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Working with Women: Gender-sensitive Social Work Practice
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CHAPTER OBJECTIVES

• To provide an understanding of gender in the client–worker relationship and the workplace
• To provide an understanding of gender, power and ideology in social work and social policy
• To examine the nature of the gendered welfare state
• To introduce feminist social work practice
• To allow an awareness of women’s services
• To note the differences between mainstream and women’s services

KEY TERMS

Compassion trap
Feminist practice
Frontline social workers
Gender
Gender-sensitive practice
Ideologies
Institutional structures
Power
Social policies
Social work feminist framework
Structural disadvantage
Women-centred services
Introduction to the field

Why is it critical in a text on social work practice to present information on working with women? As social workers we deal with people of all ages and genders—are the issues similar for everyone, you might ask? Perhaps surprisingly, they are not. There are a number of structural factors that shape the lives and circumstances of women, and social workers must be aware of these so that their interventions do not add to the vulnerability of clients through benign neglect. Let’s examine some of these in order to understand the necessity for gender-sensitive practice.

Working with women requires us to be sensitive to structural factors that exacerbate women’s vulnerability.

Gender-sensitive practice requires social workers to be conscious of the factors that shape gendered vulnerability.

Curiously, for a nation that prides itself on its egalitarianism, Australia, like other Western societies, is fundamentally gendered. Men dominate positions of power and authority, and women, who represent almost half (46 per cent) of the Australian paid workforce, earn on average 17 per cent less than men (WGEA 2016). Further, women are over-represented in low-paid occupations, vastly outnumbering men in professions such as childcare, nursing and social work; and are dominant among the vast army of unpaid carers and volunteers contributing to the welfare of society. Women are also significantly more likely to experience violence in their intimate relationships (ANROWS 2015; Phillips & Vandenboek 2014). Further, because social work is seen as a ‘caring’ occupation and because women overwhelmingly fill the lower levels of the profession, the social work profession itself has often been viewed as an extension of women’s traditional unpaid caring roles. This has had profound effects on our profession in terms of status, pay rates and management structures, as well as on how we view ourselves and the work we undertake.

Gender factors intersect with social work at multiple levels, including in the way we deliver services to women either in women-only or mainstream services (Dahle 2012; Weeks 2003). Further, women constitute a significant majority of the profession itself, accounting for 83 per cent of the frontline social work workforce in Australia, 70 per cent of whom work in health and social care positions (Department of Employment 2012). Women also account for a large proportion of clients seeking social work assistance, a situation arising from: the ‘feminisation of poverty’ (Merino & Lara 2016); the intersection of gender with other variables such as class, education and culture (Baldwin 2010); and the predominance of women among single-parent households. Thus the client base matches the gendered profile of the profession, and social work often entails women working with women to address significant stresses exacerbated by gender-blind social policies that add to women’s powerlessness. For social workers, the implications of gender in the personal, professional and political context in which we work are significant.
While social work emerged partly from a charitable model of care, its development into a recognised and highly valued profession has arguably— and perhaps counter-intuitively— restrained the adoption of a feminist practice framework by many social workers. Despite women dominating both the profession itself and the clients who use social work services, there appears to be an innate tension between social workers wanting to be viewed as professionals, while also mistrusting the adoption of feminism as a professionally acceptable framework for social work practice (Dahle 2012). This is unfortunate because a feminist (or gender-sensitive) approach facilitates a greater understanding of the structural and social factors that shape gender inequality and, while most women-centred services are linked to a feminist framework, mainstream service rarely are.

This chapter outlines the history and context shaping practice with women and the resulting practice issues. In particular, the chapter notes the way gender, power, ideology and neoliberalism have influenced the shaping of services, social work practice and social policies; the way the welfare state and social policies have defined women; and how gender has influenced social work practice with women and the type of services offered. The development of women’s services and feminist practice have fundamentally challenged traditional notions of women and their place in society, and these issues are discussed. Finally, the future of women’s services in an era of a significant backlash against women is noted.

It is important to understand that any discussion of women as an undifferentiated group is naive and simplistic. Indigenous women, women who have a disability, who are older or younger, who identify as LGBTI, who are from a non-English-speaking background, or who live in a rural or remote area will experience unique challenges and may experience multiple disadvantages. Within the limits of this chapter it is impossible to explore all issues affecting different groups of women. However, the development of women-centred practice demands that we take note of the commonalities and differences between women, and that we centralise women’s issues in our practice. However, readers should note the complex nature of the diversity of women and extend their reading accordingly.

