FROM COUNSELLING TO CLIENT PARTNERSHIP IN SERVICE DELIVERY: TOWARDS A FEMINIST PSYCHOLOGICAL PRACTICE

Submitted by

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TABLE OF CONTENTS

SUMMARY

The legacy of psychological training in counselling encompasses twin dilemmas of depoliticisation and expert power. In the early part of this thesis I expand on these dilemmas as they have been articulated in the feminist critique of counselling, and outline three potential responses to this critique. These responses are sometimes implicit in relevant literature and I have also observed them in my own thinking and practice as a counsellor as well as in discussion with other practitioners. They include the possibilities of construing feminism and counselling as oppositional, pursuing them in parallel, or attempting to integrate them. These possibilities do not, I argue, satisfactorily resolve the dilemmas of depoliticisation and expert power. I then go on to consider a concept of client partnership in service delivery, involving a collective of service providers and service users, as a form of response that goes beyond the counselling dyad. This concept of partnership was inspired by ongoing work in New Zealand that has provided a philosophical and practical model for addressing collective power differences. I then describe a process that I initiated in a community-based service in Australia that drew on the New Zealand work and was also influenced by critical feminist theory on identity politics, the knowledge of experience, epistemic privilege, and postmodern alternatives to these concepts. This partnership process was embraced by clients and supported by practitioners but resisted by management of the host organisation, and in the later part of the thesis I consider the disintegration of the process within its hierarchical context.

STATEMENT OF AUTHORSHIP

Except where reference is made in the text of the thesis, this thesis contains no material published elsewhere or extracted in whole or in part from a thesis by which I have qualified for or been awarded another degree or diploma.

No other person's work has been used without due acknowledgment in the main text of the thesis.

This thesis has not been submitted for the award of any degree or diploma in any other tertiary institution.

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We are in the midst of attempting to understand how our work is feminist; in the practice of feminist therapy, all feminist therapists embody theory in process. So we stumble, and at times we backtrack, as we attempt to see what constitutes the territory of 'not-in-the-wilderness' (Brown, 1994: 228).

In Social Justice terms, might we not...work to create a context in which the marginalized gain voice in a culturally congruent fashion? And strive to create a context in which minorities are heard, become visible and able to make a difference at least in their local communities rather than remaining submerged in the dominant culture (Kaye, 1999: 35).

INTRODUCTION

I have been a registered psychologist for fifteen years and a feminist for much longer, although my formal study of feminist theory has extended only over more recent years. In this thesis I will be addressing issues that have arisen for me as a feminist and psychologist in relation to counselling practice. Psychology and counselling are both diverse professions and the overlap between them is limited. There are many psychologists who are not counsellors, and many counsellors who are not psychologists. My dilemmas as a feminist and counsellor are located within the broader debate between feminism and psychology. They may not be relevant to all forms of counselling emerging from different paradigms, although Rose depicts a blurred boundary between psychological counselling and other modes: "[I]f the experts on hand to guide us through the conduct of our lives are not all psychologists, they are nonetheless increasingly trained by psychologists, deploy a psychological hermeneutics, utilize psychological explanatory systems, and recommend psychological measures of redress" (1996: 95-6).

There are several related issues in the broader debate between feminism and psychology that are relevant to the discussion of counselling practice within this thesis. These include the constitution of psychology as a positivist science, its associated claims to apolitical neutrality, and its positioning as an expert discourse.

Mainstream psychology has developed within a positivist paradigm, adopted from the physical sciences (Armistead, 1974; Heather, 1976). This mechanistic perspective is limited in its capacity to embrace human complexity, particularly inner states, but has enabled the assertion of apolitical, value-free, objective neutrality within psychology. This stance reflects the influence of dominant masculinity on science (see, for example, Bleier, 1984; Harding, 1991; Keller, 1992; Merchant, 1980) and has allowed domination to masquerade as expert authority (Foucault, 1988; Mathews, 1993). Scientifically measurable 'facts' are supposedly split from politics, values and emotion within this paradigm (Jaggar, 1989). Moreover, mainstream psychology has vigorously resisted feminism's explicit political basis. Feminists, in turn, have pointed to the partiality of all knowledges and to the damage done, particularly to women, in the name of neutrality (see, for example, Astbury, 1996; Caplan, 1995; Chesler, 1972; Weisstein, 1970).

Psychology is accused of using a framework of understanding that implicitly represents a particular point of view, that of currently dominant social groups, all the while acting as though its own voice were neutral, reflecting reason, rationality, and, with its ever expanding collection of empirical data, perhaps truth itself (Sampson, 1993: 1221).

As a science, psychology is positioned as an expert discourse and its practitioners assume expert power (Foucault, 1980). The practice of psychology is intricately bound to the governing of the free individual. "[I]t has given birth to a range of psychotherapies that aspire to enabling humans to live as free individuals through subordinating themselves to a form of therapeutic authority" (Rose, 1996: 17).

The power relation between psychologist/counsellor and client is of central concern to feminism but is ignored within mainstream psychology. "[T]he discipline as a whole is deeply implicated in the maintenance and reproduction of power relationships which it persistently refuses to make explicit - indeed actively obscures" (Kitzinger, 1991: 111). The camouflaging of power, like the camouflaging of status quo politics, is a function of psychology's stance as a value-free, objective, apolitical science (Prilleltensky, 1994). Counselling practitioners within this paradigm are trained as scientist-practitioners (Andrews, 2000; King & Ollendick, 1998; King, 1998) which means that they are *not* trained to connect personal pain to broader political issues or to reflect on their power as 'experts'.

The legacy of psychological training in counselling thus encompasses the twin dilemmas of depoliticisation and expert power. In the early part of this thesis I expand on these dilemmas as they have been articulated in the feminist critique of counselling, and outline three potential responses to this critique. These responses are sometimes implicit in relevant literature and I have also observed them in my own thinking and practice as a counsellor as well as in discussion with other practitioners. They include the possibilities of construing feminism and counselling as oppositional, pursuing them in parallel, or attempting to integrate them. These possibilities do not, I argue, satisfactorily resolve the dilemmas of depoliticisation and expert power. I then go on to consider a concept of client partnership in service delivery, involving a collective of service providers and service users, as a form of response that goes beyond the counselling dyad. This concept of partnership was inspired by ongoing work in New Zealand that has provided a philosophical and practical model for addressing collective power differences (Tamasese & Waldegrave, 1994; Tamasese, Waldegrave, Tuhaka &

Campbell, 1998). I then describe a process that I initiated in a community-based service in Australia that drew on the New Zealand work and was also influenced by critical feminist theory on identity politics, the knowledge of experience, epistemic privilege, and postmodern alternatives to these concepts. This partnership process was embraced by clients and supported by practitioners but resisted by management of the host organisation, and in the later part of the thesis I consider the disintegration of the process within its hierarchical context. The centrepiece of the thesis is thus a story of failure, something not usually written about. However in the ongoing interests of developing a feminist psychological practice, reflection on such outcomes is, I believe, important for future developments.

The material in this thesis on the partnership process that I initiated is presented from my perspective, supported where possible by input from other participants. Under ideal circumstances, the latter input would have been more extensive and systematic, but the possibilities were pre-empted by my departure from the organisation. Constructions of the outcome of the process by management and Board of the organisation are not represented. Their stories are theirs to tell. They would no doubt differ from mine.

The material on the process is also sensitive. In order to preserve the anonymity of those involved, I have not named the organisation, those within it, or the specific type of service delivered. The organisation is referred to by the pseudonym SHO. The adoption of this approach means that some specific information that may have assisted the reader has been precluded. On the other hand, it is important to note that implementing a similar process within another similarly hierarchical organisation may well have resulted in a similar outcome to that documented here. The linking of my story to a particular organisation is therefore not constructive.

An additional point of note from the outset is that the partnership process described in this thesis was originally referred to within SHO as client participation. Once clients became involved, they made it clear that they did not like the term. It seemed, in their view, to perpetuate a division between clients and staff and to suggest tokenistic involvement. The early stages of implementation of the process involved lengthy discussions about its appropriate naming. In referring to the process, I have replaced the term 'participation' with 'partnership' to reflect the substance of these discussions.

CHAPTER 1
FEMINISM AND COUNSELLING

Feminist Critique of Counselling

Feminist objections to counselling occur on several grounds. The critique as I have abstracted it here applies particularly to the dominant mode of counselling as shaped by psychology, although writers are not necessarily specific and some, at least, would not distinguish this mode from others. Perkins, for example, has stated that: "What you *say* within therapy is virtually irrelevant as long as you're operating within that structure" (in Hall, Kitzinger, Loulan & Perkins, 1992: 11). According to this view, it is not simply the mode of counselling that is problematic but the practice per se.

One basis of feminist opposition to counselling is that the main agenda of feminism is social change, and that any activity that diverts attention from this agenda is counterproductive. Some feminists see counselling as diverting attention from social change to self-exploration (Kitzinger & Perkins, 1993; McLeod, 1994; Perkins, 1991). The energy to act politically and collectively against the overall objectification of women, for example, may be redirected within counselling towards a particular woman, experiencing a particular manifestation of objectification, such as bulimia. If counselling was jettisoned, the argument goes, social change might accelerate. The pain, misery, and anger women feel could instead be channelled into social action.

Counselling is seen as locating problems within the individual, rather than analysing their sources across organisational and social contexts (Gelfond, 1991; Kitzinger, 1997; Wilkinson, 1997). In working with concepts like self-defeating personality, battered wife syndrome, codependence, internalised oppression, fear of success, anorexia, bulimia and so on, it pathologises women's response to oppressive conditions and breaks their connection to the political context. Once problems are located within the individual, the onus is shifted from the social to the personal.

Counselling, according to the critique, aims to maximise adjustment within the status quo, and hence contributes to its perpetuation. In a circular process, the status quo problematizes women and sends them into counselling. So, for example, the mother of pre-school children who exists on a pension in a high-rise flat might be offered programs in stress management or parent effectiveness

training, neither of which address her poverty. Likewise, assertiveness training might be offered in response to harassment, or self-esteem building in response to heterosexism. Such approaches leave the systemic problems unchallenged.

