Instructor’s Manual

for

Feminist Therapy

with

Lenore Walker, EDD

from the series

Psychotherapy with the Experts

with hosts

Jon Carlson, PsyD, EdD & Diane Kjos, PhD

by

Randall C. Wyatt, PhD

&

Charlotte Dick, MA

psychotherapy.net

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150 Shoreline Highway, Building A, Suite 1
Mill Valley, CA 94941
Email: contact@psychotherapy.net
Phone: (800) 577-4762 (US & Canada)/(415) 332-3232

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Wyatt, Randall C., PhD, & Dick, Charlotte, MA
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Instructor’s Manual for
FEMINIST THERAPY
WITH LENORE WALKER, EDD

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Tips for Making the Best Use of the DVD

1. USE THE TRANSCRIPTS
Make notes in the video Transcript for future reference; the next time you show the video you will have them available. Highlight or notate key moments in the video to better facilitate discussion during the video and post-viewing.

2. FACILITATE DISCUSSION
Pause the video at different points to elicit viewers’ observations and reactions to the concepts presented. The Discussion Questions provide ideas about key points that can stimulate rich discussions and learning.

3. LET IT FLOW
Allow the session to play out some so viewers can appreciate the work over time instead of stopping the video too often. It is best to watch the video in its entirety since issues untouched in earlier parts often play out later. Encourage viewers to voice their opinions; no therapy is perfect! What do viewers think works and does not work in the session? We learn as much from our mistakes as our successes and it is crucial for students and therapists to develop the ability to effectively critique this work as well as their own.

4. SUGGEST READINGS TO ENRICH VIDEO MATERIAL
Assign readings from Suggestions for Further Readings and Websites prior to viewing. You can also time the video to coincide with other course or training materials on related topics.

5. ASSIGN A REACTION PAPER
See suggestions in Reaction Paper section.

6. CONDUCT ROLE-PLAYS
After watching the video, organize participants into pairs, with one person to play the therapist and one to play the client. Assign each pair to role-play a therapy session using Walker’s feminist therapy
approach. The client may resemble the client in the video, a current
or previous real-life client, someone they know personally, or even
themselves. Participants should switch roles if time permits. As a
basic instruction, suggest to therapists that they begin with a focus
on creating an egalitarian relationship with the client, and that they
practice being open with the client about their values as they relate to
therapy and the therapeutic relationship. Encourage them to explore
the client’s racial, class, cultural, and gender contexts as part of the
process of understanding the client’s problem. See *Walker’s Approach
to Feminist Therapy* in this manual for a brief review of how she
works.

After the role-plays, have the groups come together to discuss the
exercise. First, have the clients share their experiences; then have
the therapists talk about what the session was like for them. What
did participants find challenging about this way of working? Ask the
observers to comment on what they noticed about the therapists and
clients throughout the role-play. Finally, open up a general discussion
on what participants learned about Walker’s approach to feminist
therapy.

An alternative is to do this role-play in front of the whole group with
one therapist and one client; the entire group can observe, acting as
the advising team to the therapist. Before the end of the session, have
the therapist take a break, get feedback from the observation team,
and bring it back into the session with the client. Other observers
might jump in if the therapist gets stuck. Follow up with a discussion
that explores what participants found exciting and/or challenging
about this way of working.

7. WATCH THE EXPERTS SERIES

This video is one in a series portraying leading theories of
psychotherapy and their application. Each video in the series presents
a master therapist working with a real client who has real problems.
By showing several of the videos in this Experts series (See the More
Videos section for a complete list of the videos in the series), you can
expose viewers to a variety of styles and approaches, allowing them an
opportunity to see what fits best for them.
**More Videos with this Client:** In this video, Dr. Walker works with a client named Gina. Gina is featured as a client in two other videos in this *Experts* series: *Existential-Humanistic Psychotherapy with James Bugental, PhD* and *Adlerian Therapy with Jon Carlson, PsyD, EdD*. It can be particularly enlightening for viewers to watch these three therapists work with the same client to see how their styles, personalities and theoretical orientations play out differently. If you have viewers write a **Reaction Paper**—see the guidelines in this manual—you can ask them to address what differences they notice in how Bugental, Walker and Carlson work with Gina, and how these differences affect the outcomes of the sessions.

Other videos in the series use different therapeutic models. We can reflect upon the differences among these models by exploring the following questions:

- How does the model explain the therapeutic process?
- What assumptions does the model imply about the purpose of therapy?
- How is theory translated into practice in real-life situations?
- What is the role of the therapist?
- What outcomes are associated with successful therapy?

