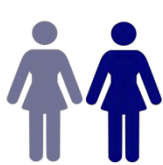


Case Study: Public Services

Women tend to make more use of public services



Because of their greater responsibilities for unpaid care and their lower incomes.

What is the gender distribution of public expenditure?

Are there gender gaps that might indicate barriers to access to services?



Is funding to women's needs adequate and transparent?



Is spending on public services that are vital for gender equality expanding or being cut?



Bearing in mind the diversity of women, who is benefiting most from expansion or losing most from cuts?

Who is employed to deliver public services?
Are wages and working conditions conducive to gender equity?



CASE STUDY 3: PUBLIC SERVICES

Monica Costa & Rhonda Sharp¹

Public services and gender equality

Public services are vital for the achievement of gender equality. The services include education, training, healthcare, age care, housing, services related to violence against women and girls (VAWG), support for small businesses, the justice system and many other sectors that serve the community.

Gender-responsive budgeting does not seek to achieve the same or equal use of services. It recognises that services are used differently by women, men and different groups of women and men. The point is to respond to their different needs.

This case study describes the links between public services and gender equality outcomes. An understanding of public services from a gender perspective requires knowing:

- *who uses public services (and how)*
- *if resourcing of the services (and planning) is adequate*
- *who is employed to deliver these services (and pay and conditions).*

This kind of analysis requires a variety of data including information on past and plans for future spending, how services are accessed and used, and public service workforce data.

Mapping the use of public services

Women tend to make more use of public services because of their greater unpaid care responsibilities, particularly in relation to the elderly, people with disabilities and children. Women's lower incomes over their lifetimes make them more vulnerable to poverty and more dependent on public services. There are services, of course, that women use less than men, such as support for small businesses and technical training, either because they are not relevant to them or there are barriers preventing access.

Information revealing who uses public services is available from many sources (Box 3.1). Budget documents and other official documents from the Treasury and Department of Finance could also be a source of this data.

Box 3.1 Selected sources of data on the use of public services

Administrative records can be used for some services, such as education and healthcare. For instance, school enrolment data may be available from the school system, although schools have an incentive to exaggerate enrolment and disregard students who drop out if government spending is allocated on the basis of enrolment.

Household surveys tend to provide aggregate use of public services by the household, not by each individual in the household. This means that it is not possible to directly compare the average usage of public services of women and men, girls and boys. An option is to compare the use of services by single women and single men, or by lone parents, or by geographic location, wealth and income.

Qualitative data from semi-structured interviews or focus groups can also provide important information about access and use of services, and the impact of any changes to those services on the lives of women. Quotes from interviews and focus groups can support findings from quantitative analysis and provide a ‘human face’ to the statistics, which can help to communicate issues and concerns.²

Data can assist in identifying barriers to delivery and point to options for improvements. For example, qualitative research was used in a 2016 Australian Capital Territory (ACT) Office for Women study to investigate what would be required to improve the quality of domestic violence services. Focus group data revealed that general welfare, health and justice service providers see domestic violence services as outside their remit, leaving gaps in the system and need for cultural change.³

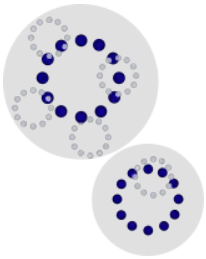
Barriers to accessing public services

The need to provide well designed and funded public services to achieve policy outcomes, particularly in the areas of healthcare (e.g. vaccination) and mental health was emphasised by the Australian community’s experiences during the COVID-19 pandemic.

The pandemic underscored ideas central to gender-responsive budgeting, such as service accessibility, government transparency and citizen engagement while exposing barriers faced by Indigenous women, refugee and migrant women, women with disabilities and women living in rural and remote areas.

Structural, economic and social factors, including racism and discrimination, economic hardship and income inequality, disability, cultural and educational disparities, all present barriers to successfully accessing public services.