The concept of individual empowerment, which underpins programs such as those noted above, has also been subject to feminist critique. It is argued that no matter how empowered women become through counselling, there are always limits within an oppressive system, and that counselling per se does nothing to challenge the systemic oppression. According to Kitzinger:

> Some people seem to think that we live in a post-feminist era in which the individual woman can struggle for and achieve sexual autonomy if only she is brave enough, courageous enough, strong enough, determined enough - and perseveres for long enough (Kitzinger, 1992: 410).

Counselling, while perhaps embracing a concept of individual empowerment, is seen as simultaneously eroding collective forms of problem solving. Counselling, as an individual survival mechanism, displaces consciousness raising as a collective endeavour. Given the role of the expert in counselling, it cannot replicate the conditions of consciousness raising which, theoretically at least, depends on the reframing and theorising of collectivised experiences among equals (Eisenstein, 1984; Freeman, 1975). According to Perkins:

> The privatization of distress in a therapeutic setting means that issues of shared concern become marginalized and excluded from everyday discourse. The more this happens the greater the need for therapy. Ordinary, understandable unhappiness is rendered personal, private, and pathological (Perkins, 1991: 327).

Rather than fostering community, counselling is seen to professionalise connection and, within the professional relationship, power is inevitably weighted towards the counsellor (Howell, 1979). This imbalance of power is, according to Prilleltensky (1994), unlikely to change within the dominant hierarchical professional ethos. Moreover, it is argued that attempts by individual counsellors to subvert professional power do not overturn in-built inequalities. The client goes to the counsellor for help, not vice versa; the client tells the counsellor about her problems, not vice versa; and the client aims to resolve her difficulties via the counselling situation, the counsellor does not (Perkins, 1991).

Counselling is thus seen to undermine the feminist agenda by diverting energy from social action, by locating problems in individuals rather than

oppressive structures, by propping up the status quo, by giving women a false sense of power, by eroding collective forms of problem solving, and by creating power divisions between professional counsellors and clients.

Counter-Critique

The case against counselling highlights the problems of depoliticisation and professional power, but does not acknowledge the possibility of doing counselling differently. There is, however, a counter-critique, albeit less comprehensively articulated than the critique. Some feminists, while acknowledging that political issues can be inappropriately personalised and pathologised within the counselling context, argue that there is also potential for the opposite to occur: that is, for the personalised to become politicised (Brown, 1992, 1994; Swan, 1999). In this sense, counselling involves "…explicit feminist analysis which ties individual distress to collective political struggles toward societal change" (Brown, 1992: 243).

Holland (1991), for example, has described a process of social action psychotherapy that is clearly political in intent, involving movement from passivity on the part of a self-identified patient, to perception of personal meaning, to construction of collective experience, and finally to social action. Russell (1984) has described a similar process, and feminist counselling so defined starts where the person is at, but its movement is away from medicalisation towards politicisation.

According to Waterhouse (1993), women are more likely to enter counselling full of guilt, self-blame and self-hate than to be replete with outrage against their oppression. They are likely to consider their anger as part of the problem rather than as a springboard for action. They expect to be pathologised. "[W]omen come into therapy expecting to be mirrored in pathology, from an expert point of view, and you have instead to mirror from a feminist historical narrative point of view" (Hall et al., 1992: 10).

In recognising the potential of counselling to connect with the political process, an important distinction needs to be made between the individual as the locus of explanation and intervention and the individual as socially contextualised. This difference is between a reactionary, reductionist practice and a potentially feminist one. It is the difference between helping a woman to smile while she does the housework and supporting her strike against the double shift

of paid and unpaid labour. It is the difference between tranquillising and organising (Holland, 1991).

The counter-critique suggests that it is possible for counselling to be a politicised process. It contributes to the position described in the next section in which feminism and counselling are integrated. However, the issue of counsellor power in a politicised process needs to be considered. Within the counter-critique, power has sometimes been addressed, but almost as if it were an independent dimension (Brown, 1994; Harlow, 1994). There is a tension between politicisation of client issues and subversion of expert power that needs to be acknowledged and is subsequently addressed.

Positioning in Response to Critique of Counselling

For the feminist who is also a psychologist/counsellor, there are various positions that can be taken in response to the feminist critique of counselling and the counter-critique. In this section I will consider three positions. The first of these is to construe feminism and counselling as oppositional. From this position, the contradictions outlined in the critique are seen as intolerable, so that a choice must be made between being a feminist or a counsellor. A second possibility is to recognise the difficulty of reconciling feminism and counselling, but to resist abandoning either, and so to position them in parallel: that is, feminism and counselling are compartmentalised. A third possibility is to achieve some form of integration, some level at which feminism and counselling inform, challenge, and construct each other.

In discussing combinations of feminism and counselling as oppositional, parallel, or integrated, my aim is to provide a framework for conceptualising complex intersections, but not to represent these positions as fixed. I have certainly moved between them, and know other people do also, depending on the situation. There have been times when the pathologising, personalising, and decontextualising potential of counselling has seemed so aversive that I have wanted to dissociate myself, and take up an oppositional position. Such times have occurred, for example, when working with women whose histories of abuse have been obscured by psychiatric labels. There have been other times in my work as a counsellor when politicisation has seemed inappropriate, and my feminism and counselling have then been effectively compartmentalised. This response has sometimes occurred, for example, when working with people who have embraced

their labels as a means of making sense of otherwise apparently meaningless pain. There have been other times, particularly working with clients who have shared my political framework, when my feminism and counselling have been relatively integrated.

Feminism and counselling as oppositional

If the feminist critique of counselling as previously outlined is accepted without challenge then it is possible to take the position that there can be no such thing as feminist counselling because feminism and counselling are incompatible. Within the terms of this oppositional view, you can identify with feminism **or** counselling, but not both. If you choose to identify as a feminist, you would not sabotage the feminist agenda by working as a counsellor. If you choose to do the (anti-feminist) work of counselling, you cannot expect to be embraced within the feminist circles of the critique.

The radical critique that endorses the oppositional position can serve far right or far left interests. It can, for example, be used to justify the dismantling of women's services, a consequence that even the most ardent feminist critics of counselling would be unlikely to support. It is also difficult to maintain the extreme position when confronted with women's emotional pain. Renaming this pain as oppression, as occurs within the critique, may do little for the individual sufferer, and the immediacy of pain might be seen as demanding an immediate response (Ussher, 1994).

Feminism and counselling as parallel

Instead of abandoning either feminism or counselling, an alternative position is to compartmentalise them, or to put them in parallel. The parallel position is one in which the counsellor might actively strive to be value-free and to keep her politics out of her practice in the espoused tradition of mainstream models. It would predictably generate the sort of work that is cited in debates about whether there is any difference between feminist counselling and good mainstream counselling (Masson, 1990). Given that both are striving to be value-free, there may be little difference, but I would argue that the term feminist counselling is a misnomer applied to this sort of activity. It represents counselling by a feminist, rather than feminist counselling.

One problem with this position is that politics inevitably infiltrate. It can be convincingly argued that "[e]very therapist offers a political view of the world to her clients. Her choice of words, her choice of what to focus on in therapy, what

to stress, what to ignore: these are all examples of political acts" (Feminist Therapy Support Group, 1983: 25; see, also, Kitzinger & Perkins, 1993).

The position of maintaining feminism and counselling in parallel is thus at best an approximation. It is, however, probably no more difficult to achieve than other splits that people encompass, such as those between politics and science, religion and science, politics and religion, counselling and religion, sociology and psychology. Such splits are inevitably imperfect, and what results is a blurring of the boundaries to a greater or lesser extent, depending on the amount of energy directed at maintaining the split. It may, however, be psychologically simpler to reinforce the split than to bring the potential contradictions into focus.

Feminism and counselling integrated (feminist counselling)

In the parallel position just discussed, the influence of politics is passive rather than active. The third combination of feminism and counselling is one in which there is an **active** effort to integrate feminist politics and counselling practice, as advocated through the counter-critique. This is counselling which is clearly political in intent, and to which feminism is primary (Brown, 1992, 1994). It is about what you aim to do**,** in terms of politicisation, but also about what you wish to avoid, in terms of exploitation of power (Gilbert, 1980; Harlow, 1994).

In discussing the concept of feminist counselling, writers such as Brown (1994), Harlow (1994) and Lerner (1988) have identified numerous factors that Chester (1995) has summarised as requirements for counsellor characteristics, the reconceptualisation of process issues, and the reconceptualisation of client issues. In reviewing these areas, I will distinguish between conditions that might be necessary, supporting, or peripheral to feminism and counselling as integrated process.

Requirements for counsellor characteristics are not clearcut. Chester (1995) discusses the importance of gender, social activism, and the types of issues dealt with by the counsellor. Being a woman is not sufficient to make a feminist, and there is a question as to whether it is necessary. If gender were the only axis of oppression of concern to feminism, then the answer to this question would be less complicated. However, if feminism is to address the intersection of gender with other forms of oppression, then the importance of gender, as one axis among many, diminishes (Beasley, 1999; Mohanty, 1991a).

The requirement for activism depends on whether this is construed within or beyond the counselling context. Some feminist counsellors may see their work *as* political action in that they are working with the manifestations of power and control at the everyday pervasive level (Swan, 1999). In this sense, feminist counselling might support and feed into social change. Political action by the counsellor beyond the counselling context might support and extend feminist counselling, but it is also potentially an independent contribution to broader feminist goals.

Of the specific issues dealt with in counselling, some such as male violence, sexual assault, and body image are the subject of readily available feminist analyses. These, however, need not define the domain of feminist counselling. The range of issues dealt with in counselling is vast and extends, for example, to substance use, offending behaviour, trauma, conflict and women's violence. Such issues might challenge rather than constrain the boundaries of feminist counselling practice.

Counsellor characteristics of gender, activism, and focal issues might thus support a feminist approach without constituting necessary conditions. Beyond the characteristics of the counsellor, the reconceptualisation of process issues concerns the power relation between counsellor and client. Attention to power is essential to feminist counselling, although it is not exclusive to it, being also a feature of deconstructive psychotherapies (Parker, 1999), some humanistic approaches (Rogers, 1978), narrative therapy (Freedman & Combs, 1996) and potentially also of the position previously discussed in which feminism and counselling are otherwise compartmentalised.

