



# GENDER & SEXUALITY IN SOCIAL WORK

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# Human Sexuality as a Critical Subfield in Social Work

(McCave, Shepard & Winter, 2014)

## Problems

A lack of understanding of any major aspect of one's culture or identity

Experience interactions with clients regarding sexuality as overly personal, sensitive, and uncomfortable.

Fail to establish culturally competent practice as an ethical standard within the profession (NASW, 2008).

Ultimately, the effectiveness of services to clients may be compromised

## Reasons

### Education

- The curriculum is not inclusive of LGBTQ content

### Practice

- "Problem-focused/  
Negativity of  
Sexuality

### Research

- Lack knowledge and co-production with communities

# Human Sexuality as a Critical Subfield in Social Work



NASW (2008) specifically states in the Ethical Standard 1.05, “Cultural Competence and Social Diversity,” that social workers are ethically bound to “...understand the nature of social diversity and oppression with respect to ...sex, sexual orientation, gender identity or expression ...marital status...” (para. 30).

# Reflection of our Practice Patterns

(Myers & Milner, 2007)

- Gender and sexuality issues **framed as “problems”** to be solved by helping professionals
- Social workers unknowingly **perpetuate the cycle of sexual oppression** by delivering services that are based on **erroneous assumptions** and **personal judgments**, or **avoiding** such topics all together.
- Social work’s response to human sexuality **mirrors the larger cultural norms and values on sexuality, which favours social control** rather than the field’s stated emphasis on self-determination.



Case Sharing:  
Jenny and her “doting parents”

500+ LGBTQ youth in the child welfare system described “negative stereotypes and beliefs about LGBTQ people” as the “number one barrier” to positive child welfare services (Woronroff, Estrada, & Sommer, 2006, p. 2).

# Gender, Sexual, and Relationship Diversity (GSRD)

WHO (2006) suggests **Human Sexuality** is ...

**a central aspect of being human throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction.**

Sexuality is **experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships.** While sexuality can include all of these dimensions, not all of them are always experienced or expressed.

Sexuality is influenced by **the interactions of biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious and spiritual factors.** (para. 6)

Sexual Orientation



Gender Identity & Expression



Sexual Fetishes & Kinks



Relationship Diversity



# Do you know these terms?

## Sexual Orientation

- Heterosexual
- Homosexual
- Bisexual
- Asexual
- Pansexual/Demisexual

## Sexual Fetishes & Kinks

- **A Sexual Fetish:** A way of pleasuring that must be part of the sexual experience for sexual gratification.
- **A Kink:** A sexual interest a partner may pursue because it excites them.
- E.g. Age play, Foot play, Impact play, Role play, Stigmatophilia/ piercings, Urophilia /water sports, Voyeurism/exhibitionism

