

MAKING CONNECTIONS—DOMESTIC VIOLENCE, FEMINISM AND PCT

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INTRODUCTION

Embarking on a chapter which reflects on therapeutic engagement with women experiencing domestic violence (DV) feels complex. Part of my intention within this chapter is to unravel some of the elements involved in this work, including focusing on aspects of women's lives, which are specifically located and informed by historical, political and social contexts. So I want to professionally and personally place myself within this exploration, as well as interweaving women's narratives within the discourses of person-centred therapy (PCT) and feminism.

I will be exploring two 'scenarios' which are an amalgamation or synthesis of work with clients. The process and context of this work will be discussed, highlighting issues of power, diversity and social constructs as being intrinsic to this exploration (Walker, 1990; Marecek and Kravetz, 1998; Seu, 1998). Integral to this discussion will be the incorporation of my own ongoing process and reflections.

Both scenarios concern heterosexual relationships, reflecting the largely gendered nature of DV and the fact that it is overwhelmingly male-on-female (Radford, 1987; Hague and Malos, 1999; Maynard and Winn, 1997). Same sex and extended family DV also occurs and I am neither assuming that issues around heterosexual relationships exclude these relationships but neither am I presuming a complete overlap. I have tried to explicitly and implicitly illustrate how feminism and PCT work together, and in conflict, on issues of DV. While I have fore-grounded the aspects of my work which relate to DV, this is not everything that we worked on nor is it everything these women are. Highlighting a particular element can run the risk of rendering whole lives as invisible, privileging the violence as the only way of identification.

WHO ARE THE WOMEN?

Firstly, these ‘scenarios’ represent an amalgam and reflection of women I have worked with—so more than one woman’s story is integrated within each scenario and all identifying personal details have been removed. Secondly, they are all from at least two years ago, so I am relying on a mixture of detailed case notes and retrospective reflections. Thirdly, all the women were contacted and permission given to ‘write’ their stories. Respecting and honouring my clients’ lives and voices is informed by my therapeutic, personal and feminist allegiances. It feels vital to engage with these clarifying processes as I am committed to giving women a voice and a voice with which they choose to engage. At the same time I want their stories to be as unrecognisable as possible. The risk here is that I could present a generalised picture rather than individual frameworks and lives. Throughout this chapter I will try to balance the need for anonymity with the need for specificity. My abiding concern is for the welfare and well-being of these women and finding a way of working with these knotty issues of power, confidentiality and representation.

WHO AM I?

Professionally I am both a person-centred counsellor and an academic. My academic work is largely located within a health care studies department of a large metropolitan university. I have worked there, as a lecturer, for about seven years and while working part-time, trained to be a counsellor. I have counselled in both statutory and voluntary organisations and am presently counselling with one voluntary organisation in particular. I have been interested and involved in issues around domestic abuse and violence for over 20 years. More recently I have researched areas around DV with minoritised populations as well as worked therapeutically with women who have experienced (or are experiencing) DV. I am a White, middle-class woman which locates me variously in positions of both privilege and minoritisation. Who I am, my beliefs and attitudes, is intimately tied up with how I work therapeutically with my clients. Acknowledging diversity and difference forms part of how I move in my world, and both feminism and PCT form part of my identity.

A BRIEF LOOK AT FEMINISM

Definitions of feminism are by no means unified, nor are they static—they are an area which is both contested and evolving. However, rather than go down the route of endeavouring to classify feminisms, and mine in particular, I hope that elements of my perspective will emerge through the scenarios. At its heart is the recognition that women’s lives are politically, socially and culturally situated, informed by

patriarchal and socially constructed norms. This affords women inferior status and constructs their meaning as being in relationship to, and less than, men. Interlinked with these meanings is that of other diverse constructs, e.g., race, class, sexuality, religion, culture, etc., which have further implications for women's lived experiences and positioning.

MY TAKE ON PCT

Rogerian counselling has at its heart a commitment to the client's internal frame of reference. Integral to this is a belief in the essential trustworthiness of the client, informed by the conviction that all individuals move instinctively towards realising their full potential (Colledge, 2002; Dryden and Mytton, 1999; Mearns, 2003). A respect and honouring of the client's understanding and experiencing of their world further informs the process of the therapeutic engagement. Rogers emphasised the importance of the therapist's ongoing self-awareness, seeing the therapist as 'the companion to the clients on their journey as they enter into and explore their inner worlds' (Dryden and Mytton, 1999: 78). Thus, for me to be able to provide an environment in which the client can experience themselves, their world and our relationship, there has to be a commitment on my part to provide the 'attitudinal conditions' (Nelson-Jones, 1996) for this exploration.