**PERSPECTIVE ON VIDEOS AND THE PERSONALITY OF THE THERAPIST**

Psychotherapy portrayed in videos is less off-the-cuff than therapy in practice. Therapists may feel on the spot to put on a good demonstration, and clients can be self-conscious in front of a camera. Therapists often move more quickly than they would in everyday practice to demonstrate a particular technique. Despite these factors, therapists and clients on video can engage in a realistic session that conveys a wealth of information not contained in books or therapy transcripts: body language, tone of voice, facial expression, rhythm of the interaction, quality of the alliance—all aspects of the therapeutic relationship that are unique to an interpersonal encounter.
Psychotherapy is an intensely private matter. Unlike the training in other professions, students and practitioners rarely have an opportunity to see their mentors at work. But watching therapy on video is the next best thing.

One more note: The personal style of therapists is often as important as their techniques and theories. Therapists are usually drawn to approaches that mesh well with their own personalities. Thus, while we can certainly pick up ideas from master therapists, students and trainees must make the best use of relevant theory, technique and research that fits their own personal style and the needs of their clients.

PRIVACY AND CONFIDENTIALITY

Because this video contains an actual therapy session, please take care to protect the privacy and confidentiality of the client who has courageously shared her personal life with us.
Walker’s Approach to Feminist Therapy

Lenore Walker’s approach to feminist psychotherapy focuses on maintaining a sense of egalitarianism in the relationship between therapist and client. Walker watches the power balance, accepts what the client brings into therapy, and assumes the client is knowledgeable about her own behavior. She doesn’t try to be a blank screen, and, in fact, endeavors to do the opposite by putting her values on the table and allowing her client to relate to her as a person.

Walker emphasizes the importance of focusing on clients’ strengths and not just their pathologies. Many women, she says, have not had their strengths valued by their families and by the culture in general. Psychotherapy allows an opportunity for both women and men to build on their strengths and inner resources.

Walker believes that the term mental illness has been used to label women who refuse to adapt to sexist roles and functions in our society. Those women who step out of traditional societal roles can be labeled with psychopathologies. Thus, Walker finds it essential to parse through what is personal and what is political in the problems clients present with. She looks at the racial, class, cultural, and gender contexts in all that her clients present to find out what part of a client’s dysfunction is due to societal expectations, and what part is unique to her own psychology and genealogy.
Reaction Paper for Classes and Training

Video: Feminist Therapy with Lenore Walker, EdD

• **Assignment:** Complete this reaction paper and return it by the date noted by the facilitator.

• **Suggestions for Viewers:** Take notes on these questions while viewing the video and complete the reaction paper afterwards, or use the questions as a way to approach the discussion. Respond to each question below.

• **Length and Style:** 2-4 pages double-spaced. Be concise. Do not provide a full synopsis of the video. This is meant to be a brief reaction paper that you write soon after watching the video—we want your ideas and responses.

**What to Write:** Respond to the following questions in your reaction paper:

1. **Key points:** What important points did you learn about feminist therapy? What stands out in how Walker works?

2. **What I found most helpful:** What was most beneficial to you about the model presented? What tools or perspectives did you find helpful? What might you use in your own work? What challenged you to think about something in a new way?

3. **What does not make sense:** What principles/techniques/strategies did not make sense to you? Did anything push your buttons or bring about a sense of resistance in you, or just not fit with your own style of working? Explore these questions.

4. **How I would do it differently:** What might you have done differently than Walker in the therapy session in the video? Be specific in what different approaches, strategies and techniques you might have applied.

5. **Other Questions/Reactions:** What questions or reactions did you have as you viewed the therapy in the video? Other comments, thoughts or feelings?
Related Websites, Videos, and Further Readings

WEB RESOURCES

Lenore Walker’s website

www.drlenorewalker.com

The Center for Psychological Studies at Nova Southeastern University, where Walker is a faculty member

www.cps.nova.edu

The Feminist Therapy Institute

www.feminist-therapy-institute.org

The Domestic Violence Institute

www.dviworld.org

The Association for Women in Psychology

www.awpsych.org

The Society for the Psychology of Women (APA Division 35)

www.apa.org/divisions/div35/

RELATED VIDEOS AVAILABLE AT WWW.PSYCHOTHERAPY.NET

The Abused Woman: A Survivor Therapy Approach

–Lenore Walker, EdD

Adlerian Therapy with Jon Carlson, PsyD, EdD*

Existential-Humanistic Psychotherapy with James Bugental, PhD*

Integrative Counseling with Jeffrey Kottler, PhD

Integrative Therapy with Allen Ivey, PhD

Narrative Therapy with Children

*additional videos featuring this client working with therapists from different theoretical orientations.
BOOKS


Discussion Questions

Professors, training directors and facilitators may use some or all of these discussion questions, depending on what aspects of the video are most relevant to the audience. On-screen minute markers are noted in parentheses to indicate where a topic arises in the video and transcript.