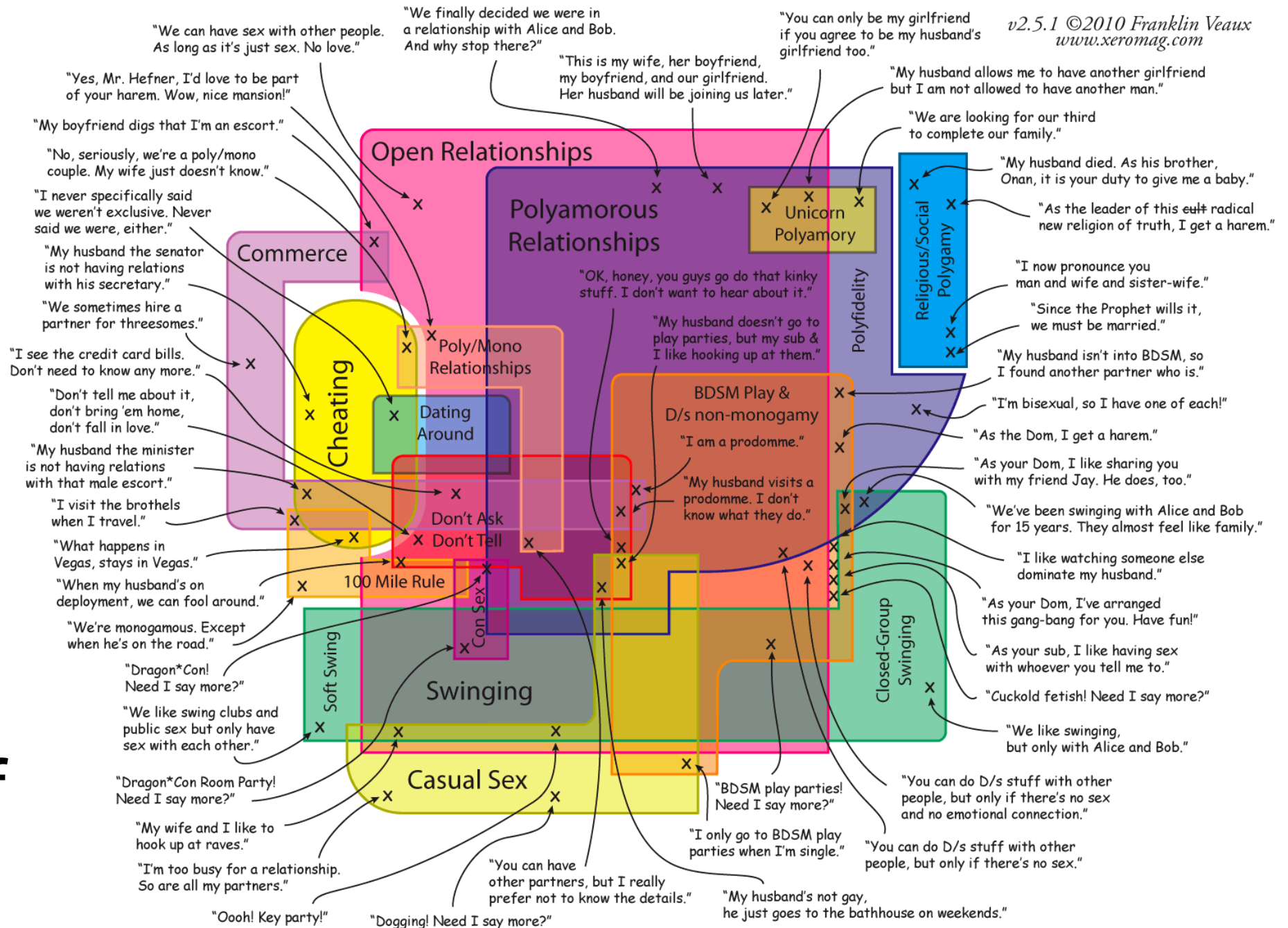
## Gender Identity & Expression

- Cisgender
- Non-binary
- Transgender
- Expression: Cross-dresser
- Expression: Drag Queen/King

## Relationship Diversity

- Solo-ness and singledom
- Monogamy
- non-consensual non-monogamy /Infidelity
- Polyamory
- Open relationship
- Swinging

# The Venn Diagram of Polyamory



# Social Work Dealing with GSRD

“High incidence of mental health disorders among lesbians and gay men” and that “lesbian, gay, and bisexual youths were five times more likely to attempt suicide than their heterosexual peers” (Pelts, Rolbiecki, and Albright, 2014, p. 132)

Young people are using pornography to inform their sexual experiences. (Lim et al., 2016)

## Health and Mental Health

(Davison & Huntington, 2010)

## Sexuality and Disability

(Friedman, Arnold, Owen, & Sandman, 2014; Kattari, 2014)

The use of direct payments for sex could make social workers' jobs tougher and endanger council funding for disabled people.