History and context

Women-centred services have a lengthy history in post-colonial Australia. Early services were developed for female convicts sent to Australia following white settlement in 1788. Notable facilitators of services to women were middle class, philanthropic women motivated by a desire to deliver charitable services, while disregarding their own class and privilege. These women included Elizabeth Fry and Caroline Chisholm. In 1812, Fry discovered the appalling conditions of female convicts held in British jails and proceeded to visit all transport ships carrying convict women to Australia. Through Fry’s efforts, children were allowed to be transported with their mothers and, from 1815, women and children were sent on separate ships to male convicts. Fry
corresponded with Samuel Marsden, the magistrate of New South Wales, and was instrumental in establishing hostels in the new colony. Weeks (1994: 30) notes that Elizabeth Fry ‘had in common with later feminists a capacity to organise and work together with other women; a commitment to consulting with the women most in need ... and a tireless energy for persistently lobbying the authorities’.

Caroline Chisholm, an immigrant to Australia, became alarmed at the plight of vulnerable immigrant women in and around Sydney in the 1830s. Many of these women had nowhere to live and sought refuge at night in the Domain, where they were exposed to constant harassment and assault (Summers 2016). In 1841, Chisholm opened a female immigrants’ home, providing shelter and facilitating the employment of women. In 1843, she travelled to England to arrange transport to the colony for the wives of emancipated convicts and for the children of convicts. Thus began a National Colonisation Scheme to bring ‘respectable’ immigrants to Australia (Summers 2016).

What distinguishes these and other similar nineteenth-century services from more recent women’s services is the philosophy on which they were based. Fry and Chisholm were middle class women motivated by the desire to help women through a model of charitable care. Despite being activists for women, they were not feminists in the twentieth-century tradition. Their efforts were not founded on a desire to empower women or to achieve gender equality. In fact, charity was dispensed to ensure that women’s choices remained limited. Summers (2016) describes how women were restricted to roles of ‘damned whores or God’s police’: reprehensible characters or moral guardians. Ideals of what it was to be a ‘good woman’ and ‘good mother’ drove these religiously motivated efforts, which were also designed to ensure control of social class (Weeks 1994). Daniels and Murnane (1989) argue that the women’s services that developed during this period were both refuges and places of punishment for those who failed the ‘respectability test’: ‘When a woman applied for relief, an enquiry was made, usually by the local police, into her character, background and sexual relationships’ (Daniels & Murnane 1989: 46). According to Summers (2016), limited opportunities for employment resulted in nineteenth-century women being economically dependent and culturally impotent.

Second-wave feminism of the late 1960s brought a resurgence of effort for women by feminists and, as a result, women’s services in more recent times have been based on feminist principles and philosophy (see, for example, the Australian Women’s Health Charter [Australian Women’s Health Network nd]). The establishment of targeted women’s services in the 1970s represented a challenge to existing mainstream services, which were seen by feminist women as inappropriate because of their lack of gender awareness and the ideals they espoused about women’s place in society and culture.

The 1970s were a period of enormous growth in women’s services. The 1972–75 Federal Labor Government, under then Prime Minister Gough Whitlam, introduced a major reform agenda that included the appointment of the first women’s adviser to
the prime minister, Elizabeth Reid, and the setting up of the Women's Affairs section in the Department of the Prime Minister and Cabinet, the precursor to the Office of the Status of Women. During the 1970s, grassroots feminist activism increased and community organisations such as the influential Women's Electoral Lobby (WEL) developed. Critical links were established between community activists, women's organisations, women in politics and women in the bureaucracy: links that created a climate of intense social change. Perhaps for the first time, violence against women was recognised as a public issue and the first women's refuges—Elsie in Sydney and the Women's Liberation Halfway House in Melbourne—were opened by volunteers in the 1970s. The International Year of Women in 1975 provided a timely focus on women's issues and a funding source for women's refuges was established.

Women's services have developed across every state and territory in Australia since the 1970s and include women's centres, refuges and shelters, information and referral services, working women's centres, health centres, rape crisis and sexual assault centres, Indigenous women's centres, services for women from non-English-speaking backgrounds and various outreach services.