Power in the counselling process is never absent; it is a matter of degree. It may be maximised by structural power differences (of race, class, gender, sexual preference, age and other dimensions), by a counsellor who takes the position of professional expert and does not self-disclose or attempt to demystify the role, by a non-reciprocal process in which a relatively vulnerable client pays for the time and expertise of the counsellor, and by the influence of undeclared politics. Conversely, it can be minimised by attention to structural power differences, by demystification of the counselling role, by reciprocal co-counselling, and by acknowledgment of the influence of political frameworks. It may be impossible to eliminate power in the counselling process, but commitment to minimising the

exploitation of power is a feminist essential. It is not, however, sufficient for the integration of feminism and counselling.

Chester (1995) refers to the second necessary condition for integrated practice as the reconceptualisation of client issues. This condition relates to the process of politicisation as highlighted by the counter-critique. The feminist counsellor, in this sense, explicitly aims to create a shift from personal, medical, pathological frameworks to collective, political ones, a shift which may occur in several stages (see, for example, Holland, 1991; Russell, 1984). Such a shift is reflected, for example, in a man who enters counselling blaming his partner for his violence, and ends up taking full responsibility for it, and eventually participates in social action against male violence. It occurs in those who reframe their depression, madness or badness as legitimate anger against oppression, and then act politically on that position. In a sense, the more complete the shift, the more effective the practice. It means that the client has taken on the counsellor's analysis.

Herein, however, lies the central dilemma for feminist counselling. In taking on the feminist analysis, the client is taking on a value system. Feminist politics, by definition, make judgments about what is acceptable and unacceptable (Perkins, 1992). In order to politicise the client, power must be exerted in the process, unless the client already shares the counsellor's politics. Effecting a shift in values, politics, or level of analysis involves exerting influence, and exerting influence means exerting power. The process may be benign and/or defensible, but it nonetheless involves power. It is therefore possible to politicise clients, problems, and solutions, **or** it is possible to minimise power. It is not possible to do both with most clients. Hence, the two necessary conditions for feminist counselling, of minimising power and maximising politicisation, are potentially antithetical.

The tension between minimising power and maximising politicisation increases with resistance from the client. The man who thinks it is okay to beat his wife because he owns her is, for example, unlikely to embrace a feminist analysis of male violence. The more compelling it may seem to provide a feminist analysis, the more problematic it may be as an imposition of power.

This dilemma may be partly addressed by providing information to clients. Burstow (1992), for example, provides a statement for clients including information about her feminist framework and how it influences her practice. This

approach allows the (voluntary) client the choice of going elsewhere and avoids covert exploitation of power. It thus addresses some issues, but leaves the contradiction unresolved, assumes capacity for informed consent on the part of the client, and weakens the potential of feminist counselling to support social change.

Practice example

The three positions outlined above, of feminism and counselling as oppositional, parallel, or integrated, can be illustrated through a case study of a fictional person.

> *Laura is in her mid twenties and is concerned about her weight. She was put on her first diet when she was nine, and within three years was chronically dieting. By the time she was fifteen she was using amphetamines and cigarettes to control her weight. At twenty-one she was regularly bingeing and purging. She became an avid reader of women's magazines when she was ten, and still scans them for diet ideas to share with female members of her family who are all weight conscious. She keeps clothes to fit her ideal weight and her goal is to be able to wear them.*

An oppositional approach would ignore Laura's individual situation and focus instead on the objectification of women's bodies. It could be adopted by someone who had responded to the feminist critique of counselling by jettisoning counselling practice in favour of feminist activism. Such a person might get involved in supporting campaigns against the fashion, magazine, and diet industries, as well as in organising marches, boycotts, pickets, and speakouts. The problem would thus be attacked at its perceived source, but such an approach would quite possibly leave Laura standing on the scales.

Taking a parallel approach, of feminism compartmentalised from counselling, a counsellor might get involved in all the above activity, but would simultaneously work with Laura, perhaps in identifying non-abusive methods of weight control. She would not attempt to politicise Laura, and nor would she be likely to challenge the goal of weight loss.

Taking an integrated approach, of feminist counselling as politicised process, the counsellor would aim to contextualise Laura's concerns using a feminist analysis, perhaps challenging her goal of weight loss, and working on reconstructing her body image. She would attempt to collectivise the individual situation, raising Laura's awareness about the connection between her experience and that of other women, and would perhaps invite Laura to participate in social action. She might, however, lose this client if the approach was not carefully

executed. On the other hand, to be successful in overturning the socialisation of a lifetime, she would need to exert considerable influence/power.

The integrated approach has been the one that I have favoured as the ideal in my own practice, although I have felt beleaguered by the antithesis that the subversion of power and active politicisation represents. I see no way of escaping the conclusion that integration of feminism and counselling must involve compromising one or other or both if it is applied with clients who do not already identify as feminist. To do feminist counselling requires recognition of this intersection of power and politicisation, and a commitment to working through the issues involved in it.

CHAPTER 2
CLIENT PARTNERSHIP IN SERVICE DELIVERY

The Concept of Client Partnership

It was against the background outlined in Chapter One, and particularly in view of the contradiction between politicisation and subversion of expert power, that I first became interested in the concept of client partnership in service delivery. I envisaged such a partnership as bringing together service users and service providers into a collective, the primary aim of which would be subversion of expert power. A secondary aim would be provision of a context within which client issues could be politicised in a way that was not primarily the prerogative of professionals.

Precedent provided by model of partnership accountability

The idea of a partnership process initially arose from work reported on partnership accountability by the Family Centre in New Zealand (Tamasese & Waldegrave, 1994; Tamasese et al., 1998). The work of the Family Centre, which has spanned more than fifteen years, was initiated to address collective power differences, such as those existing between cultural and gender groupings within the organisation. Their model of partnership accountability evolved in a context in which notions of horizontal rather than hierarchical accountability were already culturally available. Within Samoan and Maori cultures, a person is accountable to siblings, cousins, and other close kin.

The processes developed within the model of partnership accountability were designed to allow structurally less powerful groups to have their voices listened to, understood and responded to. The model requires that dominant groups, in the interests of real communication, privilege the view of less powerful groups and work to re-examine their own practices and attitudes. Such processes also, potentially, provide concrete benefits to the dominant group.

> However, it is important not to lose sight of the reason for accountability structures - the need to shift our attention away from the concerns and viewpoints of the dominant group to make space for those who have historically been silenced (McLean, 1994: 28).

Within the model, the dominant group is accountable to, and in partnership with, the less powerful who have the right to caucus separately in order to consider both the issue in question and the way that they will raise their

concerns with the dominant group. The more powerful have the responsibility of hearing the concerns of the less powerful and of working towards finding mutually acceptable ways of resolving issues (Hall, 1994).

The model is primarily concerned with addressing injustice, and its aim is for real change, not just education (Hall, 1994). Dominant groups should not presume to know when their actions are being experienced as oppressive but must seek information from, or be informed by, the less dominant. The process provides members of dominant groups with the information necessary to stand against the oppressive practices implicit within their own cultures (McLean, 1994).

Hall contrasts this model of accountability with the taken-for-granted hierarchical model that operates in many organisations and which enacts power-over relationships. In the hierarchical sense "...to be accountable means to willingly accept judgement and punishment" (1994: 9). As Tamasese et al. (1998) acknowledge, the term 'accountability' can cause confusion, embedded as it is within the New Right lexicon. The market economy increasingly demands hierarchical, authoritarian accountability, the outcomes of which can then be used to de-fund services. In its currently familiar sense, accountability translates into bureaucratic auditing. By contrast, in partnership accountability processes:

> We are talking about ways of working that seek to give space to the marginalised, that seek to create the possibility of meaningful respectful dialogue across power differentials.... What we are seeking are partnerships of accountability which facilitate the responsibility of dominant groups to deconstruct their dominance (Tamasese et al., 1998: 53).

Tamasese and Waldegrave (1994) acknowledge the negative responses that can occur in organisations when bias, injustice and power issues are named. Such naming conflicts with the status quo and can be regarded as threatening, particularly by those who hold the greatest power, and particularly when those who have previously been named do the naming. There may be fear of role reversals such that those dominated will become dominant. Where power-over relationships are endemic it may be difficult to conceptualise, let alone practice, forms of power sharing.

The idea of accountability processes that are about partnership rather than power-over relationships requires a cultural shift. Where the culture is unaccommodating, Tamasese and Waldegrave (1994) describe three possible outcomes they refer to as paralysing, individualising and patronising. Paralysis,

they argue, is a guilt response. Many people, though acknowledging the issues of social justice, feel overwhelmed by the implications and, motivated to avoid conflict, feel impotent and do nothing. The individualising response refers to those people who claim that they can only be responsible for their own behaviour and so resist any collective action. The patronising response refers to people from discriminating groups who become self-appointed spokespeople for oppressed groups (see also Wilkinson, 1996a, 1996b on representing the Other).

Requirements for effective partnership

There are a number of organisational and personal qualities that contribute to effective partnership across power divisions. The first cluster of these is goodwill, patience and commitment to the long haul. As noted by Tamasese et al., addressing the issues is complex. "It took generations to build up the divisions, injustices and relations of power which we are trying to address. It will take some generations to overcome them" (1998: 62). Associated requirements, which presuppose goodwill, patience and commitment, are flexibility and tolerance. If new territory is being charted, there is no place for rigid adherence to tradition. Confusion, frustration, blind alleys and mistakes are probably inevitable. At the same time, there needs to be respect for the views of others and acceptance of responsibility for the impact of one's own practices and attitudes.

In essence, the process needs to generate a climate of trust. Trust in the process, and trust in the goodwill within and between groups is essential and non-trivial. It is also potentially fragile. As Tamasese et al. (1998) note, members of marginalised groups may learn to trust again through such processes but if that trust is then broken, the potential for damage is considerable.

Tamasese et al. (1998) also advocate the need for clear and consistent leadership. They acknowledge that the concept may seem contradictory within a horizontal structure, but argue that effective leadership is necessary to keep the processes safe and, paradoxically, to prevent replicating domination (see also Freeman, 1975; Onyx, 1999). Leaders need to have a strong commitment to non-authoritarian, collective forms of decision making. Within marginalised caucuses, leadership is required to caretake the process, develop strategy, and ensure that stories of marginalisation are drawn together in constructive ways. Within the dominant group, leaders can provide modelling and encouragement of self-

reflection as an aid to deconstructing power relations, and can act to prevent the paralysing, individualising and patronising responses previously discussed.