Sexual issues  
Clients in social  
work practice

## Sexual Violence

(Gavey & Senn, 2014; Martin, Macy, & Young, 2011; Zoldbrod, 2015)

## Sexuality Across the Lifespan

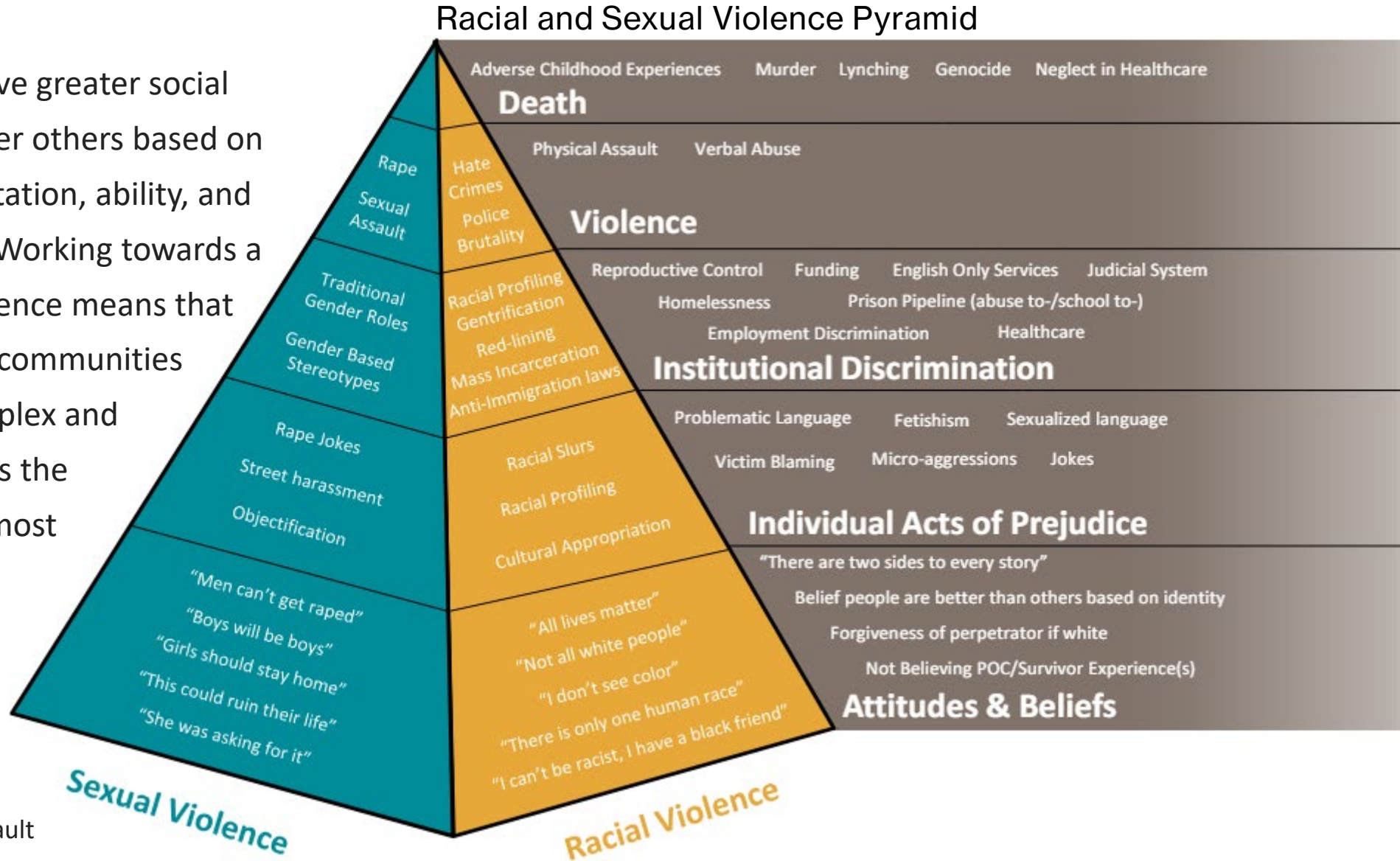
(Schwartz, Diefendorf, & McGlynn-Wright, 2014)

The effects of polygamy on children and adolescents



# Intersectionality of Gender & Sexuality

- “Systems of oppression give greater social power to some people over others based on race, gender, sexual orientation, ability, and other aspects of identity. Working towards a future without sexual violence means that advocates, survivors, and communities need to respond to a complex and layered reality that centers the needs of those survivors most marginalized, silenced, and unseen.”