MEANINGS OF DOMESTIC VIOLENCE

There are a variety of perspectives which traditionally inform our understanding of DV. Not least of these is the historically informed notion of women being men's chattels, their belongings, to do with what they willed. Discourses of social construction and feminism consider that our understandings of gender, and gender relationships, are 'built', i.e., socially defined, as opposed to essential, i.e., determined by biology. Essentialism, however, often seems to have dominance when considering the 'hows' and 'whys' of DV. For instance DV (within reason) was historically considered as a manifestation of (essentialist) beliefs around masculinity in response to femininity—a natural expression of power, dominance and control over a subordinate being. Thus, domestic abuse is hinged on 'patriarchal norms and practices which lay the groundwork for violence to occur and permit one group (men) to dominate and control another (women)' (Sharma, 2001: 1408).

While ostensibly there is now less overt acceptance of DV and an increasing recognition of it as a serious social problem (Mooney, 2000) it shows little sign of abating. It is well known that DV is widely under-reported (Dobash and Dobash, 1992; Mooney, 2000) and that the true extent of DV is unknown. Added to this has been the privileging of the physical aspect of violence (with its often clear

'evidential' characteristics) while other more insipient manifestations e.g., sexual, financial, emotional and psychological, have gone unacknowledged (Batsleer et al., 2002).

The advantages of violence as a method of control for establishing/maintaining power are commonly recognised (Hanmer, 2000; Hearn, 1995) and linked with how heterosexual relationships can be played out. Masculinity is often personified by control, power, rationalisation and strength, while femininity's personification is one of submission, nurture, vulnerability, weakness and subservience. These seemingly static and fixed essentialist notions may result in heterosexual relationships where complimentary discourses of domination and subordination reveal themselves in terms of DV. So in this instance DV may be explained as an 'understandable [if not always justifiable] response to another person's actions' (Radford, 1987: 143) leaving the way open to victim blaming and the 'why doesn't she leave him?' school of thought.

A WORD ABOUT AGENCY

Finally before engaging with the scenarios I want to briefly look at the idea of agency—that is being the main actor in your own life. I feel this concept has a great deal of influence on how we may respond to DV, from both Rogerian and feminist perspectives. Agency, a Westernised liberal concept, locates power and choice with the individual—believing in the autonomous and private self that can somehow stand apart from history and culture (Marecek and Kravetz, 1998). This individualising of women's experiences outside the social context runs the risk of expecting them to act divorced from the oppressive system in which they are positioned. This leads to dichotomous beliefs around women either being considered agents of their own destiny (and, therefore leaving) or victims (and staying) (Mahoney, 1994; Waterhouse, 1993). PCT, it has been argued, is built on assumptions of free choice and self-determinism, based on individualistic notions of agency (Marecek and Kravetz, 1998) which assumes that personal control and choice is a universal ideal and possibility. Feminism on the other hand has emancipatory goals and a history of 'consciousness-raising' built on beliefs of what women should and could be like. The potential here could be to equate 'change' with feminist ideals as opposed to working with the diverse value systems which clients can bring. Women's agency, therefore, may become constricted by the very frameworks which are intended to 'free' her.

Feminism works with the explicit premise that a woman's experience and response to DV are informed by these societal power imbalances (Sharma, 2001; Burstow, 1992; Walker, 1990; Waterhouse, 1993). However, this focus can render invisible the other hierarchies of power (Marecek and Kravetz, 1998) and the diverse ways in which women assert themselves in response to the violence (Mahoney,

1994). At the same time PCT can honour women's individual understanding of DV, while potentially decontextualising it from its genderised framework (Waterhouse, 1993; Lyddon, 1998).

Farzana

A Pakistani Muslim young woman, 19 years old who has been married for two years, with one baby girl. Farzana lives with her husband's family and the violence (physical, mental and sexual) comes from her husband, whom she came over to England to be with. While English is not her first language she can communicate; but initially 'chose' to have a translator for more complex reasons than just 'translation'. Her husband and his family wanted her to come to counselling as they see her weeping and depression as her inability to acclimatise to a new environment and be a 'good wife'.

