educational setting we use gender quite positively so we often use a male and a female key-worker together. . . . The skills that we have as women are the skills I hope men would have, maybe not in the same proportion and there’d be skills that men would have that women could have and do equally well, perhaps not in the same proportion.

(Female SLT)

These examples provide more nuanced perspectives on “gender differences”, as they challenge a binary gender perspective, and instead try to recognise the value of training or of having a mixed set of skills within a professional team.

There were also participants who cited being male/female as an advantage when working with a client or patient of the same sex, but there were also two instances where “gender difference” was framed as a disadvantage, particularly as regards a belief of men as a risk to children.

For example, one male SLT described experiencing differential treatment whilst on placement:

feeling that sometimes you're at risk working with, perhaps alone, with a child, as a man I still feel that people have perceptions about a male therapist. Teachers would often say to me going into schools "As you're a man we'd better leave the door ajar if you're working with this child."
(Male SLT)

This suggestion of a public perception of men as a risk to children is consistent with other male professionals' reported experiences, in particular childcare workers (Sumsion, 1999), primary school teachers (Smith, 2004), and nurses (Fisher, 2009).

"Women as Carers/ Nurturers" Discourse

References to SLT as a "caring" profession were ubiquitous in our data, as the sample of responses to the question "What factors do you think are involved in a student's decision to become a speech and language therapist?" illustrate:

They talk about caring a lot. That's what we get in interviews when we talk to them, caring profession, helping people, that's a biggie.
(Female SLT lecturer)

They always say they want to help people and that the caring profession attracts them, want to help people. They want to make a difference, they say often.
(Female SLT lecturer)

A "women as carers/ nurturers" discourse is usually built on the assumption that caring for people is a "natural" skill that women possess and typically use and develop through their role as mothers. As one SLT put it:

'cos you're a girl you're supposed to like working with children. I think that's a classic one as so you don't mind if you have to take them out to the park or take them to the toilet or whatever, it is 'cos that's a mum thing to do.
(Female SLT)

There were also instances where participants drew on this discourse in order to qualify or explicitly contest it, as the following comments illustrate:

Patience and being very caring and nurturing is more of a female type of role traditionally but I think men *can be*.
(Female careers advisor)

I don’t know how caring you have to be to be a speech and language therapist anyway to be honest. You’re a professional doing your job conscientiously. I question the caring approach.

(Female careers advisor)

Nevertheless, even the contributions questioning the “caring approach” acknowledge that the “nurturing” aspects of the job are typically associated with “mothering” and therefore the commonly held perception that SLT is a job more suitable for women.

“Women as Superior Communicators” Discourse

All groups of participants agreed that effective communication skills were paramount in a profession like speech and language therapy, yet diverse groups of participants drew upon the discourse of “women as superior communicators” in slightly different ways. Careers advisors drew upon commonly held beliefs that boys and girls have different innate skills, which can be traced back to early childhood: girls as likely to excel in communication skills and boys in manual skills (such as repairing toys in the example that follows). For example, one female careers advisor talked about a

perception as well of like little boys and girls . . . that girls are better at communicating and interacting with people and boys are better at dealing with their toys and fixing.

(Female careers advisor)

SLT lecturers also drew upon a “women as superior communicators” discourse (as part of an overarching “gender differences” discourse) to describe the particular communication skills required in the profession. For example:

listening and capacity to elicit . . . information from people in a way that will establish that sense of “I’m quite happy to chat to you about this.”

(Female SLT lecturer)

In this example the participant was describing a skill that she perceived women to have: the ability to listen to patients and enable them to feel comfortable enough to share their concerns. This skill is needed for the SLT to plan intervention that best suits the patient’s wishes.

Overall, this discourse was prominent among our groups of speech and language therapists, as shown in the following excerpts:

I think there’s the perception that women are more communicative than men whether it turns out to be more realistic . . . communication and talking is always just thought of as a female thing.

(Female SLT)

is probably true that [men and women] have different communication styles, erm, that often kind of fit in with the stereotypes about (women being) better listeners and men might be better at telling you facts.

(Male SLT)

from my experience, not just in speech therapy but in my career beforehand in project management, the best project managers that I have ever worked with are the best communicators, and they are all women.

(Male SLT)

We expect [applicants] to engage in group discussions, expect them to be quite reflective, and I wonder if some of those qualities are more culturally expected of women.

(Female SLT lecturer)

Discourses of Gender and Career Progression

One other area where the “gender differences” discourse was being drawn on by participants was around inequalities in terms of career progression and promotion opportunities. The following excerpts illustrate this issue:

I think if you look at the evidence, the male trajectory through the layers, through the ranks and if you think how many male students, newly qualified therapists get very quickly into management. . . . I think men tend to rise up through the ranks quite quickly.

(Female SLT)

I remember when I was qualifying, all the men seemed to be in the top jobs, seemed to be predominance [sic] in the managerial positions. . . . There weren't many men in the profession. Those that were in the profession have got to kind of the top.