Theoretical context of partnership accountability

The philosophical and theoretical influences informing the New Zealand work are mostly suggested rather than spelt out. The most explicit link is to narrative theory, referred to as the third wave in counselling theory (O'Hanlon, 1994), which in turn acknowledges postmodern foundations and the influence of such theorists as Foucault and Derrida (see, for example, Freedman & Combs, 1996; Morss & Nichterlein, 1999; White, 1995; White & Epston, 1990). These influences are reflected in attention to power, deconstruction, and social context in the New Zealand work, and in the importance placed on historicising cultural narratives. Tamasese et al. (1998) suggest that all histories contain liberative and non-liberative narratives. Developing liberative practices involves being selective and building on constructive traditions.

The interactive nature of the relationship between groups within the New Zealand model provides a built-in structure for naming and addressing power issues. The position given to marginalised knowledges allows for the challenging and transformation of expert knowledges, and the collective nature of the process provides the context for personal stories to be politicised. These features of the work, I believed, provided a route into addressing the feminist dilemmas associated with individual counselling. As practitioners we could continue to offer individual counselling but could simultaneously participate with clients in a group process in which we were accountable to them.

Consumer participation in mental health services

I am not aware of any attempt to replicate the New Zealand work in Australia or elsewhere, although the related concept of consumer participation in mental health services requires mention because it provides a local precedent for the involvement of service users in service provision. In the Australian context, workers who have personal experience of being clients in the mental health system are employed as consumer consultants in community mental health centres. They tend to be located at the lower end of established hierarchies, although a proposal by two of these workers has advocated devolution of decision-making power, consultation and collaborative dialogue between consumers and service providers (Pinches & Dunstone, 1998).

Consumer participation in mental health services has generated mixed responses (see, for example, Barnes & Wistow, 1994; Dixon, Krauss & Lehman, 1994; Mezzina, Mazzuia, Vidoni & Impagnatiello, 1992; Polley, 1995; Windle & Cibulka, 1981). Some of the perceived advantages of participation have included improved quality of service, better outcomes for clients, and higher staff morale. Some of the objections have included the drain on resources, inefficiency, the difficulty of getting people involved, and the pressure placed on consumer participants. Barnes and Wistow (1994) have also suggested that service providers might be reluctant to hear the anger and pain expressed by service users in relation to services provided or withheld.

Client Partnership at SHO

Within the service area I have worked in, there has been a long tradition of self-help, but little formal involvement of clients in funded services. Accountability procedures have emphasised accountability to funding bodies. Accountability to clients has frequently been reduced to feedback elicited through standardised client satisfaction surveys.

The aim of introducing the New Zealand model of partnership accountability into an Australian community-based service was therefore ambitious, given the lack of precedent in the service sector as well as the lack of cultural models of non-hierarchical relationships. I was employed within SHO as a psychologist, primarily to provide individual counselling, so that my role in the development of the partnership process was largely voluntary. My involvement, which extended over eighteen months, can be described in four phases, characterised by contemplation, preparation, implementation, and disintegration.

Contemplation

I started work at SHO after the service I had been working at was de-funded through the Compulsory Competitive Tendering (CCT) process that was favoured by government of the day. The closure of the service was in itself stressful and distressing, so that I did not start at SHO intending to be an agent of change. I did, however, start with an ongoing commitment to feminist principles of practice. In my work with individual clients this meant being vigilant and reflective about issues of power both in the counselling process itself and in terms of the social positioning of people I worked with. It also meant, where

appropriate, providing critical social analysis to depathologise, depersonalise and politicise therapeutic issues.

In addition to working with individual clients, there were a number of aspects to my job, one of which was to provide group supervision for the counselling team. Team members did not unequivocally welcome this process. Some associated the concept of supervision with the corrective process of being directed by a 'superior' that is familiar within hierarchies. Their responses were overlaid with memories of stilted case presentations, in which the presenter is made to feel under scrutiny, and audience members demonstrate their therapeutic expertise by contributing criticism.

My role was not part of line-management and the program manager agreed to separate the supervision process from line-management functions that could be dealt with in separate meetings. In the early supervision meetings, I raised my misgivings about the concept of supervision (**super-**vision) and introduced the concept of covision. I indicated willingness to facilitate discussions and reflections on practice but not to construct myself or be constructed as the 'expert' dispensing guidance.

The covision process provided the context in which we collectively learnt to constructively reflect on our own and each other's practice and to identify common ground in relation to such issues as power, stigma, expert knowledge, professionalism, boundaries and accountability. What emerged were many differences, but also substantial commonality and solidarity in relation to the meaning of client-centred practice and our understanding of systemic constraints. We acknowledged, for example, that while there are many 'experts' in the field, the extent of *knowledge* is limited, and we agreed that our client base represented a largely untapped source of wisdom about the processes of change and recovery. In our work with individual clients we connected with that wisdom and within the covision process we developed a commitment to drawing it together.

Preparation

To some extent, the idea of developing a process of client partnership was an extension of this covision process. Within it, we had modelled some of the features that would be important to a process of client partnership. For example, the multidisciplinary nature of the team meant that we operated from diverse models of practice. We developed a culture of respect for that diversity, seeing it as a means of extending and challenging our individual practices, rather than as a

source of competition or as a route to establishing the supremacy of our own particular models or disciplines.

Explicit work towards a process of client partnership was triggered by two related events. Firstly, I reported back to the covision group on a mental health conference that I had attended and at which I had been impressed by the substantial consumer presence. Consumers of mental health services had been vocally present in many of the sessions. A consumer had presented one of the keynote addresses and other papers had been co-presented by consumers and professionals. This level of consumer involvement was atypical in our service area.

The second event of significance was a discussion within our covision group of a paper by Hall (1994) that outlined the process of partnership accountability in New Zealand. This work provided a theoretical and practical model which, combined with the local precedent in mental health services and colleagues' experiences in other workplaces, inspired our joint commitment to pursue a process of client partnership within SHO.

As a first step, I produced a discussion paper, based on the New Zealand work and related material (see, for example, Pinches & Dunstone, 1998; Polley, 1995). This paper included an overview of the philosophy, rationale, possible models, aims, pros, cons and possibilities of the concept of client partnership, as well as guidelines to avoid tokenism and exploitation. It was first distributed within the covision group and modified on the basis of feedback. It was then given to our program manager and to the current Executive Director. Management requested a presentation at a general staff meeting, and subsequently the paper was distributed to all staff and members of the Board of Management. The Chair of the Board wrote a letter of congratulations on the discussion paper and strongly encouraged us to continue our efforts to introduce client partnership into the organisation.

The discussion paper included an invitation to all recipients to attend a meeting to further discuss the possibilities for client partnership at SHO. Eleven people, who were all staff of the organisation and included the six members of the covision group, attended the meeting. These people provided unanimous support for the concept of client partnership. The consensus was to invite clients to attend a forum to have their say about possibilities for such a process. A call for people to organise the forum attracted one staff member in addition to the six members of the covision group. Subsequent efforts to actively involve a broader representation

of staff recruited a further staff member who attended several meetings and provided liaison between the partnership process and her program area. The manager of another program area agreed to be on the mailing list for information but considered the goals of client partnership to be met through the existing volunteer program. Given the status of volunteers within the organisation, we disagreed with this view but were unable to change it.

Ongoing discussions of the implications of client partnership within the organisation could have been useful. A mitigating factor, however, was our commitment to minimal shaping of the process prior to receiving input from clients. Our sense that it was at least partly the organisation's responsibility to demonstrate active engagement with the process, rather than our role to continually create it, also influenced the amount of initiative we took. Several times leading up to the forum, client partnership was on the agenda for Board meetings or programs committee meetings, but something else always took priority. Progress reports were prepared and submitted, highlighting resource issues and the philosophy of power levelling, but minimal feedback was received and the Board, committees and management raised no issues. The programs committee of the Board approved a proposal for the forum, and also a budget of $300. This amount covered food and other such costs, but the substantial time involved in organising the forum was voluntarily contributed. Management approved plans for the forum, and the Chair of the Board agreed to attend, but otherwise the philosophical and practical work was largely confined to the organising group of seven staff.

Our energies became increasingly directed towards clients. In the months leading up to the forum, considerable informal work was done with clients in terms of presenting the concept and inviting their ideas and responses to it. Many clients expressed interest and enthusiasm, particularly relating to the possibility of contributing their own knowledge and of working in partnership, rather than hierarchy, with professionals.

As part of the preparatory stage, the seven members of the group who were organising the forum discussed their motivations for being involved. Their comments acknowledged that professionals are not the experts; that clients have substantial expertise and important experiences that need to be recognised and integrated; that it is in the interests of social justice to provide a space for clients' voices to be heard; and that creating a two-way process could provide a learning

environment for all concerned, change the way we work in revolutionary ways and diminish the gap between workers and clients.

Implementation

Forty-six people attended the forum. These included 26 clients and ex-clients, 15 staff including the organising group, and 5 non-staff speakers including the Chair of the Board. In discussion about motivations to attend, clients indicated support for the principle of client partnership. They also indicated that they wanted to establish a voice within the organisation, bridge client-staff barriers, develop community, and express social concern. There was thus considerable convergence between the views expressed by the client group at the forum and those expressed by the organising group in the lead up to the event. This convergence perhaps provided the basis for the sense of shared excitement and optimism that characterised the day. The participation, enthusiasm and passion expressed by clients left no doubt that they wanted to be involved in an ongoing participatory process. There was also awareness that we were charting difficult new territory and that the aims, actions and outcomes would need to be mutually supported by clients, staff, management and Board.

This optimistic mood was, however, severely undermined by the speech presented by the Chair of the Board, who reiterated the organisation's endorsement of the concept of client partnership, but then indicated that appointment of a client member to the Board was unlikely. This announcement pre-empted discussion of the form client partnership could take and was perceived as extremely negative by the majority of those present. Two clients left in anger.

Despite reaction to the Chair's announcement, participants at the forum expressed their wish for further meetings. Five subsequent monthly meetings were held, attended by an average of 15 people. The newly appointed Executive Director attended part of one meeting, but otherwise management and the Board were not represented, although specific invitations were issued to them.