For example, racism in the public health service means that Indigenous Australians are less likely to receive cancer treatment and have poorer cancer survival than non-Indigenous Australians, and research has shown that final year medical students exhibit subtle biases when discussing hypothetical Indigenous patients and their care.⁴

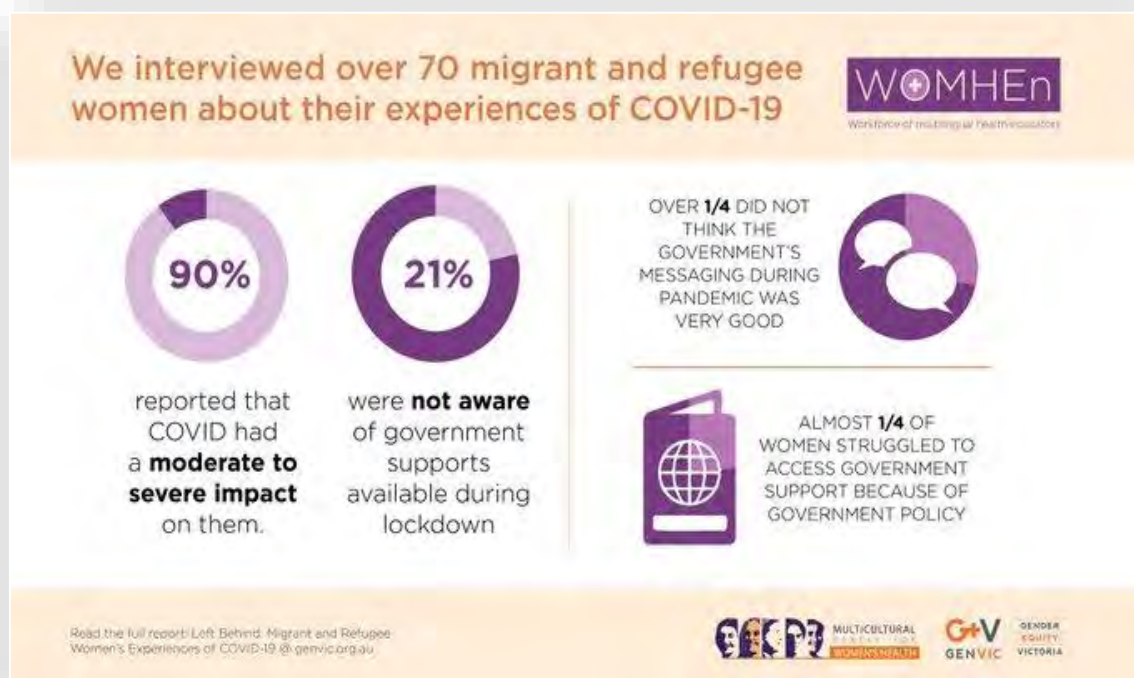


They don't really sit there and explain things to you – what the [medical] procedure is, why it's important to do this. They just say 'Do this' and that's it.

First Nations woman⁵

The largest study of women's health in Australia involving 40,000 participants reveals a range of barriers to women in rural areas accessing health care including having more out-of-pocket health care costs, and benefiting less from bulk billing than women in urban centres.⁶

Evidence also suggests that those who speak a language other than English at home are less likely to participate in health services. Access to interpreters is limited, and healthcare professionals often exhibit poor knowledge of cultural norms.⁷ A report by the Multicultural Centre for Women's Health (MCWH) and GenVic tells the story of how migrant and refugee women felt forgotten by service providers during the pandemic, were less aware of government support and had to rely on their community for support and information.⁸



(GEN VIC Twitter, now X, 6 October 2021)

Without service providers' enlightened engagement with the users of public services, and greater accountability to them, health services will continue to be perceived as daunting by women from diverse backgrounds.

The adequacy of resources

Governments may adopt policies to address key issues – such as violence against women and girls, women’s health in regional areas and housing and homelessness – but fail to back them up with long term and adequate funds.

Adequacy is understood in gender-responsive budgeting as enabling gender equality outcomes. This includes ensuring that sufficient funds are available to carry out measures to meet the needs of men and women. Whether resources are adequate to address complex problems, or not, is often subject to contestation. Resource adequacy has been a long term issue in the area of violence against women and girls (see Box 3.2).