(Female SLT lecturer)

When probed to reflect on possible contributory factors, an SLT lecturer drew upon a “gender differences” discourse—a perception of women as more “emotional” than men—to explain men’s quick progression to SLT management positions:

They [men] are less pulled by the emotional aspects, which means that management is more attractive, or research for that matter.

(Female SLT lecturer)

However, one of the male SLTs framed this instead as a structural barrier of discrimination against women within the profession, seen through the practice of men promoting other men. He explained:

I think it’s harder for women to go through the ranks, and I don’t think it’s just speech therapy. People making the decisions currently who are right up there are men. I think that might have something to do with it.

(Male SLT)

The limited data by male SLTs in this study also suggested that the men in the profession are expected—or may even experience some pressure—to pursue a distinct “male-appropriate” direction within the profession. For example, one male SLT described how

my manager at [xx] when I was there working with adults, ’cos I had a split post, he actually said to me “oh, you don’t want to carry on working with teddies and dollies.”

(Male SLT)

This example highlights an expectation that it can be less appropriate or desirable or valuable for men to be working with children than it can be for women—an expectation which can be as misplaced as it can be constraining for the men and women involved. Similarly, male participants in the study discussed an expectation of them to work in certain specialisations within the profession, such as adult neurology, as well as in certain settings, especially hospitals. One female SLT explained how her husband (also on SLT training at the time) was given placements in hospitals:

“he had I think three or four hospital placements and I had none . . . and he always said “oh, I think it’s because I’m a man they just assume I’m gonna go and work in hospital”. I think that was a factor for him, an expectation of him.

(Female SLT)

As mentioned at the beginning of this chapter, the concentration of men in certain specialisations or settings has already been observed in fields such as nursing, and as much as it may be about career progression, it may also constitute a strategy for maintaining a “masculine” self-identity within a profession perceived overwhelmingly as “feminine”.

Summary and Conclusion

This chapter has focused on the Speech and Language Therapy profession as an extreme example of occupational sex segregation, which is shored up by a range of gendered discourses and their associated social practices: discourses of SLT as a gendered profession; gender differences discourses; discourses of women as carers/nurturers and as superior communicators; and discourses of gender and career progression. These

discourses were sometimes taken as given and reinforced by participants in our research, yet other times they were contested.

The results highlight the perception of SLT as a gendered and, more specifically, as a feminised profession. One obvious way in which this notion is discussed in the data is in relation to the profession being disproportionately *female dominated* in terms of numbers. But beyond that, all groups of participants emphasised the related and separate aspect of the profession being *female oriented*, i.e., SLT being perceived to be and constructed as “women’s work”. In particular, assumptions about women as “natural” carers/nurturers and “superior” communicators continue to structure what are seen as gender-appropriate behaviours—and gender-appropriate professions—for women, and by extension, for men. A “women as carers/nurturers discourse” assumes that women have an innate ability to care for people, while a “women as superior communicators discourse” assumes that women have an innate and superior ability to communicate with people. These essentially “gender difference” discourses (Litosseliti, 2006) are thereby reinforcing a perception that speech and language therapy is by extension suitable “women’s work”, even if some of the participants in this particular study disagree with or contest this perception. As much as it is important to explore what this means for the women who pursue so called “women’s work”, it is clear that it is also necessary to understand the motivations and trajectories of the few men who pursue it. This research has highlighted that gender difference discourses continue to have currency and to strongly shape participants’ narratives about their experiences in relation to SLT work.

The study also suggests that the gender imbalance in the constitution of the profession may be linked to gender inequality in some aspects of the profession, particularly an expectation for men to progress quicker and to be promoted into management positions. Some research participants also raised the issue (highlighted in the literature) of men being concentrated into more “male-appropriate” specialisations within the profession, notably those that involve working with adults. More research is certainly needed to help identify the extent to which male SLTs may actively seek specific career routes or specialisations, how men and women approach career progression more generally, and the different ways in which the structures in place support certain forms of progression over others. Inequalities (e.g., in terms of career progression for women, in terms of the positions available for men) will need to be made visible and addressed through cross-disciplinary research, including through the input of discourse analysts and feminist linguists. From a discursive perspective, most fruitful would be an analysis at both micro and macro levels: of how gender is enacted through everyday workplace interactions and practices, and of the gender ideologies that frame these interactions and practices, and render them sensible within social contexts. Therefore, some possible directions for further research in this area would include tracing speech and language therapists through different stages in their career

(from recruitment, through training and practising, to progressing in or leaving the profession), and observing speech and language therapists “doing gender” within their communities of practice.

Despite its small scale, this study presents a credible exploration of an under-researched area and adds to our understanding of it from a critical discursive perspective. The critical dimension is important, given the multi-faceted ways in which people draw on discourses to navigate and negotiate their identities at work, and given that occupational sex segregation creates and worsens the conditions for inequalities in workplaces.

Notes

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1. The profession is referred to as “speech and language therapy” (SLT) in the UK, but as “speech pathology”/“speech and language pathology” (SLP) in the Australian, American, and other contexts.

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