# The Experience of Mothers in Polygamous Families (Gadban & Goldner, 2020)

- 80 Israeli Arab mothers living in polygamous families who use social services, domestic violence agencies, and health centres.
- A family drawing can shed light on family dynamics such as physical intimacy or distance, the emotional tone in the home setting, aspects of closeness, isolation, rejection, and dominance among different family members
- Although most of the drawings communicated the experience realistically through the use of houses and human figures and attempted to depict a normative life, their drawings also revealed negative feelings of loneliness, helplessness, confusion, and internal distress.



# Competency-based Approach

## Biopsychosocial model

Account for diversity in biology, psychology and social context

Understand the complex dimensions that inform our understanding of sexuality (Berry & Berry, 2013; Russell, 2012)

## Anti-oppressive practice

Recognizes the impact of culture, key social institutions, political systems, and relationships in the perpetuation of social inequality (Dominelli, 2002).

## Trauma-informed practice

Minimize the risk of revictimization, triggering, or retraumatization.

Adapting language and using a non-judgmental attitude

Respect boundaries and demonstrate knowledge and awareness (Auteri, 2015).

# Conceptual Framework of Sexual Well-being for Women with Physical Disability

Nery-Hurwit, 2022

## Physical factors

- Physical function and conditions,
- Therapeutic aids
- Preparation for sex
- Body positioning

## Intrapersonal factors

- Knowledge
- Affect
- Identity
- Body image
- Empowerment and agency
- Feelings of desire
- Perception of partner satisfaction

## Environmental factors

- Social support
- Diversity
- Access to information
- Attitudinal barriers

## Relationships and partner opportunity

- Communication with health care provider
- Partner communication
- Opportunity for relationships
- Partner qualities
- Intimacy

## Stigma

- Devaluing
- Desexualization
- Fetishization
- Stranger fascination

# Postmodern-informed Approach

Its proponents argue that it offers a dynamic, collaborative enhancement to anti-oppressive models, keeping the goal of social justice intact (Cocker & Hafford-Letchfield, 2014).

With its concern for social justice, social work should attend to how multiple, intersecting discourses construct and maintain privilege and, by definition, marginalization (Rossiter, 2005). A