Box 3.2 Resource adequacy and domestic violence policy

Since the 1970s the problem of domestic violence has been a focus of feminist activism. The response of policy makers has been slow despite numerous national, state and territory plans, reports and inquiries on domestic violence. The funding responses have rarely been adequate to the complexity of the task and the size of the problem.

For example, a more coordinated approach introduced by the Gillard Labor government in 2010 in its National Plan to Reduce Violence Against Women, initially committed over \$852 million to initiatives to reduce domestic and family violence which turned out to be a drop in the ocean. The government’s advice by the Productivity Commission indicated that these budget commitments fell short of the resources it recommended.⁹ In 2016 a commissioned report found that the cost of violence against women and their children to the economy, governments, individuals and families was significant, estimated at \$22 billion in 2015-16.¹⁰

The COVID-19 pandemic led to a spike in violence against women and girls. The Australian Institute of Criminology found one in ten women in a relationship reported experiencing intimate partner violence during the pandemic and half of these women reported an escalation in the severity of the violence.¹¹ In response, the Morrison Liberal-National Coalition government committed in its 2020-21 budget an additional one-off \$150 million to support those at risk of domestic, family and sexual violence. The inadequacy of COVID-19 response to domestic violence needs was pointed out by the National Foundation of Australian Women (NFAW). It argued that savings in health and education to help fund the federal government’s estimated \$27 billion COVID-19 Recovery Plan, was likely to exacerbate gender economic inequalities, which has long been associated with increased levels of violence against women.¹²

National Plan to End Violence against Women and Children 2022-2032

The Albanese Labor government introduced the *National Plan to End Violence against Women and Children 2022-2032* with an ambition to end gender based violence in a generation. It has been described as a substantial package of measures across a range of areas (safety, economic security, health, justice) with a spend of \$2.29 billion over its first two years with a further \$1 billion allocated in early 2024 to extend the program for survivors to leave violent partners. However, in the face of an escalation of femicides and increased sexual assault reports, a number of criticisms have been made about the tracking of the National Plan and its resourcing adequacy to deliver on the government's promise of ending gender based violence.

*A particular area of criticism was that the existing framing of the problem that informed funding privileged one driver over others and led to gaps in measures and funding to address domestic violence.*¹³ The most recent government response in September 2024 was a dedicated National Cabinet meeting of federal, state and territory governments to extend previous funding agreements, committing an additional \$4.7 billion over five years, beginning July 2025. This funding indicates a shift towards frontline and community legal services, and on high-risk perpetrators and marginalised groups following the recommendations of the government's Rapid Review of Prevention Approaches (2024). It was described by one commentator as unprecedented new funding that would go a long way towards implementing the approach in the National Plan to End Violence against Women and Children 2022-2032.¹⁴ However, some in the sector argue real cuts have been made to other areas (see below).

An assessment of adequacy of resources also requires a consideration of funding consistency. Despite successive commitments of funding to address issues of domestic, family and sexual violence, a variety of programs have seen their funding discontinued or not extended in the forward estimates. Examples include the Coalition government cuts to the peak body representing Indigenous survivors of domestic violence in 2019 and halving the budget of the school prevention program, Respect Matters in 2020.¹⁵

Many aspects of domestic and family violence are covered by five year national partnerships funding agreements between the federal, state and territory governments. There is no guarantee that funding will continue after the expiry of these agreements and the negotiation of new intergovernmental agreements can go perilously close to the expiry date with such 'funding cliffs' contributing to uncertainty and loss of jobs, skills and services in the sector.

The issue of adequacy in face of funding inconsistencies of the different funding agreements was evident in the response of some domestic violence groups to National Cabinet's 2024 commitment of the additional \$4.7 billion. There is new funding to a new National Access to Justice Partnership Agreement. However, the National Partnerships Agreement on Family and Domestic Violence Responses, which is the mechanism through which the states and the federal government share funding responsibility, share is \$700 million towards a renegotiated agreement in 2025 which is argued to deliver a 12.5% cut in real terms in the federal government's contribution.¹⁶

Is funding of women's needs transparent?