Women's services that developed during the 1970s and through to the turn of the twenty-first century have a firm agenda to:

• provide safety for women
• facilitate social change
• challenge traditional stereotypes
• ensure services are women-centred
• support women's right to self-determination
• recognise women's material and financial needs
• improve access to services
• incorporate participatory decision-making
• link the personal with the political
• achieve equity for women (Weeks 2003, 1994).

Feminist researchers (Mason 2007; Weeks 1996) argue that women's services actively create women's space and culture, and are therefore sites of social citizenship. However, the trade-off has always been that they are poorly funded and, in recent times, defunded as a result of policy changes introduced by very conservative governments (see, for example, Caldwell 2016; AWAVA 2016).

Feminist social work practice: Issues shaping practice

Gender, power and ideology

To understand why governments might move to defund women's services that are successfully addressing major issues of social and gender disadvantage, albeit with

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Many societies have gendered frameworks that deny women’s rights. For example, some countries still deny women the right to own land or to vote, and legislation and social policies reinforce these structural inequalities. Meanwhile, caring work continues to be devalued and rests on an underlying assumption that women will perform this unpaid work with minimal social support. While attitudes concerning gender have been critical to shaping women’s lives and livelihoods, equally important are power relations and the ideologies that underpin societies.

This lack of attention to gender and male-dominated power relations creates differential life chances and structural disadvantages that are difficult for women to overcome. Hence gender inequalities and power differentials in the wider society critically shape individual welfare. If we are to be effective practitioners, an understanding of these factors must underpin practice—particularly with women.

Historically, the failure of social workers to acknowledge issues of gender and power has had devastating effects. In some instances, social work actions have fundamentally compromised women’s rights, for example through the social work profession’s involvement in taking Indigenous children from their families, thereby facilitating the Stolen Generations (Dodds 1997); in negotiating the adoption of children of unmarried mothers in the 1960s against their will and based on moral condemnation of women rather than their welfare (Dodds 1997); and in historically punitive attitudes to women experiencing violence (see, for example, Mullender 2002; Maynard 1985; Pryke & Thomas 1998). Thus some social workers have reinforced a particularly biased view of women, exploiting the relatively powerless position of women and acting as agents of social control in reinforcing social policies that discriminate heavily against women’s rights to care for their children or to protect themselves against violence.
The underlying ideologies that reinforce power further support gender inequalities. When society’s resources are being distributed, ideals of motherhood and the family maintain women in a marginalised position, and have resulted in policies that restrict women’s life-chances. Ideologies such as neoliberalism have had a significant impact on welfare provisions and, consequently, on social work and the capacity of social workers to work effectively with those who are disadvantaged by embedded inequalities.

Women as frontline social workers are subject to ideologies and power relations that operate in society, in their workplaces and in their personal lives.

Social work involves caring—viewed as natural for women in this female-dominated profession. Writing in the 1970s, Adams (1971) defined the ‘compassion trap’ as a situation that traps women at the frontline level of the profession into working long hours for the good of their clients without due regard to their own professional enhancement. Dahle (2012) suggests that the value of compassion blurs the professional boundaries of social work. Further, women are not well represented in management or policy positions and this can affect the way gender issues affecting clients are viewed and addressed. If gendered ideologies and inequalities are accepted without question, this risks reinforcing and compounding the difficulties experienced by women. Gendered ideologies heavily influence the treatment of female clients in a social work relationship.

Social workers must challenge ideologies and power structures that disadvantage women, and advocate for changes in structural arrangements that impact so heavily on women’s lives and wellbeing.

In concluding this discussion of gender, power and ideology, it is worth reiterating that women as clients have their lives shaped by gendered ideologies that influence not only their immediate circumstances but also the way women are treated by the systems, institutions and professions that make up our society. As professionals, social workers must critique the ideologies and power structures that shape the way they conduct their practice and, as Dominelli (2002: 35) notes, ‘draw on feminist solidarities and insights to create an emancipatory welfare’.