Within the monthly meetings, particular attention was paid to process issues in order to address power imbalances. Everyone involved was encouraged to reflect and comment on practices of decision making, turn taking, chairing, planning actions and setting agendas in terms of whether they promoted the aim of partnership. By the fifth meeting, I was still fulfilling some leadership and administrative functions, but decreasingly so. The balance had shifted from being a staff-led process to being a jointly owned one. Feedback from clients included

comments that, within the process, they had been treated like human beings. They also indicated that the process had provided a context for challenging negative stereotypes, finding a voice, and becoming active agents in their own recovery instead of passive recipients of treatment.

The activities undertaken in the first six months included:

❖ The preparation of funding submissions. This was done in order to secure resourcing for the process, and to ensure that clients would be appropriately paid for the time they contributed and that training opportunities would be available for all participants.

❖ The development of a proposal of mission and aims, including possibilities for advocacy, partnership, and input to decision making processes. This proposal was to be put to relevant groups, committees and the Board.

❖ The attendance of delegates at programs committee and management group meetings. The programs committee indicated that it would, as a minimum, receive a deputation on a quarterly basis, and was considering cooption of a client representative.

❖ The submission of articles to the agency's newsletter.

❖ Work on production of a client newsletter, the first edition of which was produced six months after the commencement of the process.

❖ The introduction of Suggestion Boxes and the development of procedures for responding to ideas submitted.

❖ The introduction of a *Thought for the Day* jar which was accessible to everyone passing through the reception area.

❖ The involvement of clients in refurbishment of counselling rooms.

❖ The completion of projects by individual participants. These projects included a letter to the press and associated interview, production and distribution of a bumper sticker, a letter to the Chair of the Board following the forum, dissemination of research on alternative therapies, and development of a flier advertising the range of therapeutic groups at SHO.

Disintegration

The achievements outlined above, although not world-changing, were more than I would have expected in the first six months, and compare favourably with a funded initiative in a mental health service reported by Spink (1998). Unfortunately, just prior to its six-month anniversary, the process as it had been established effectively unravelled. From my perspective this was due to three immediate factors: the pressure to limit staff time in the process, a directive against staff involvement in the advocacy component of the group, and my departure from SHO. The last factor is not a matter for discussion in this thesis, except to note that it was directly connected to my involvement in the partnership process and will contribute to the background against which I embark on the next phase of being both a feminist and a psychologist.

Following the initial forum, the seven members of the core staff group came under increasing pressure to limit their attendance at subsequent meetings. The perception of management seemed to be that we were running a group, similar to any other therapeutic group, and that attendance by seven staff was an inefficient use of resources that effectively shut down the counselling service for one afternoon (more specifically, two hours) per month. The client partnership process apparently did not constitute 'work', in management terms, as it did not contribute to 'episodes of care' as determined in the service contract. Our protests that client partnership meetings were, in our terms, very important work, and that we were not 'running a group' but 'participating in a process' were unheeded. I was particularly dismayed by management attitudes given the hundreds of hours of unpaid time that had been contributed to launching the process and keeping it going.

Despite our efforts to involve other staff from the outset, it was also somehow seen that we had excluded them, and that the process was primarily a counselling team activity. I was offered a coordination role, which would have excluded the other six core staff, but would have drawn one representative from each program area. I refused the role on the grounds of a mismatch between the philosophy of the process and emerging organisational imperatives. Management were clearly taking a top-down approach to what would be 'allowed' and that was antithetical within a power-levelling process. Following my refusal of the coordination role, other members of the core staff group were invited to take it on. None were willing to do so, for a variety of reasons. Individuals were then pressured to do so, as management became increasingly directive.

A further immediate factor that contributed to the unravelling of the process was management's directive against staff involvement in any advocacy component of the group. This issue arose after a participant sent a letter to the press and completed an interview that was later published. The participant had acted with the endorsement of the group, management had cleared the letter, and the Executive Director had initiated the press interview. Management, however, took exception to an aspect of the published interview that linked advocacy, the client partnership group, and SHO. Staff were directed to ensure separation between external advocacy and the internal functions of the group. Staff were also directed that they were not to be involved in advocacy.

Following these directives, the client participants reformed into two groups, one to address advocacy issues and one to be involved in internal processes within the organisation. The former group was not to involve any staff. The latter group was to include two staff who may or may not have been part of the core group.

Participants at the meeting that effected the restructure expressed a need for ongoing discussion and for clarification of the aims of the process from the organisation's perspective. Participants expressed concern about the possibility of the process becoming top-down and tokenistic Some referred to previous experiences that had left them feeling 'once bitten, twice shy'. The hope was expressed that staff would be committed rather than coerced into the process. It also emerged that the boundaries between advocacy and internal processes would require ongoing negotiation. The bumper sticker, for example, did not elicit a reaction from the organisation, but the press interview did. At the same time as these concerns were expressed, it was also clear that there was continuing energy and commitment to the process, and recognition that change takes time.

The combination of the withdrawal of staff and the restructuring of the group had serious repercussions in what was still an embryonic process. I was not subsequently involved in either the work of SHO or the process, although I did receive regular feedback. The group continued to function at some level with reduced numbers, and the last I heard was that it had been renamed as a client resource group and was being kept going by two of the original client participants.

CHAPTER 3
CLIENT PARTNERSHIP AS FEMINIST PRACTICE

The partnership process was intended to provide a context in which professional-client power relations could be deconstructed and addressed and in which agendas for social action and politicisation could emerge as the collective prerogative of service users. The concept of partnership was readily understood and welcomed by substantial numbers of clients and practitioners but the process nonetheless floundered within its host organisation.

In reflecting on client partnership as feminist practice, I will firstly consider issues of power/knowledge and politicisation within the process and then go on to consider the interface between the process and its organisational context. My reflections are informed by feminist and other social theory, and supported where possible by informal feedback and views expressed in the client newsletter.

Power / Knowledge and Politicisation

The partnership process was primarily designed to address issues of power. There was no preset agenda, political or otherwise, given that any such agenda would have represented an act of power. Although the idea of the process was inspired by the New Zealand work previously discussed, we diverged from that model on epistemological grounds. We did not, as in the New Zealand model, form caucuses around specific marginalised groups because of the issues and concerns raised by feminist writers in relation to identity politics, the knowledge of experience, and epistemic privilege. I elaborate on these issues in the following sections. The more open process we developed was influenced by feminist discussions of coalition politics, epistemological communities and related concepts that I go on to consider. Our shift from the New Zealand model of identity caucuses reflects a shift that has occurred in feminist thought as a function of postmodern ideas.

Identity politics

The goal of identity politics is ostensibly "…to transform the relations of power that permit some to determine the voice and the life of others" (Sampson, 1993: 1227), and this goal is consistent with the partnership process. However, feminist writers have contested identity politics on several grounds as reflected, for example, in the work of Butler (1990, 1992), Minh-ha (1989), Mohanty (1991a,

1991b), and Riley (1988). Their arguments as applied to the category of women can also be applied to the category of clients.

Identity politics presuppose an identity built around a category. Such categories have their histories of construction within dominant discourses, including psychology. Within these discourses, categories accrue meanings that are often biologically reductionist and pathologising. Identities built around such categories are thus based in the very discourses that identity politics seek to disrupt. They emerge to protest relations of domination but simultaneously provide the basis for their reproduction. Acknowledging this paradox, Riley has noted the "…dangerous intimacy between subjectification and subjection…" (1988: 17) for groups who embrace identity categories.

Identity politics rely on unsustainable assumptions about the unitary, fixed nature of categories; categories such as women, homosexuals, indigenous people, people with disabilities, for example. Within such categories, sub-categories and differences exist. Demarcations between these categories are not clearcut As Minh-ha has noted, "[d]espite our desperate, eternal attempt to separate, contain, and mend, categories always leak" (1989: 94). Collective identities based around such categories are thus fragile and can obscure the complexities of power relations within and between categories.

For the individual, the 'I' is multi-layered (Minh-ha, 1989). 'I' am not only woman or homosexual or indigenous or disabled, but perhaps all of these, and certainly more than these. Although we might choose to take on particular identities for particular political purposes at particular times there may be tensions within our repertoire of identities (Minh-ha, 1989), and a given individual may be dominant in one form but subordinate in another (Mouffe, 1992). The organisation of political activity around identity categories is thus fraught for the individual.

The critique of identity politics has deconstructed the categories around which their appeal to solidarity is based. This deconstruction is sometimes seen as problematic, particularly in relation to radical black subjectivities. As hooks has noted, the critique has emerged "…at a historical moment when many subjugated people feel themselves coming to voice for the first time" (1990: 28). That is, some subjugated groups have organised around a reconstructed identity for strategic purposes and the critique has the potential to destabilise this form of organisation.

Within the client group represented in our partnership process, there has been little history of social movements of any form, and little collective political action. Stereotyped identities are particularly totalising and derogatory, and have not inspired attempts to reclaim, reconstruct or mobilise around them. In diverging from identity categories within the process we were therefore not overriding an existing basis for activism. Part of what we were working against was the effects of existing categories and labels. It would have been counterproductive to validate these within identity enclosures.

The potential fragmentation of the client group was a further reason to avoid identity categories. Within the broad category of clients, there are numerous potential sub-categories, each with its associated stereotyped profile. These differences are potentially divisive and have a history of being deployed in this way both within and beyond the client group. We were trying to bridge divisions rather than reinforce them. Likewise, the numerous differences of cultural background, gender, age, sexuality, and class could have formed the nuclei for identity categories and hence for separate caucuses. However, this approach would have diluted the process.

Within the context of the process there was already the division between clients and workers, the central one across which we were attempting to forge partnership. Perpetuating this division within identity categories would not have served our aims. The division is also blurred. Substantial numbers of professionals have personal experience of client issues. Failure to acknowledge this reality is one means of maintaining the power differential. Equally, substantial numbers of clients have professional training. Within the partnership process, the professionals were seen as making a valuable contribution, but not more valuable than that of other participants. The professionals involved were committed to hearing what clients had to say and were, if anything, less vocal than other participants. Early tendencies on the part of some clients to defer to the opinions of professionals were routinely deflected and diminished over time. Likewise, early questions clients had about staff motivations for involvement seemed to be satisfactorily resolved, and the development of trust was a particular strength of the process.

The knowledge of experience

The tradition of feminist thought that has favoured identity politics has been based on assumptions of shared experience and has often resulted in the

valorisation of the knowledge of experience. Reclaiming and naming women's experience was a central goal of early second wave feminism (Kitzinger & Wilkinson, 1997). Experience was invoked as a category that carried epistemic weight in feminist theory (Jones, 1993) as if experience was an atheoretical given rather than a construction (Janack, 1997). However, the postmodern critique that has drawn attention to the limitations of identity politics has also deconstructed the notion of experience as an unmediated foundation of knowledge.