Assessments of adequacy can be fleshed out if governments are transparent in their budget decisions.

The critical significance of transparency was laid bare when an audit in 2021 revealed that funding to address women's needs in community sports (the Female Facilities and Water Safety Stream Program) had been inappropriately assessed and distributed. The program was based on deficient design with no guidelines, no application forms and no tender process. Although part of the justification for such community sports support had been to make local clubs more women friendly, reporting revealed that the Office of Women had not been consulted and some of those receiving funding to support women had no sporting activities available to women.¹⁷

Transparency can be undermined with budget changes that shift money from a specific program to general funding of a portfolio.

The Australian Nursing and Midwifery Federation (ANMF) highlighted how program funding can 'vanish' in this way when it tracked the budget allocations for wage parity for nurses and carers in the aged care sector, who earn less than nurses and carers in other areas. Successive federal governments had made a specific allocation for aged care wage parity for nurses and carers since 1996. This changed in 2013 when commitments of \$1.2 billion for wage parity were redirected to general aged care funding. It makes following the money for wage parity difficult and easier for the money to be used for other purposes.

Funding new priorities by reallocations from existing commitments is rarely transparent.

In its 2002-3 budget, the Howard Coalition government reallocated \$10.1 million of underspent funds earmarked for the Partnerships Against Domestic Violence program to fund a public anti-terrorism campaign that included a fridge magnet mailed to every household. When discovered by the Opposition Shadow Minister for Women, Nicola Roxon, advocates and researchers raised concerns about the loss of domestic violence services and the consequences for women and girls who are victim-survivors of domestic violence. The Office for Women responded by commissioning the first major analysis of the costs of domestic violence to the Australian economy. This gender impact assessment was successfully used to campaign for further funding of domestic violence programs with increased transparency resulting from their announcement in subsequent Women's Budget Statements (as well as the Budget Papers).

Does funding take into account price rises, forward commitments and changing needs?

Governments may claim that spending on particular services has been maintained, or even increased. It is important to assess whether the claim takes into account inflation (or rising prices), whether appropriate commitments have been included in the forward estimates and whether needs have changed.

Inflation. If the same amount of money is allocated, but it costs more to accomplish the same task, then in real terms there has been a funding cut to the service.

An example is the Liberal-National Coalition government's claim that they spent more than \$1 billion per year on aged care between 2014-15 and 2017-18. Adjusting for inflation, the real spend on aged care was between \$679 million and \$796 million per year, not \$1 billion.¹⁸

Forward estimates. Federal government budget papers provide forward estimates or rolling projections of the allocation to a policy over three years following the budget year. This is not a guarantee of actual expenditure.

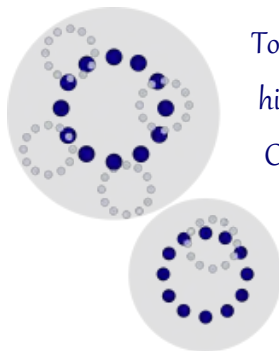
For example, disability advocates welcomed the commitment in the 2018-19 budget of \$43 billion of funding of the National Disability Insurance Scheme (NDIS) over the forward estimates to 2021-22. However, the NFAW noted that this allocation was not secure, being contingent on matching funding by the states and territories.¹⁹

Population growth and changing needs. When the needs of a group change or its population changes, per capita funding is affected in real terms. For instance, if the same amount of money is provided but the number of people to be covered has risen, then in per capita terms there has been a cut.

Slow government response to the growth in the aged population and its changing needs has produced a mismatch of demand and supply of aged care services in Australia. In particular, residential care is increasingly focused on high dependency care while Australians are preferring to age-in-place.

The Coalition federal government's 2020-21 budget included funding for an additional 23,000 home care packages. Another 10,000 packages were announced in the MYEFO in December 2020. However, while 115,000 people are receiving home care, 102,000 have been waiting, often for more than a year, for similar packages. Many will not receive the care that they need to remain in their home and will be forced into residential care. For older women, and single older women in particular, inadequate funding for quality care at home will present challenges, given that they are more likely than men and couples to experience financial insecurity in retirement.²⁰

Public sector employment



To a significant extent (...) the Australian Public Service is constrained by its history and its human resources practices are extremely resistant to change. Changes to 'accommodate' women have been relatively recent and superficial (...) The historical context has led to a path dependence from which it is difficult to depart [with](...) previous gender equity initiatives (...) firmly based within managerialism and the masculine culture.