Working with Farzana epitomised the value and difficulty of working with PCT and feminist constructs. PCT and feminist theory emphasise the importance of working within a woman's frame of reference, validating and acknowledging the way in which she constructs her world and (in the case of PCT) reflecting that world back to her (Hawtin, 2000; Dryden and Mytton, 1999). Conflict can arise when in endeavouring to be a 'companion' to Farzana's journey I neglect to work with the impact and influence of my own gendered, racial and social situation on the therapy itself.

In terms of working with Farzana there were two immediate difficulties: the first was that she had brought a family friend as a translator, and secondly that she had been 'told' to come by the very person who was abusing her! This latter particularly reverberated for me in many ways. It reflected the feminist stance about DV which acknowledges how the multi-faceted nature of abuse often manifests itself in 'blaming the woman' for whatever transpires (Kelly, 1987). This was the case with Farzana. It was not the problematising of the abuse itself which was her desired focus but rather how she was 'mis-managing' the isolation and bewilderment of her new life. The client believed that the abuse was deserved or a result of her inadequacies as a woman, wife and mother. This is clear example of how our understanding of male violence is often filtered through notions of the man's violent behaviour being either aberrant or 'understandable' (Stanko, 1985) and 'the fiction that violence is exceptional is fundamental to stereotypes that portray battered women as helpless, dependent, and pathological' (Mahoney, 1994: 63).

Added to this is the potential to typify Farzana's experience as being a characteristic of her cultural background. Both Batsleer et al. (2002) and Sharma (2001) discuss the risk of locating abusive behaviour within cultural norms rather than individual culpability and response. Thus, stereotyped assumptions that race is the primary identity of an individual can act as a filter for understanding Farzana's

experience. The importance of transcultural work requires us to work with the fluidity and variety of cultural, religious and gendered standpoints rather than presenting monolithic voices of representation (Marshall et al., 1998). At the same time to negate the importance of race, culture and religion in terms of client's lived experience would be equally problematic.

Both aberrant and 'understandable' perspectives locate the violence in terms of a response to women's deviations from their appropriate roles (Stanko, 1987; Maynard and Winn, 1997). So for me the core condition of acceptance needs to acknowledge these hugely influential constructs on how I may respond to my clients. Rogerian theory has often been criticised as ignoring these political constructs in favour of an idealised and value free unconditional positive regard (Lyddon, 1998; Biever et al., 1998). Feminist theory, on the other hand,

urges therapists to take into account society's belief system concerning accepted role patterns and behaviours that have been prescribed for males and females. (Biever et al., 1998: 165)

Staying with Farzana's 'here and now' experiencing of the dislocation and discordance in her world formed an important part of the work. My sense was she had had little opportunity to do this before. It felt vital to honour and respect her world without mythologising it and placing it within some stereotypical world of 'this is what happens in South Asian families and to South Asian women'—thereby making invisible her own understanding and response to her world. My own fear was that I might unwittingly colonise (take over in terms of 'reading' her experience through my Westernised world) her experience, rather than recognising her in all her complex individuality as opposed to being representative of a group to which she belongs or to which she has been assigned (Gordon, 1996).

I worked hard to empathically accompany Farzana on her journey of telling, gradually finding myself getting to 'know' her rather than feeding my sense of her through particular constructs of meaning. Again this is where PCT with its non-analytical framework and its emphasis on the core conditions comes into its own.

I found working with a translator difficult. It felt like Farzana's and my processing was restricted due both to the 'act of filtering' which translation can take as well as the prior relationship between the translator and Farzana. PCT works very much with the empathic response and sensing of the client's process. Reflection plays a big part in this, where clarification of content can be pivotal in gaining a clear insight into the sensed world of the client. Having a third person translating both the literal meaning as well as her interpretation of what Farzana and I were saying often obscured what was being said. My sense was that Farzana's and the translator's relationship also served to further 'monitor' the work. I was able to reflect this back (albeit rather awkwardly) to Farzana and, indeed, by association, the translator. However, while from my Rogerian perspective the creation of space in which a client feels safe and respected enough to explore was being restricted, for