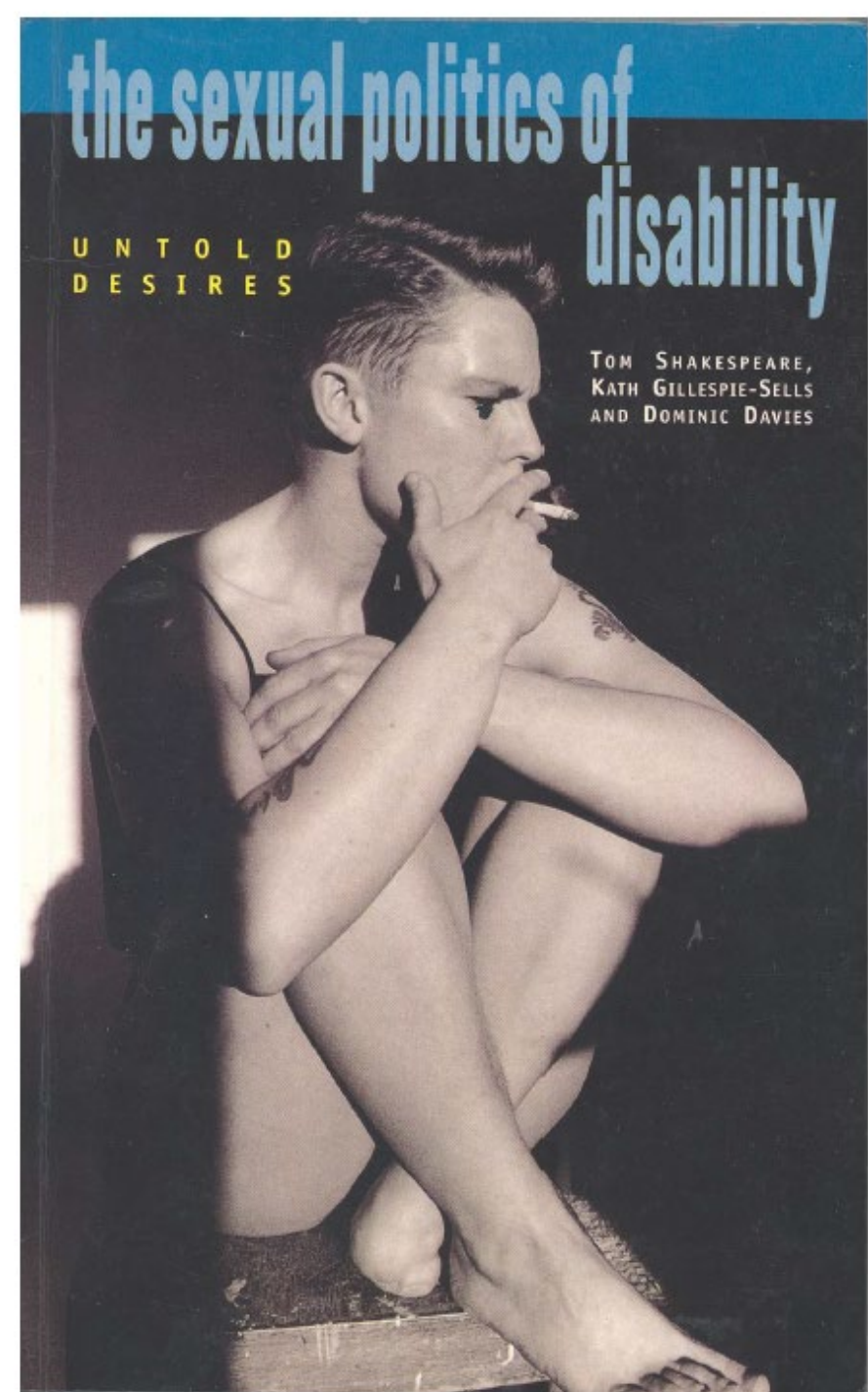
Social work maintains heteronormative discourses, failing to challenge dominant assumptions about gender and sexuality. (Hicks, 2008)

# Sexual Citizenship of People with Disabilities

Disabled young people are sexual beings, and deserve equal rights and opportunities to have control over, choices about, and access to their sexuality, sexual expression, and fulfilling relationships throughout their lives. (Sonali, 2017)

## Consequences:

- lower levels of sexual knowledge / sex education;
- Inadequate sex health support;
- Inaccessibility to good sex and relationships;
- Lack of sexual safety against exploitation and violence;
- Lack of learn about sexual rights, sexual identity, and sexual expression.



# White Hands in Japan - the delivery health call-girl services





# Sex Volunteer Service - HandAngels

- “Hand Angel” is an organization devoted to promoting sexual rights. Founded in early 2013 by a group of gay men, we initially only intended to provide services for gay men with severe disabilities.
- Among the 30 volunteers at Hand Angel, there are LGBT, heterosexuals, sex workers, social workers, long-term care professionals, office workers, university professors, parents and students.
- As of April 2023, we’ve provided 50 times of services, among which 6% are female and 94% are male.