Sue Williamson and Linda Colley (2018)²¹

Gender and work

Public service is a critical source of decent employment for women.

Women represent 60% of federal public sector employees and comprise almost 3 in every five new ongoing recruits. The gender pay gap for women is smaller in the public sector than the private sector – 13.5% compared to 21.7% in the 2022 Employer Census. However, women hold less than 50% of public sector senior leadership positions. Women are also more likely to be employed in health and human resources, whereas men make up the majority of employment in engineering and technical jobs.²²

Neoliberal narratives have for several decades eroded the contribution governments once made to women's employment and employment conditions.

Measures such as freezing public sector recruitment have intensified workloads, resulted in poorer wages outcomes and service provision. Caps on public sector wage increases (and loss to superannuation), such as those in place in New South Wales between 2011-2023, makes it difficult to attract new workers to essential sectors, contributes to decreases in real wages and undermines wage growth for the labour market.²³

Neoliberal measures applied to the public service can be accompanied by the out-sourcing of services to external suppliers, who may pay lower wages and lower the conditions of employment. Contractors are frequently required to do more work in the same or less time, and it is harder to ensure that they apply values of equality and diversity.

Outsourcing and working conditions

Outsourcing

Over the past five decades the public service has become over-reliant on outside labour hire and consultancy firms. There has been renewed interest in the work of consultancy firms in the aftermath of the PricewaterhouseCoopers International Ltd (PwC) tax advice scandal in early 2023. Further revelations of overcharging, conflict of interests and poor advice have come to light in the areas of defence, aged care, the environment and social security.

Consultancy work for the federal government undertaken by the 'big four' consultancy firms (KPMG, PwC, EY, Deloitte) was reported by the independent Centre for Public Integrity to exceed \$1.4 billion in 2021-22, an increase of 400% over the decade.²⁴ This trend has hollowed out the public service, reducing knowledge and skills in core service areas and undermined government accountability and transparency. There are fewer public service employment opportunities; and undue outside influence on policy agendas distorts government service activity. While some, such as KPMG, have reported benefits of gender-responsive budgeting²⁵ more often the impact of consulting work on public sector employment and service, provision undermines gender-responsive budgeting.

The aged care system that emerged from the 1997 Aged Care Act, under the Liberal National Coalition government, is a prime example of outsourcing arrangements and privatisation. Provisions were made to pay aged care service providers to deliver aged care, through subsidies, capital grants and aged care programs. *The 2021 Royal Commission into Aged Care Quality and Safety found that this outsourcing system is deeply flawed and distinguished by failure to deliver either quality aged care services or employment opportunities.*

Working conditions and aged care

These issues were canvassed in the 2021 Royal Commission report that was highly critical of the existing funding and regulatory system, the precarious nature of, and pressures on, the workforce and the quality of the services delivered. The Commission noted that across all services ‘substandard care and abuse pervades the Australian aged care system’.²⁶

Other studies have detailed the dire situation of care workers, including increasing pressures because of worker shortages and particular disadvantages faced by migrant workers, predominately women. One study concludes that workers of non-English speaking background are more likely to be employed casually and to be underemployed in aged care, and especially if they are employed by a for-profit provider.²⁷

These systemic problems contributed to COVID-19 deaths and to increasing demands for widespread reforms particularly in pay and working conditions if aged care services are to meet community expectations.

The 2023-24 federal Labor budget allocated \$11.3 billion over four years to fund the 15% pay rise to aged care workers, awarded in a work value case by the Fair Work Commission. This is likely to have a positive impact on gender equality by helping to close the gender pay gap and increasing the status of the work in this sector. However, the pay rise is modest and does not apply to all workers in the sector.

Notes, Case study 3

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