Farzana this was not initially her expressed experience. The presence of the translator had enabled and supported Farzana to come to counselling. It was here that conflicts between person-centredness and feminism were further highlighted. At a very basic level here we were a group of women, with the opportunity to share our gendered and racialised experiences. We could have engaged in a more cooperative activity, where personal experiences could have been linked to a larger system of inequality, hierarchy and control. Space could have been made to discuss how we might unconsciously collude and conform to these systems. While this may seem somewhat facetious there is a strong feminist commitment to highlighting:

... personal problems [as] both created and exacerbated by societal power imbalances. Helping women make the connections and resist is a key to what feminist [theory] is about. (Burstow, 1992: 40)

The conflict arises when it seems that the focus is taken away from the woman's felt experience and the feminist commitment to 'enlightenment' is given precedence. Thus, instead of 'identifying and honouring a woman's belief structure and view of reality and then joining her there unjudgementally' (McClosky and Fraser, 1997: 437) I would be asking her to join me within my feminist framework. This would have set me up as the 'expert', a role which conflicts with my Rogerian beliefs around trusting the client's own authenticity. So my acceptance of the translator had to be on Farzana's terms and not my own.

Initially we stayed with Farzana's distress around her continued sense of dislocation in terms of being away from her country of origin. The distress was located as her inadequacies as a mother and wife. Feminist frameworks which acknowledge the influence of these socially proscribed roles in terms of women's sense of value were useful in this instance as they placed her experience within the construction of motherhood and heterosexuality. Working from both a Rogerian and feminist perspective facilitated the validation of her experiences within a non-judgemental and empathic framework. So the Rogerian process of the reflective, minute-to-minute empathic response and the feminist stance of working from the woman's own voice provided a space for Farzana to begin to have a sense of her own experiencing. The painfulness, for me, was her insistence in working with her 'wrongs' as isolated and pathological problems as opposed to being located in contextual frameworks. By choosing not to highlight these structures to her, I felt sometimes collusive in her abuse and her sense of being in the wrong. However, at the same time Rogerian theory rightly places emphasis on the unconditional positive regard of the client's framework. This includes walking alongside Farzana's distress and further enabling therapeutic conditions where she could feel accepted and respected. The struggle for me, at times, was to accept her framework and not see it filtered through my feminist ideologies. I needed to trust that her actualising tendency would enable her to be more accepting of herself—in her own time and way and not through imposing my own understanding (Dryden and Mytton, 1999).

We continued to work with the translator for some time until one day Farzana came without her. She was both excited and pleased about her decision while I felt hugely moved. She had been able to utilise the very way in which she had been located by her husband and his family to her advantage by saying that her shame was too great to bear a translator. Her acknowledgement of subverting oppressive frameworks of shame and blame emerged as we continued our work. The feminist notion of agency was interwoven with the importance of her family and community. We worked with our differences, clarifying that while in Western cultures individualism and self identity are part of our philosophical construction of self, her response to her cultural norms construct the self more in terms of community and family (Choudry, 1996; Sharma, 2001). At the same time feminist theory emphasises the importance of being aware of diversity and commonalities, challenging the 'homogenized conceptualisation of "Asian" and [acknowledging] instability of ethnic boundaries and practices' (Marshall et al., 1998: 125)—so not fixing meanings into a static and prescriptive stereotype. Similarly Rogerian personality theory considers that personal realities and perceptions are informed by past experiences, opinions and responses, in particular 'conditions of worth' (Rogers, 1959). While these perceptions are very real to us in the moment they are not static and can change over time and place (Dryden and Mytton, 1999).

The decision not to have a translator was a turning point for Farzana. She began to experience a sense of self-worth and acceptance. In this the non-acknowledgement of the abuse could also be explored, with the implicit understanding that leaving was not an option. The difficulties of leaving, particularly for some minoritised women involve the obstacles of finances, housing, transport and childcare but for Farzana there was also the issue of language and immigration laws. The 'one-year' (two years as of April 2003) rule stipulates that women who have entered the country as spouses of British citizens have neither recourse to public funding nor leave to stay, should the marriage break down within that time (Batsleer et al., 2002) unless they can 'prove' DV to the satisfaction of the Home Office. There is also the fear and possibility of having a child/children taken from the mother and bringing shame and dishonour to her family back home (Choudry, 1996; Sharma, 2001; Batsleer et al., 2002), again fears which have much veracity. Farzana's agency or pursuit of self-worth was to be developed from within her relationship emphasising the many ways that women will work with the abuse in their life and challenging the popular belief that it is only through leaving that women assert themselves (Mahoney, 1994).