Scott (1992, 1994) has called for a critical approach to experience. She argues that it requires historicisation and explanation rather than simply being taken for granted. "Experience is at once always already an interpretation *and* is in need of interpretation" (1992: 37). What is required is attention to "…the historical processes that, through discourse, position subjects and produce their experiences" (1992: 25). She has also noted the exclusionary implications of enshrining direct experience of group membership as the test of true knowledge.

> [A]ll those not of the group are denied even intellectual access to it, and those within the group whose experiences or interpretations do not conform to the established terms of identity must either suppress their views or drop out. An appeal to 'experience' of this kind forecloses discussion and criticism and turns politics into a policing operation (Scott, 1994: 74-5).

Within the partnership process, we had set out to value the knowledges of experience and to redress their suppression within our disciplines (Foucault, 1980; Smith, 1999). Our view was that such knowledges had been ignored at great cost in terms of social justice and that their neglect had also undermined our capacity to fulfil our professional roles.

We wanted, however, to go beyond a naive validation of experience to a recognition of its discursive construction. Wiltshire, for example, has noted the way in which the narratives of medical patients are infiltrated by the dominant medical discourse to which they reply. "[R]e-emergent patient narrative - like the narratives of colonised subjects - is not untouched or uncoloured by the experience of its own colonisation: it includes, inevitably, reflections upon its own construction in the mirror of the other's intent" (1995: 41). Within the process we wanted to recognise that the most readily available means of articulating experience is sometimes through dominant discourses. It is not uncommon for clients of our service type to describe themselves, or other clients, in terms of diagnostic labels, or as 'losers' or 'misfits'. Such language may well describe their experience of themselves but it could also be seen as reflecting the broader stigma

that is prevalent in this area and could hence be challenged rather than validated or ignored. The knowledge of experience was seen as something to be valued but also deconstructed. This principle likewise applied to expert knowledges.

Epistemic privilege

The feminist critiques of identity politics and of undeconstructed experience have been associated with simultaneous questioning of epistemic privilege. Within the New Zealand model that provided our starting point, epistemic privilege was implicitly located within marginalised caucuses. This approach has precedence in early feminist standpoint theories that argued that subordination provides a perspective on reality that is inaccessible to the powerful (see, for example Harding, 1986; Hartsock, 1983; Jaggar, 1983, 1989). The standpoint of the oppressed is, according to these theories, less partial and distorted than that of the dominant, and therefore more reliable. According to Collins, however, earlier versions of standpoint theories simply reversed the assumptions of positivist science about whose truth would prevail.

> These approaches suggest that the oppressed allegedly have a clearer view of 'truth' than their oppressors because they lack the blinders created by the dominant group's ideology. But this version of standpoint theory basically duplicates the positivist belief in one 'true' interpretation of reality and, like positivist science, comes with its own set of problems (Collins, 1990: 235).

Clearly, not all oppressed groups or oppressed individuals occupy the same standpoint (Janack, 1997). More sophisticated developments have referred to situated knowledges that are recognised as multiple, partial and constantly changing in response to historical forces (Haraway, 1991). Situated knowledges are (individually) from somewhere, as determined by sociohistorical location, and (jointly) from many-wheres, unlike the view from nowhere supposedly achievable by the unconditioned subject of positivist science (Longino, 1993). The insistence of feminist epistemologists that all knowledge is located, specific, grounded and limited is, according to Stanley (1997), a major contribution that presents a significant threat to existing configurations of power. It turns the expert gaze away from the objects of knowledge towards the process of knowledge production itself.

The shift from the concept of a singular standpoint of the oppressed to recognition of multiple situated knowledges further destabilises the notion of identity and of authoritative experience based on identity. It addresses the problem of simply reversing the location of Truth, but leaves open the question of

epistemic privilege. There are multiple marginalised groups, each oppressed in relation to one or more relatively privileged groups, that cannot be organised along a continuum from a single centre of power (Bar On, 1993). Thus, as Longino asks, "[o]n what grounds can one social location or affective orientation be judged epistemically superior to another?" (1993: 109).

In order to move beyond this question, Flax suggests, it is necessary to relinquish the Enlightenment dream that there is…

> some form of innocent knowledge to be had…. By innocent knowledge I mean the discovery of some sort of truth which can tell us how to act in the world…. Those whose actions are grounded in or informed by such truth will also have *their* innocence guaranteed (Flax, 1992: 447).

If there is no Truth against which to judge other truths, then the notion of epistemic privilege provides a poor basis for resolving conflict between knowledge claims or for developing political action. Thus, according to Flax, we have a crisis of innocence. Claims about domination, she says, are claims about injustice that need to be acted on but cannot be given extra force or justification by reference to Truth. Bar On (1993) and Janack (1997) likewise advocate considerations of justice, morality and ethics in addressing domination rather than persisting with dubious efforts to establish epistemic privilege.

Janack makes a useful distinction between epistemic privilege and epistemic authority and argues that feminist energies should be expended on how epistemic authority is conferred...

> not through a particular epistemic 'position' but by social and political practices and institutions. Instead of trying to reconstruct a workable concept of 'standpoint' or appealing to the supposed link between social marginality and epistemically privileged perspectives, we should look to pragmatic or moral arguments to make our case for the inclusion of members of marginalized groups in theory-making (Janack, 1997: 125).

Relinquishing the concept of epistemic privilege does not imply acceptance of relativism, or more specifically moral relativism. As Hepburn argues: "living without epistemological guarantees does not downgrade choice; instead, it stresses its centrality and necessity" (2000: 95). Choices must be made on socio-liberatory grounds, rather than on Enlightenment grounds of who counts as a rational agent (Janack, 1997). Additionally, if the concept of epistemic privilege is relinquished, it is possible to be clear that subjugated as well as powerful

positions are material for "...critical re-examination, decoding, deconstruction, and interpretation" (Haraway, 1991: 191).

The implications of such feminist discussions for the partnership process were that we were bringing together views from many-wheres. These locations were not equal in terms of power so that care was needed that some were not heard at the expense of others. No particular location had a premium on truth, but nor were we aiming simply to endorse multiple competing truths. Our aim was deconstructive and transformative in the interests of optimising goals of anti-domination, anti-discrimination and social justice.

Postmodern alternatives

The feminist response to identity politics has generated alternative ideas of coalition politics (Butler, 1990), imagined community (Mohanty, 1991a), and radical plural democracy (Mouffe, 1992). These concepts emphasise a common theme of alliances that are formed across potentially divisive boundaries but that are anti-domination, anti-discrimination and anti-essentialist. Such alliances are specifically located, historically and geographically, but their boundaries are conceptualised as necessarily fluid. They are issue-focussed and are based on the principle that the development of community (not necessarily unity) depends on shared attitudes and ways of thinking about relevant issues rather than around shared identities (Mohanty, 1991a). Such redefinition of the notion of alliance was eminently appropriate for our partnership process with its mix of clients, ex-clients and staff.

Similarly, the critiques of undeconstructed experience and of epistemic privilege have provided an alternative concept of epistemological community. Nelson argues that it is communities that construct and share knowledge and standards of evidence. "[S]uch knowledge will be justified (if it is) by its ability to make sense of and explain experience" (1993: 125). The community develops the standards for knowledge and, in an iterative process, the standards are developed to allow coherent accounts of experience.

The concept of epistemological community provides a workable model for bringing expert and subjugated knowledges into a mutually transformative space. Within such a community, diversity is embraced as potentially enriching, but only up to the point that it promotes the integrity of the system as a whole. In a project such as ours, requirements for integrity would preclude knowledges and political projects premised on domination and control (Mathews, 1993).

Nelson notes that there are "...no litmus tests for identifying epistemological communities" (1993: 149). She suggests, by way of example however, that a group of feminists and a group of fundamentalists developing a policy against pornography might form a coalition but not an epistemological community. That is, these two groups might share a specific goal that would bring them together, but in terms of their beliefs, philosophies and epistemologies there might be little commonality. The aim of the coalition would be to pursue the goal rather than to develop such commonality.

Our group of clients, ex-clients, and professionals, on the other hand, were in the process of forming an epistemological community (primarily) and a coalition (secondarily); the goals of the latter were to emerge from the community. As previously indicated, we did not form with particular political goals in mind, apart from the process of formation itself. We did, however, start with the specific aim of bringing together diverse knowledges to develop a shared and enriched understanding of a particular therapeutic area.

Dialogue and a culture of curiosity

Coalitions and epistemological communities are not assumed to be homogeneous or univocal, and the key to effective development of such groups is dialogue (see, for example, Butler, 1990; Collins, 1990; Longino, 1993; Mathews, 1993; Sampson, 1993). Dialogue is transformative, not accommodative. That is, the new is not simply added to the old. Theoretically, the process of transforming dominant discourses simultaneously transforms the relations of power that situate them as dominant. Butler nonetheless provides a cautionary note:

> The very notion of 'dialogue' is culturally specific and historically bound, and while one speaker may feel secure that a conversation is happening, another may be sure it is not. The power relations that condition and limit dialogic possibilities need first to be interrogated. Otherwise, the model of dialogue risks relapsing into a liberal model that assumes that speaking agents occupy equal positions of power and speak with the same presuppositions about what constitutes 'agreement' and 'unity' and, indeed, that those are the goals to be sought (Butler, 1990: 15).

Within the client partnership process there was awareness, informed by the New Zealand model and feminist principles, of the need to articulate and address power relations. Having departed from notions of identity categories, however, we lacked that structure for keeping power divisions in focus. We also lacked immediate and appropriate cultural models such as those discussed by the

New Zealand group and by African-American feminist, Patricia Hill Collins. She describes a form of dialogue "…long extant in the Afrocentric call-and-response tradition whereby power dynamics are fluid, everyone has a voice, but everyone must listen and respond to other voices in order to be allowed to remain in the community" (1990: 236-7).