Gendered social policy
How does the state, through social policy, reinforce a secondary position for women? The welfare state developed as a system of government support facilitating redistribution of resources through the social security and taxation systems. Although the welfare state was developed to assist those in need, it operates in a context of gendered ideologies and was initially based on the following assumptions:
• women largely are responsible for caring work and unpaid work in the home, thus subsidising the waged-labour market
• men are in paid employment
• the state only supports women when there is no male relative to do so.
Not until 1958 were moves made towards equal pay and, in the new millennium, women’s average wages still fall short of men’s average wages. In a capitalist system where life-chances and influence in society are very much determined by economic prosperity and labour market participation, women have been severely disadvantaged by a welfare state based on an inequitable industrial and wage system that is characterised by labour market segmentation.

Because women were historically considered to be dependent either on a male relative or on the state, the welfare state has impeded equity by reinforcing women’s traditional and unequal roles through social policy. Social policy on behalf of women has been limited, focused on children, and shaped by a particular moral and ideological perception of women. For example, the first social security payment to women, the baby bonus introduced in 1912 (Roe 1983), was based on implicit ideals of dependent and deserving womanhood. It was followed in the 1920s by child endowment and widows’ pensions, and these remained the only explicit payments for women until the decision in 1973 by the Whitlam Government to introduce a supporting mothers’ benefit. While this benefit created a sense of moral outrage among conservatives, it did remove the stigma of women having children outside marriage and allowed many women who might previously have been forced to give up their babies for adoption to keep their babies. Yet, despite this benefit, single-parent families headed by women are among the most vulnerable in society and are at greatest risk of poverty.

Summers (2016) suggests that the social security system in Australia is a monumental testament to our systematic refusal to grant women economic independence. For women, the welfare state has been a double-edged sword: on the one hand ensuring a measure of economic security, but on the other facilitating a secondary and dependent position for women.

Since the 1980s, the welfare state has been under increasing pressure as governments withdraw from service delivery, leaving volunteers and churches to play a greater role. Privatisation of services has led to a greater reliance on the family to provide support and has facilitated a move away from collective responsibility for the most vulnerable. Implied in this change is the gendered assumption that women will increase their caring roles in the family and in their communities, and that our capitalist society will continue to be underpinned by the unpaid efforts of women. Women’s implied dependence is being reformulated, while their caring work is rendered crucial but invisible. At the same time, however, there is little support for those in caring roles. Childcare services have been restructured and access for many children is still difficult and expensive, and availability of respite services to assist with the care of aged and disabled relatives falls well short of demand. Because many women are hampered by lower wages and the expectation that they will care for the vulnerable, their position in society is undermined.

The Australian Human Rights Commission (2009) notes that structural disadvantage can accumulate over a person’s lifespan, leaving older women particularly vulnerable to poverty in old age. Why is this?
Recognising the needs of women

One of the most critical political issues for social workers is that women have independent needs not necessarily related to their roles within the family or as carers of children, the aged and the disabled. Social workers may subconsciously accept particular views of what women should be doing according to traditional stereotypes of gender roles and respond in unhelpful or oppressive ways. Holding particular views of women's roles may lead to women's individual needs being lost among the conglomerate of 'family' needs. Fundamental issues of disadvantage, such as violence against women, workplace inequities and the precarious economic position of women, may not be prioritised and this can result in women being blamed for the failings of others. For example, AWAVA (2016: 9) reports that inadequately trained counsellors in mainstream services encouraged women who were victims of violence to 'negotiate with their partners and to consider the domestic violence as a symptom of communication problems between the couple' and that 'some were encouraged by their counsellors to examine and change their own behaviour in order to decrease levels of violence'.

To be effective practitioners, social workers need to be critically aware of the impact of gender, and inequitable power relations and ideologies in the wider society. They should be conscious of the way the state and the vast array of institutional structures, such as legal, business and bureaucratic infrastructures, effectively keep many women in a state of dependence and poverty.

The morning-after pill

A social worker is employed as a school social worker in a Catholic school. A distressed young woman approaches the worker one morning seeking the morning-after pill. The young woman is 14 years old. This case raises a number of issues, including the following:

- the stress of the young woman
- the involvement or non-involvement of the young woman’s parents
- confidentiality
- the ideology and philosophy of the school
- the young woman’s name will be on her parents’ Medicare card and she may be unable to consult a medical practitioner without this
- services may be at a distance from the school and school child protection rules prevent you taking the young woman in your car to the women’s health service.