The step-by-step work of clarification, reflection and acceptance enabled her to engage with a sense of self and reduce some of the ways in which she experienced her distress as 'her problem'. PCT, which values the individual organismic self, worked well with some of the feminist constructs of gender, sexuality, race and class. Farzana could not be taken out of these milieus but neither could I assume some hegemonic understanding of how these contexts influenced her. The conflicts

arose when I either negated the influence of these constructs on how I responded to Farzana or forefronted my feminist ideologies as a way of explaining Farzana's world. While I did not always shy away from challenging her individual pathologisation of her experiences, the balance between placing myself in the role of the expert and trusting her authentic self was sometimes hard to maintain.

Jessica

A white heterosexual woman, in her thirties who identifies as middle-class. She has lived with her partner for three years and works in public relations. They have no children. Jessica has recently been feeling bewildered, confused and lost. Both incomes are controlled by her partner and she is often forced to have sex with him to keep the peace. She is constantly told that she is stupid and ugly. These moments are interspersed with moments of remorse, and subsequent deep happiness and fun, with a good social life. No one knows of the abuse and she describes herself as deeply ashamed and embarrassed. We worked together for about seven months and she specifically wanted to explore her relationship.

The focus of our work together in the initial stages was her bewildered disbelief that this was happening. 'Violence, especially from those who are apparently to be trusted, is a deep and terrible assault on the self' (Walker, 1990: 145). Trying to equate her experience of the abuse with her understanding of love was a huge struggle (Waterhouse, 1993; Jackson, 2001; Towns and Adams, 2000). By drawing on feminist theories of heterosexual and romantic love I was able to contextualise her confusion rather than individualise it as being completely separate from popular cultural messages. The influence of discourses of 'perfect love' as a way of silencing women's talk about the violence (Jackson, 2001; Towns and Adams, 2000) needed to be considered. I was able to reflect the confusion being experienced regarding meanings of love and how it felt proscribed with various characteristics. This, I feel was both a way of working with my congruent/empathic sense of Jessica as well as highlighting some of the potentially restrictive ways we may understand romantic love.

What became clear as we progressed was that she did not at first consider his behaviours to be DV but rather indications him being 'screwed up'. This feeds into a number of discourses which consider how women, in trying to resolve the love/abuse dilemma, will explain it as the boyfriend being messed up, having anger problems or having had a hard life (Jackson, 2001).

As with Farzana I often felt torn between feminist 'consciousness-raising' commitments and my Rogerian commitment to working with her conceptualisations. I struggled to work with my conflicted self by engaging with her process, step by step. Immersing myself within her framework enabled me to

engage more empathically, accepting and working with her journey. This did not mean that I self-abdicated but rather I was able to give space to my struggle without it taking over Jessica's own struggles. The two were not mutually exclusive but rather interwoven in ways which emphasised the persistence of unchallenged media and mainstream-fed conceptions of heterosexual relationships. This creation of an accepting, non-judgemental space in which Jessica could explore the conflicts in her life was fundamental. My belief in her trustworthiness could enable me 'to vacate the position of expert and instead work to enable the client to realize [her] own resources and self-understanding' (Hawtin, 2000: 172).

Having said that, when Jessica reached a point where she recognised her experience of the relationship as abusive, at some unwelcome level I felt vindicated and am aware that despite all my best intentions I was still harbouring elements of a belief of 'knowing better'! Writing this down is uncomfortable and highlights how sometimes feminism and PCT can clash, blocking my ability to work without judgement.

Empathising with her sense of betrayal and hurt was painful and fundamental to our therapeutic engagement. Being able to engage with the Rogerian belief in the authenticity and actualising tendency of the client seemed so helpful to her process. It meant that the space was created for Jessica to explore without being told what and how to feel. Emerging from this stage in the process was her shame. Shame is often a very powerful and stultifying response to DV and can keep women immobilised (Walker, 1990; Sharma, 2001; Jackson, 2001). This is linked with DV, as discussed before, being seen as a reaction to women doing something wrong. So the shame in not being a good enough woman/wife feeds into this belief as does the shame of being a 'victim' which is often characterised as irresponsible and self-pitying (Jackson, 2001).