## Sex Volunteer Service (2013-2023 April)

1 time for a transgender service receiver,  
4 times for bisexual service receivers ,  
9 times for homosexual service receivers  
36 times for heterosexual service receivers



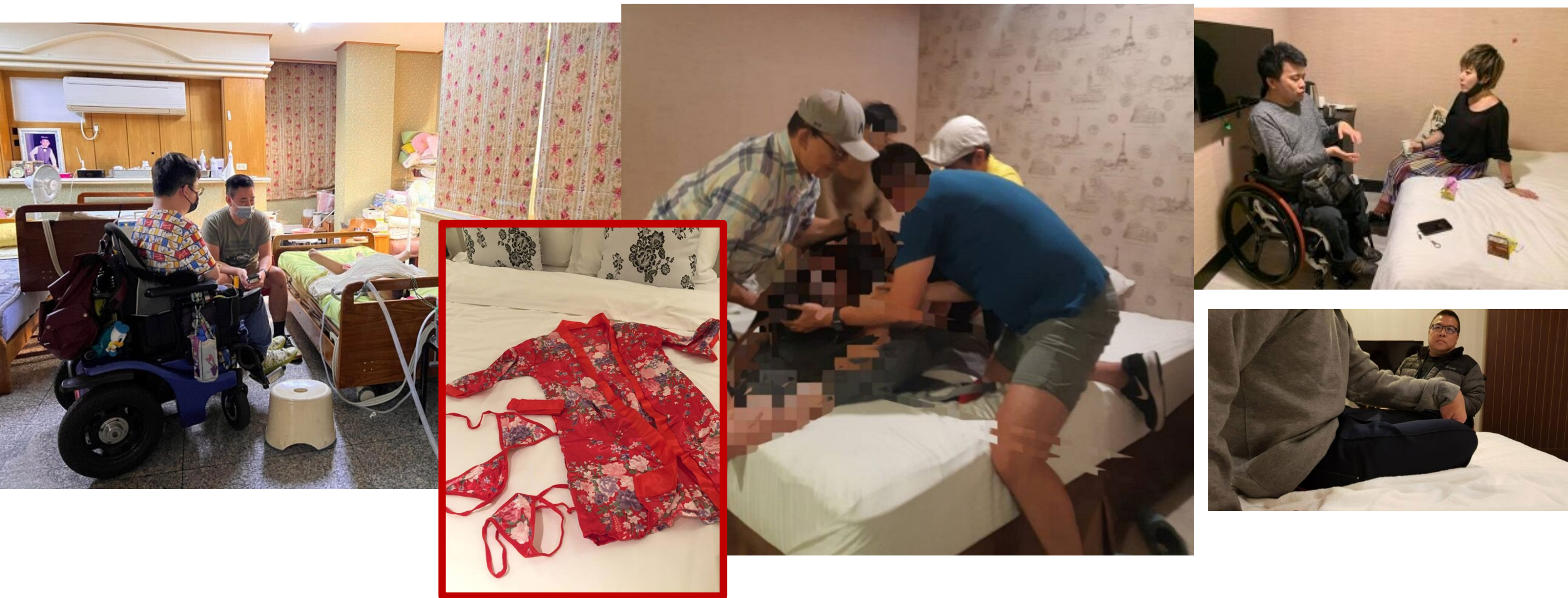
Application  
Submission

Needs  
Assessment

Volunteer  
Briefing &  
Prep

Service  
Implementation

Debriefing  
Interview



# Good Practice Across GSRD

## Reflexive work and training

- Examine the dominant understanding of gender, sexuality, and relationships in your cultural and/or community contexts
- Reflexively engage with your own position in relation to GSRD
- Become aware of your implicit biases, and the structural inequalities in your wider society, and reflect on these in training and perhaps through contemplative practice (Barker, 2015; Berila, 2016).

## Environment

- SPACE -- to have training and self-reflection around GSRD, and other intersections.
- Ensure online and offline materials reflect GSRD, e.g. posters on waiting room walls, magazines, books, images on website, etc.
- Ensure any forms for clients include all possible GSRD options where relevant, including options beyond 'male' and 'female', and that they do not make normative assumptions (e.g. that a client will be sexual, or will have only one partner).

## Practice

- Respect clients' gender, sexuality, and relationship style, and be open to the diversity of ways in which they may, or may not, self-identify and/or practise these.
- Be aware that not all supervisors will necessarily have expertise on GSRD issues. In such cases it can be useful to access additional formal and/or peer supervision on top of your regular supervision, in relation to a particular client or client group