The sort of dialogue that we wanted to develop could instead be grounded through the concept of a culture of curiosity, which was familiar to the many participants who had experience of narrative and deconstructive therapies (Freedman & Combs, 1996; Parker, 1999). According to Drewery and McKenzie, working curiously is relevant to any context in which a struggle for meaning is going on, and has particular relevance to subverting the power of expert discourses. It involves taking a position of not knowing the meaning and realities of people's lives and being able to ask deconstructive questions about the said and the unsaid.

> This process describes a non-confrontational style of (political) struggle, and suggests the establishment of interpersonal relations which do not require domination by one party over all others. It presumes goodwill - a faith in the capacity of humans to engage in conversation about what is good and worth doing, and to struggle for agreements about our purposes. It does not presume that we could all possibly agree, but it takes limited successes in small collaborative action as signs of life…. It is both simple and complex (Drewery & McKenzie, 1999: 148).

Effectiveness of practices

The partnership process as it was developed diverged from its New Zealand mainspring in order to take into account critical feminist views of identity politics, the knowledge of experience, and epistemic privilege. Instead, concepts of coalition and epistemological community were favoured. These concepts were put into practice through the open structure of the process and through the form of dialogue developed within a culture of curiosity. The boundaries of the process were drawn around commitment to its philosophy and values rather than around specific identities.

The question of the effectiveness of our practices in achieving their aim of subverting expert/professional power goes beyond a theoretical analysis to an empirical question. That is, how did participants perceive the process in terms of its internal power relations? Informal feedback from a range of participants suggests that the process was experienced as a genuine partnership, although

systematic input of the sort available within a participatory action research project would have been valuable for evaluation purposes (see, for example, Nelson, Ochocka, Griffin & Lord, 1998).

Given the dual aims of the process (to subvert expert power and to provide a context within which client issues could potentially be politicised in a way that was not primarily the prerogative of professionals) two outcomes are worth noting. Firstly, when the professional participants were involuntarily withdrawn from the process, other participants regretted their departure but remained committed to its continuation. That is, there was no sense that the process depended on the contribution of particular professionals. The second noteworthy outcome was that advocacy, when it did emerge, was initiated by a client. This client had become involved in an external advocacy group and reported on its work at a client-partnership meeting. The issue was discussed extensively within the group and another member (an ex-client in this case) drafted a letter to the press which was then endorsed by the whole group; clients, ex-clients and staff. In Sampson's (1993) terms, the voice of clients was thus established as meaningful in that it produced collective action and extended the process into the public domain.

The Partnership Process in Organisational Context

Nonetheless, the process disintegrated over this issue of advocacy, which brought the conflict between the process and its host organisation into focus. In the following sections I will consider the outcome of the process in terms of the broader service delivery context, the management style at SHO and associated tokenism, and competing discourses within the organisation and the process. I will also consider the concept of the organisation as a holding environment and the implications for creative work within the organisation.

The broader service delivery context

Under various funding arrangements, SHO has been providing services for several decades. In the 1990s it was involved, along with other agencies and conglomerates across the state, in the Compulsory Competitive Tendering (CCT) process. Under this process, SHO experienced various funding gains and losses. One of the losses was a substantial proportion of its existing counselling service. At the organisational level, winning tenders and retaining territory was essential for survival. Winning a tender involved signing a contract to guarantee delivery of a specified number of 'episodes of care'. Once a contract was signed, there was

pressure to comply; otherwise, it could be lost when the service was re-tendered in an anticipated three years.

CCT had a noticeable impact on the culture of organisations like SHO (Nevile, 1999; Rogan, 1997). There was considerable turbulence as the service delivery system settled into new combinations. At SHO, and presumably at other similarly placed organisations, a new breed of management was employed to ensure compliance with contracts. Virtually the only form of feedback the counselling team received during the first twelve months I was at SHO was in terms of whether we were or were not meeting our targets for 'episodes of care'. Thus, in organisational terms, the concept of accountability meant accountability to funding bodies and producing the appropriate numbers, whereas within the client partnership process it meant accountability to clients and, indeed, consulting with clients about how that term should be understood.

The client partnership process was an anti-hierarchical initiative, operating within a hierarchical organisation, which saw itself as primarily responsible to its hierarchical bureaucratic funding body. As Thornton (1994) has noted, bureaucracies encourage docility at lower levels by a variety of disciplinary strategies. SHO was docile in relation to its funding bureaucracy; the partnership process was perceived as potentially destabilising within SHO. The organisation operated within an economic rationalist paradigm and context; the process presumed a social justice paradigm. Little wonder that it did not survive, and yet its failure was not a foregone conclusion or I would not have exposed clients, colleagues or myself to it.

Management and hierarchy

Beyond the broader service delivery context, a further factor that contributed to the disintegration of client partnership was the incongruity of the top-down, non-democratic management style that prevailed within the organisation. The client partnership process represented an emerging partnership between staff, clients and ex-clients involved in the process. However, staff were simultaneously located within an organisational hierarchy within which they were held responsible for any activity within the process that was perceived as negative by management. Staff were thus in the position of attempting to subvert their professional power within the same context in which they were expected to impose the will of management who had power over them and over those they were trying to work with in coalition. They were caught between two antithetical

cultures (Onyx, 1999) or, more colloquially, they were the meat in the sandwich (Critsilis, Van Dort & Spink, 1998). Staff maintained solidarity with clients, but this put them in opposition to the organisation. The frontier between the 'we' within the process and the 'them' outside it, envisioned by Mouffe (1992) as a vanishing point, became starkly demarcated.

There were several occasions when I tried to point out that, for an organisation that said it wanted client partnership, its internal practices were incongruous. By decree of management, for example, clients were excluded from use of 'staff' toilets, despite collective protests by practitioners that such an action was discriminating. By a similar decree of management, counselling staff were prohibited from visiting their clients who were admitted to the residential unit. Neither of these decisions was negotiable. A top-down performance appraisal system was introduced, and when questioned about the possibility of a reciprocal bottom-up process, the reply was that such a model was unheard of. When a new Executive Director was to be appointed, the selection panel included members of the Board and management, but did not include staff or clients. My attempts to generate discussion of these issues and their relevance to the proposal for client partnership were met with baffled incomprehension or, on one later occasion, a clear statement that SHO was not going to change.

The top-down style was evident to clients in their meetings with management and Board. The fact that such meetings occurred was a change within SHO, but the style of the meetings reflected SHO's commitment to staying the same in terms of its hierarchical practices. In relation to the Suggestion Box that was set up as part of the process, the following comments appeared in the client newsletter and the ones that follow refer to the Executive Director's attendance at a meeting of the partnership process shortly after her appointment:

> A Suggestion Box sub-committee was set up to catalogue and make responses to the suggestions, by way of a bulletin or newsletter. This sub-committee was invited to attend a management group meeting…. We brought along all documentation pertaining to the suggestion boxes believing we would be given advice and direction on how to proceed. To our dismay the documentation was taken away from us by the new chief executive 'in good faith'…. Since then staff who were not involved in the client participation process have produced a bulletin with responses to the clients' suggestions…. It will be interesting to see what will be done in the future.

> The forum on [date] began with [Executive Director] outlining how she viewed client participation. It appeared that she endorsed the idea but that it would need to be well coordinated and that only certain staff would be permitted to attend, not necessarily those who had been attending on a regular basis because they supported the initiative. It has since come to fruition that most or all of those staff who had been attending regularly would not be permitted to attend, instead specific staff would be allocated the responsibility of overseeing client participation. This idea of client participation, of a top down approach is diametrically opposed to the original philosophy which proposed a 'from the ground' approach to client participation.

The top-down management style at SHO was augmented by the appointment of the new Executive Director as referred to in the above extract. Prior to her appointment there was a lack of non-hierarchical models of leadership within the organisation and subsequent to her arrival the practices became increasingly directive.

Tamasese et al. (1998) have suggested that partnership processes will not work where any party is unwilling and should not be attempted unless all involved have demonstrated their clear commitment. The new Executive Director indicated verbal commitment to client partnership but the philosophy of the process was incongruous with her management style. She walked into a situation not of her own making, and was strongly placed to enforce her wishes. The timing of her appointment was unfortunate, three months into the implementation of the embryonic process. There was no opportunity for the sort of discussions that might have established common ground, if such would ever have been possible given the philosophical disparities involved.

The tension between the process and the organisation was partly played out through the clash between the Executive Director and myself. I had little formal power within the organisation but, initially at least, I was the informal leader of clients and staff within the process. The Executive Director and I are both women, but I would not see the clash as an issue between women in the terms of such writers as Briles (1987) and Fite and Trumbo (1984). Rather, I would see it as a clash between two levels of a hierarchy that could have occurred regardless of the gender of the incumbents. As I have argued elsewhere:

> [T]he fact that women sometimes act against the interests of other women, exploit their hierarchical power and construct themselves within abusive discourses is hardly remarkable given the context of dominant hierarchical

discourses and gendered structures. To do otherwise requires access to alternative discourses, a structural context that supports them, the freedom to make conscious choices to construct oneself within them and clarity about the rationale for doing so. Such conditions do not currently prevail (Beckwith, 1999: 393).

They did not prevail at SHO and particularly not after the arrival of the new Executive Director. She was the *One* with everyone else as *Other* (de Beauvoir, 1972) including clients, staff, the rest of management and Board. She was in a position of power and showed no reservations in using it to achieve her ends.

Foucault (1980) has advocated an analysis of power based on study of the strategies, techniques and tactics of domination, some of which have been detailed by Thornton (1994). The operation of power in our case meant that differences in epistemological foundations and philosophical frameworks were irrelevant to the conflict. It was not so much one body of knowledge against another body of knowledge, or worldview, that was in dispute, but the assumed right of hierarchy to exert control through domination. As Flax has noted "[p]rior agreement on rules, not the compelling power of objective truth, makes conflict resolution possible" (1992: 452). The prevailing rule was that might is right, one on which the parties would never have agreed. Both sides took up entrenched positions.

Tokenism

Given the top-down management style, the partnership process was inevitably tokenistic even though its philosophy was to give voice. Windle and Cibulka (1981) describe three broad categories of citizen participation: non-participation, tokenism, and citizen power. The concept of citizen power was clearly an anathema for SHO, and tokenism was endemic. It was reflected in the lack of resources ($300 towards the costs a daylong forum, for example), the battle over staff time (two paid hours per month for seven staff compared with hundreds of hours of unpaid time contributed voluntarily), and the low priority given to the process as an agenda item at formal meetings. This level of response is not unique to SHO, as demonstrated by Spink's comments on a consumer participation project that she evaluated in a mental health service. "Initially service providers were interested in what the consumers said, but only on the level of involving them in buying new curtains, and not at any deeper attitudinal level" (1998: 4). In our case, parallel willingness was demonstrated in relation to involving clients in refurbishment of the counselling rooms.