Caught up in this was her belief that this 'sort of thing' didn't happen to people from her background and class. Again it was important to work both with the societal stereotype which places DV as a working-class phenomenon without losing sight of Jessica's own understanding of what was happening. For Jessica the maintenance of the introject that 'it shouldn't happen to women like her' resulted in her working hard to find explanations for the violence that fit this belief. Rogerian theory discusses how we will endeavour to maintain an introject particularly when it is challenged, until we are ready to renegotiate our understanding (Colledge, 2002; Thorne, 1992). We stayed in this uncomfortable space for some time; feeling congruently stuck with what was happening, and what should be happening. It formed a significant stage where Jessica was able to name her partner's behaviour as abusive—thereby validating her experiencing. Once the abuse was 'named' the work seemed to speed along. While the sense of shame remained she was able to confide and seek support from close friends and family, enabling her to feel less isolated within her abuse.

The staying with and clarifying her sense of unreality and conflict was a constant part of our process. In conjunction with this, Jessica came to her own understanding

of how the moral responsibility for the success of a heterosexual relationship resides with the woman, which in turn means when it fails the failure is often felt to be hers (Mahoney, 1994). Staying with the hurt and anger, while uncomfortable, was a rich space in which we shared the difficulty of being angry and a woman. I found myself often feeling furious and energised by her experiences and at some level wanting to grab her by the hand and flee. My own framework sometimes struggled to allow her the space to experience the denial. My desire for her to 'see' her experiencing as abusive was often very strong. It is at times like this when I try to work very closely with the core conditions of congruence, empathy and acceptance. Their value lies in the belief that working with the client's framework cultivates therapeutic growth and self-realisation. I have a great deal of commitment and belief in the vitality of the empathic engagement with the client and this enables me to [mostly] stay with the client rather than prioritise my own feminist frameworks. However, this belief does often struggle with my own sense of the oppressive frameworks which seek to maintain control and encourage conformity. While I felt able to reflect on the struggles in response to Jessica's process, I am also aware that my own idealism was itching to get loose! I know I was not always successful in accepting Jessica's own understanding and this, for me, is the constant dilemma in terms of working with both PCT and feminism.

CONCLUSION

What I have hopefully illustrated in this chapter is the value, and difficulty, of working with PCT and feminism. The scenarios I have explored clearly demonstrate the chaotic and multi-faceted nature of DV and that there are no easy answers. It is about focusing on where the woman is in her life and working with her in her framework and her world. For me it is also about acknowledging that the process of 'becoming a person is made difficult by internal factors [which] may be impeded by external, social and political constraints' (Waterhouse, 1993: 64). The world of DV can be hugely distressing and even debilitating when entering into it with the woman. The potential for Rogerian counselling with its open, accepting and empathic approach to provide space for the women to 'be' is clear. The trusting of the client's world takes nothing away from her, nor does it try to control her process but rather walks alongside her experiencing.

Feminism also honours the woman's individual reality and her understanding of her world. It places this meaning within a political and social context which is defined and controlled by patriarchal norms and values. Thus, a framework for 'understanding' women's experience of DV is given, linking it to notions of masculinity, femininity and power relations inclusive of racial, cultural, sexuality and class positions. The strength of combining PCT and feminism lies in being able to contextualise both my own and my client's responses to DV. Instead of

placing the individual outside the political arena, which PCT can do, it locates them within it. Thus, women can begin to make connections with their experience with some of these discourses instead of individualising them as their isolated problems. The conflict arises when feminism takes precedence over the individual experiencing of the client. While at some level this is about feminist theory itself, it is also about me and how I respond and feel in relation to narratives of domestic abuse.

The balance for me then is to be able to acknowledge my feelings and to consider my feminist beliefs as a way of underpinning and potentially informing the therapeutic process. On reflection, what I think sometimes happened with these two scenarios was that I latched onto feminist theory as a way of managing my own sense of helplessness in response to their distress. So perhaps, at the core of this chapter is an emphasis on the need to be flexible and responsive with both approaches, using them together but always giving the centre stage to the client's therapeutic process.

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