QUESTIONS

1. How would you address this young woman’s distress?
2. What factors shape this young woman’s disadvantage?
The ideology and philosophy of services

As well as the ideologies that dominate society more generally, service delivery to women is very much guided by the ideologies and philosophy of the agency through which the service is offered. In contrast to women-centred services, many non-governmental organisations are church-based; hence, they have a particular moral philosophy that impacts not only on the way women are viewed but also on the type of service offered. The increasing influence of non-governmental community organisations may result in a hardening of attitudes about women’s rights, and service delivery may continue to reinforce women’s dependence. For workers, the challenge is to analyse critically the ideological filters in the wider political landscape, in the agency and in their own practice that affect how services are developed, and to acknowledge that the oppression of women is multi-layered. If workers are to challenge this oppression through their critique of ideologies that marginalise women, they must be willing to remove themselves from the ranks of the oppressors.

Backlash

Australian women are now experiencing a backlash, most palpably evident in the treatment of the first female Australian Prime Minister, Julia Gillard, named by Anne Summers in her biting analysis as *The Misogyny Factor* (Summers 2013). Summers describes misogyny as ‘a set of attitudes and entrenched practices that are embedded in most of our major institutions … that stand in the way of women being included, treated equally and accorded respect’ (2013: 7).

This backlash—and its most tangible representation in the increase in violence against women—reflect a simmering undertone of resentment against women. In a period of neo-conservative backlash, gains made by women are under threat and women’s services are critically destabilised. Nonetheless, it is not surprising that many workers in frontline women’s services have adopted a feminist framework in recent times, enabling an understanding of the importance of gender in practice, but also providing a framework from which to critique the position of women and the threat to women-centred services. Given the backlash against women, it is important for all social workers, not just those in women’s services, to adopt a feminist understanding of power and privilege, structural disadvantage and poverty when working with women.

Interventions

Adopting a feminist practice framework

A social work feminist framework informs feminist practice and provides an understanding of issues such as violence, power and gender inequality. Feminist practice is women-centred and enables social workers to address policies and structures that disadvantage women.
Adopting a feminist position in social work practice necessarily politicises the client–worker relationship as the worker becomes more attuned to the structures and processes affecting their clients. Thus feminist practice includes interventions such as counselling and group work, but also extends to advocacy, lobbying and activism to address structural disadvantages, and actions to facilitate social change. Feminist social workers centralise the concept of gender and are therefore able to reflect on the way the political context impacts on women’s personal experiences. Thus the disadvantages experienced by women, the punitive social security arrangements, the feminisation of poverty, the lack of recognition of caring work and the backlash against women are understood to reflect women’s position in society and motivate actions to achieve change. Social workers through their work with women understand the ‘ugly secrets’ surrounding the abuse of women and children (Dominelli 2002:36) and have the capacity to turn private issues into public policy through radical social work action.

Addressing violence

Violence experienced by women in intimate relationships causes untold harm to women and their children, and specialist women’s services across Australia have been at the forefront of the fight to reduce violence. Yet these services, including violence services, refuges, rape crisis centres, and outreach and counselling services, have a constant battle with underfunding and are struggling to address the demand (AWAVA 2016). For example, ACOSS (2014) and AWAVA (2016) found that:

- 72 per cent of women’s legal services could not meet demand
- 51 per cent of refuges had had to turn women away
- almost 50 per cent of the counselling services (including sexual assault services) had not been able to see all the women who presented for help.

The Australian Bureau of Statistics safety survey (2012) assessed the prevalence of violence in Australia. It found that 34 per cent of women had experienced physical violence and 19 per cent sexual violence since the age of 15, and 19 per cent had had an experience of stalking (ABS 2013).

Phillips and Vandenbroek (2014) note that the social and economic cost of violence against women to the Australian community has been calculated at $13.6 billion.
mainstream or feminist?