Tamasese et al. refer to the need for workplaces to commit some institutional time and space for participatory processes to be effective. "There needs to be some flexibility in management. The organisation needs to make a symbolic gesture of goodwill and demonstrate practical commitment to the issues" (1998: 55). There was certainly a need for flexibility in creating a new organisational forum to discuss the development of client partnership if the existing Board, programs committee and management group could not accommodate it. No such initiative was taken. The programs committee was deemed the most appropriate forum but, as management indicated, it was there to approve funded programs, not to nurture an unfunded initiative.

The tokenistic response of the organisation was evident to clients, as indicated by the following comment in their newsletter:

> Enthusiasm among some clients who have been involved from the outset is waning as they can see a perceived tokenism starting to appear and that management do not really want clients to be involved in any of the decision making processes.

The disappointing response of the organisation was, in retrospect, predictable even though it was not anticipated (see Barnes & Wistow, 1994; Onyx, 1999; Spink, 1998; Stapley, 1996). In the early stages, I thought we were dealing with misunderstanding and/or indifference rather than, as now seems clear, an unequivocal commitment to an opposing philosophy. The espoused position of organisational support for client partnership at SHO produced a veneer of goodwill that provided an apparent basis from which to proceed but then degenerated into a confusion factor and finally into overt opposition.

Competing discourses

Much confusion was generated by language, the critical terms being 'partnership', 'accountability' and 'leadership'. These words were used within the process and within the organisational hierarchy but for each of these groups they were located in different, and competing, discourses. That is, the two groups were using a shared vocabulary but different languages (Collins, 1990; Stapley, 1996). When a situation of conflict arose, the organisation exercised the privilege of the powerful to be gatekeepers to the discourse, to assert their meanings and to feign ignorance or ignore the contradictions. By controlling the words, they controlled the 'things', and language became a barrier to communication rather than a means to it (Stapley, 1996). As Gal (1991) has noted, the ability to make others accept and enact one's representation of the world is an aspect of domination.

Client partnership at SHO was not an initiative of the top levels of the hierarchy and was, perhaps for this reason, predestined for trouble. The gap between the initial rhetoric of the organisation and the philosophy of the partnership process increased rather than decreased over time (see Windle & Cibulka, 1981). The problems were not without precedent. Broom (1991), for example, has documented the sorts of problems that feminist collectives encountered when their structures and processes did not fit bureaucratic requirements. In order for the partnership process to thrive it would have needed active engagement at all levels, with management providing support within the organisation and advocacy beyond it in relation to bureaucratic funding bodies. Such an outcome would have required mutual commitment to dialogue and deconstruction of the prevailing discourses within the organisation and within the process.

The organisation as a holding environment

The client partnership process could be described as a creative initiative, given its lack of precedent within the service sector. Stapley (1996), working within a psychodynamic framework, discusses the importance of the organisational holding environment for creative work to thrive. Creative work involves change, and change involves learning and potential loss. Trust is therefore required in the adequacy of the holding environment, including its formal structures, strategies and leadership. Trust in the 'good enough' quality of the holding environment prevents escalation of anxiety in the face of change. Without trust, creativity is stifled by retreat to the safety and order of conservatism as a strategy to manage anxiety.

The level of trust between participants in the process and the organisational hierarchy diminished over time, particularly after the appointment of the new Executive Director. The process was portrayed as threatening to the established order and as attempting to reverse power rather than level it. Tension was palpable on both sides of the suddenly drawn battle line, with predictable consequences, according to Stapley. When the level of anxiety is high in an organisation:

> There is a reliance on tight and rigid hierarchical roles and closely controlled tasks. There is a fear and a belief that mistakes will not be permitted and will not be admitted. The feelings of chaos experienced by the members of the organisation are disturbing in the extreme. The way that this is dealt with…is to build in the systems of control, which are seen as 'good', and to

project all of the 'bad' feelings on to anything which is likely to disturb those systems. This includes any proposed new system…(Stapley, 1996: 195).

The philosophical differences between the hierarchical construction of power, within the organisation, and the resistance to such construction, within the process, became more clearly delineated. The endemic 'othering' of clients was extended to professionals involved in the process, who were depicted as having 'lost their boundaries' and as having taken on the characteristics of the client group. Such a depiction was based on pejorative stereotypes of clients and was derogatory to all concerned. As Riley has noted "…the very collectivity which distinguishes you may also be wielded…against you" (1988: 17). In our case, our partnership with clients, the strength of the process, was transmuted into a weapon.

There was never any doubt about who would flourish in the ensuing conflict. There was much damage and many hurts. My personal losses were severe: job, process, clients, colleagues. No mediator or outside adviser was called in. Instead, the process, the role of staff in it, and particularly my role were constructed as problematic. Stapley has commented on a comparable situation:

> [T]he relevant part of the organisation was seen by the ruling coalition to be not performing well or, to put it more strongly, dysfunctional. They were seen to be 'out of line' with the main organisation. The view of those at the top was that the members of those parts of the organisation were the cause of the dysfunctional behaviour.
>
> From our knowledge of how culture develops this does not seem a very helpful view…. Simply allocating blame to those groups as if they were the cause without recognising that a deeper problem exists does not provide an explanation. By using the knowledge that the culture develops through the interrelatedness of the members with the holding environment, from their perception of the holding environment, it will be possible to analyse the cause more accurately (Stapley, 1996: 159-60).

The causes of the 'dysfunction' in our case were the differences in the philosophy, culture, discourses, principles and values of practice between the partnership process and its host organisation. There was no real communication across the gap, and the process was overwhelmed by institutional power. The holding environment was not 'good enough'.

CONCLUSION

The process of client partnership described in this thesis was developed as a form of response to the feminist critique of individual counselling. Within this critique, the practice of individual counselling is seen as undermining the feminist agenda of social change by translating issues that should be politicised into personal problems. It maximises adjustment to the status quo and leaves oppressive structural conditions unchallenged. It displaces collective forms of problem solving with a dyadic relationship between a counsellor and a client in which the counsellor is relatively powerful and assumes the position of expert.

In response to this critique, it is possible to construe feminism and counselling as oppositional, to pursue them in parallel, or to attempt to integrate them. I have argued in the earlier part of this thesis that the integration of feminist politics into counselling practice is impossible without exerting power. The feminist counsellor is thus left with contradictory requirements of minimising power within the relationship and maximising politicisation of issues.

Having struggled with this dilemma in my own practice, I was enthusiastic about the possibility of addressing it by developing a process of partnership between clients, ex-clients, and professional staff in a community-based agency in which I worked. The process would, in theory, subvert professional power by bringing together expert and subjugated discourses into a mutually transformative space. It would give clients the opportunity to influence the way services are provided, and it would also provide a context of collectivity in which client issues could potentially be politicised in a way that was not primarily the prerogative of professionals.

The idea of the partnership process was inspired by ongoing work in a comparable agency in New Zealand which has addressed collective power differences between cultural and gender groupings. This work provided a more appropriate precedent than Australian initiatives in mental health services that appeared tokenistic by comparison. The New Zealand model has elaborated a key concept of accountability that positions relatively dominant groups as accountable to, and in partnership with, the less powerful. It has emphasised the imperative of addressing power relations as central to the work to be done in partnership, and was used to introduce the concept of client partnership at SHO.

However, the New Zealand work involved formation of caucuses around identity categories, and we diverged from this structure because of critical feminist views of identity politics, the knowledge of experience, and epistemic privilege. The open process we developed was informed by feminist ideas of coalition politics and epistemological communities that address power divisions even as they form across them, and locate knowledge construction as a collective activity rather than an individual enterprise. Coalitions and epistemological communities are not assumed to be homogeneous or univocal so that the work of the partnership was pursued through the form of dialogue developed in which all views were to be heard but none were automatically accorded privileged status. The views that formed the knowledge base of the group became those that were collectively seen as promoting social justice. The boundaries of the group were formed around commitment to its philosophy rather than identification with any particular subject position.

The introduction of the partnership process at SHO was the result of commitment on the part of seven professional staff, verbal approval by management and Board, and enthusiastic response by clients and ex-clients. The process demonstrated initial potential to achieve its aim of subverting professional power, and substantial achievements including some collective political action.

Nonetheless, the process disintegrated because of conflict with its host organisation. Although the concept had strong resonance for clients it was, despite the prevailing rhetoric, out of step with the agenda of the funding bureaucracy and with the culture and management of SHO. In the latter part of this thesis I considered the impact on the process of the broader bureaucratic funding arrangements, Compulsory Competitive Tendering, entrenched hierarchical practices, the consequent inevitability of tokenism, and the effects of competing discourses. All of these factors combined in a consistent way to produce an environment that was destructive rather than holding. We presumed too much on the rhetorical goodwill, but without the attempt we had no way of knowing how thin the veneer was. I do not regret the attempt, and know others feel the same, although of course we would wish for a different outcome.

In terms of the feminist dilemma within individual counselling (of the contradiction between minimising power and maximising politicisation) that provided the starting point for discussion in this thesis and for the initiative itself,

the client partnership process ultimately simply shifted the boundary from the counselling dyad to the interface between the process and the organisation. It demonstrated initial potential to achieve its aims only to be overwhelmed by institutional power in the process of doing so. The promise of the process would need to be assessed through a longer trial, within a more supportive environment, and by obtaining systematic input and feedback from those involved.

As I reflect on my eighteen months at SHO, I can see with the benefit of hindsight that much more groundwork was needed within the organisation before embarking on implementation of the partnership process. Perhaps an adviser on strategy could have made a difference or provided the skills to seriously engage the organisational hierarchy. In the planning stages this approach did not seem like a good idea because of the possibility of the process being shaped, controlled and owned by the relatively powerful before those for whom it was intended had any say at all. In view of the eventual impact of organisational resistance, however, some rethinking is required. If similar work were to proceed systematically at multiple levels, it would need to be adequately resourced. In order to be resourced, it would need to gain the support of funding bodies. Which returns us to the feminist issue of social change: If it is to occur, where is the appropriate place to start?

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