One of the most significant issues in a social work relationship when working with women is whether the agency through which services are delivered is a mainstream or feminist (women-centred) agency. Agencies can differ markedly in their approach to women as clients. Mainstream services tend to focus on the individual and are thus in danger of ignoring the contextual or structural issues that exacerbate women’s vulnerability. Further, when services are directed towards families or children, women’s issues and experiences may not only get lost, but women may be blamed for the family circumstances. The challenge for workers in mainstream services is to ensure that the needs of women are centralised and not lost within the broader context of family practice.

women’s services

Women’s services adopt a feminist framework and operate from a women-centred approach to service delivery. They prioritise the empowerment of women and understand the dynamics of violence against women. For example, the Women’s Health Goulburn North East Service notes on its website that it is committed to a feminist approach in order to empower women and hear their stories (WHGNE 2016). Weeks (2003: 112; 1994: 36) notes that feminist women’s services are ‘run for and by women’. These have been developed by feminists in recognition of the oppression of women and also as a response to the inappropriate services offered by some mainstream organisations—or the lack of services for women experiencing issues such as violence. Women’s services are historically underfunded and under threat, and this exacerbates uncertainty in service delivery. For social workers working with women, women’s services are in stark contrast to mainstream and traditional services because of the challenge they pose to ideologies about women, and because they confront issues of power and control.

Women-centred services operating from a feminist practice framework understand the link between the personal stories of women and the wider political framework, undertake actions to address structural factors that shape women’s disadvantage, provide women-centred practice that centralises women’s stories and address women’s needs by delivering appropriate services (see, for example, Weeks 2003).

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This chapter overlaps with every chapter in this book, as women make up a significant proportion of clients in every field of practice. Take the learnings from this chapter with you when you read other chapters of this book.

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Ethical dilemmas

Social workers working with women face a number of ethical issues: chief among these is the need to recognise inequity in the wider landscape and to address the fundamental problems at a broad political level, as well as at the level of the individual client. How this knowledge of inequity is incorporated into practice remains a contentious issue for workers and is dependent on the broader political context, notably:

- the impact of ideologies, neoliberal policies, staffing shortages and underfunding
- the reliance by many agencies on volunteers
- less than satisfactory working conditions.

This knowledge of inequity is also dependent on whether the agency is a mainstream or feminist one, and what philosophical or religious context underpins the organisation. The personal context—the philosophies of the worker and the constraints these place on them—is also important. Yet, despite these constraints, social workers are obliged through their code of ethics to work for social change and for the empowerment of disadvantaged groups—and this includes women.

Female workers have often failed to conceptualise their own practice issues as feminist concerns because they are drawn into the compassion trap as an extension of their caring roles, and may shun industrial action because of the adverse impacts this may have on clients. Thus social workers have been reluctant to pursue claims for enhanced professional status and working conditions. Consequently, many feel that hardship, low rates of pay, exploitation through working long hours in substandard conditions, a reliance on volunteers, the lack of a strong professional identity and the lack of female managers are all part of the structure of a profession that reflects its gendered societal context. For social work to move on as a profession, workers must acknowledge their own biases and prejudices, and advocate for an improved professional identity. If the female-dominated social work profession is to have an impact on the status of female clients, and on the shape of service delivery to women, it must begin by examining its own situation and asking why female dominance has created inherent professional disadvantage.

The road ahead

The future of women’s services is clouded by a neo-conservative backlash against women in society more generally, and by the significant underfunding of overstretched organisations in particular. The backlash is evident in the failure of politicians to prioritise the concerns of women, and to resist the development of policies that would empower women. This is evident in the lack of gender-equitable pay rates, the lack of sufficient and affordable childcare services, and the lack of funding for women’s services. The changing policy environment, which has resulted in the adoption of neoliberal policies championing reduced government intervention in the marketplace, new managerialism in service organisations, the privatisation of services and a move to a user-pays model of social services, further
reduces the ability of workers to actively address the issues of women. Women’s services operate from a feminist framework, prioritising the empowerment of women. Yet the future for women’s services is clouded by conservative policies and a lack of societal support for issues that so critically affect women’s life-chances. These include experiences of violence and access to paid employment. However, what remains unchanged is the commitment of a significant number of social workers to women-centred practice based on feminist principles and underpinned by support for social justice, equity, access and social change. These women will ensure that women-centred practice remains a significant focus for the social work profession.

REVIEW QUESTIONS

1. What do we mean by ‘gender’ and how does it differ from ‘sex’?
2. Why is gender important in the social work relationship and the workplace?
3. How do gendered ideologies influence social policy?
4. What evidence is there that the welfare state is gendered?
5. Outline a short history of women’s services in Australia.
6. What are the differences between mainstream and women’s services?
7. What principles underpin women-centred practice?

FURTHER READING


REFERENCES