WALKER’S APPROACH

1. **The Double Bind:** Have you witnessed women clients in the kind of double bind that Walker talks about (1-4), where they cannot be considered both a healthy woman and a healthy person at the same time? If so, what does this double bind look like in your clients, and how might you bring your knowledge of it into the therapy? If not, how do you see societal expectations of women’s mental health differently than Walker does?

2. **On the Table:** Do you agree with Walker’s approach of eliminating the blank screen and putting her values on the table with a client (1-16)? What reactions did you have to her doing this? What are other ways that therapists bring themselves into the therapy relationship? What aspects of yourself and your values do you share with your clients?

PSYCHOTHERAPY SESSION

3. **Inviting Questions:** What do you think about how Walker begins and ends the session with Gina by inviting her to ask questions (2-1, 2-48)? What do you think Walker’s intent is? Is it effective? Do you, or would you, open and close sessions in this way? How do you think using this approach of inviting questions might affect the therapy you do with your clients?

4. **Focusing on Strengths:** Walker highlights Gina’s accomplishments and strengths at many points throughout the session (2-5, 2-10, 2-37, 2-45). What do you notice about the impact of these interventions on the therapeutic relationship, and on the course of the therapy session? Do you find it helpful in
your practice to highlight client accomplishments/strengths when working through their problems? Why or why not?

5. **Direct Questions:** Walker asks Gina a series of direct, specific questions about the abuse she experienced in her marriage (2-8, 2-15, 2-27–2-33). Watching these interactions, what reactions do you notice in yourself? If you were the client, would you have felt comfortable with these questions? In what ways do you think this approach would be helpful in your work with clients who have been abused? How might it not be helpful, and what alternative techniques might you use to help a client name and work through what she experienced? How do you decide when to inquire about concrete details with clients, versus leaving it up to clients to determine the amount of information they wish to divulge?

6. **Stepping Back:** What do you think about Walker’s decision to periodically step back from discussing the abuse and ask Gina questions about lighter aspects of her life (2-17, 2-24, 2-37)? What benefit do you think this back-and-forth rhythm brought to the therapy? What are some situations you have experienced with clients when you or the client has needed to pull back from intense material?

7. **Safety:** What did you think about Walker warning Gina not to assume everything will continue smoothly with her ex-husband in the divorce, and confronting her on needing to stay safe (2-36)? Was this a useful intervention? If so, how? If not, how might you have handled this moment in the session differently?

8. **Body Reactions:** Walker explores with Gina what it feels like when she knows to stay away from a new man she meets. She asks Gina where she feels it in her body and how her body reacts (2-40). What struck you about this intervention? How might it be helpful or unhelpful to her? Do you tend to incorporate body awareness as part of your therapeutic work with clients? What are some other ways you might explore the body’s reaction to danger, with Gina or another client?
GROUP DISCUSSION

9. **Blame:** Carlson and Walker highlight how much blame Gina has accepted for the abuse she experienced (3-6). Do you think that Walker addresses this well in the session with Gina? Why or why not? What are other ways you might explore with a client like Gina the idea of accepting too much blame and responsibility for the abuse?

10. **The Therapeutic Relationship:** How would you characterize the therapeutic relationship in this video? Did Walker and Gina form an effective working alliance? Did any aspects of their therapeutic relationship stand out to you?

11. **The Model:** What do you think about using a feminist therapy model with clients? Does it make sense to you? Do you see yourself using it with women who have been abused, or any other particular population? Do you think there is any population that this approach would not work well with? What specifically would you do differently from Walker’s model?

12. **Personal Reaction:** How would you feel about being Walker’s client? Do you think you could form an alliance with her and that she would be effective with you? Why or why not?
Complete Transcript of FeministTherapyWithLenoreWalker,EdD

Note to facilitators: Throughout the transcript below, we indicate on-screen minute markers that correspond with those that appear at the bottom right corner of the DVD on screen. You will find chapter markers on the DVD at five-minute intervals so that you may easily skip to desired points in the video.

WALKER’S APPROACH

1—1

Dr. Jon Carlson: Well, Diane, what do you know about gender-sensitive or feminist therapy?

Dr. Diane Kjos: Well, I think it’s a fairly new therapy. It’s, it’s… I don’t know that it’s really connected with any individual, per se. There are several people that have, involved in the development of this and continue to be.

The therapy is based on the idea that a traditional or patriarchal society that we have affects the lives of both men and women, so that sexism becomes sort of a problem, or has become or is a major problem.

Carlson: It’s my understanding that it does examine these roles and rules that really structure the interactions that go on between men and women. Psychopathology, though, is seen as being culturally determined, and therefore men and women are really affected differently.

1—2

The problem, though, seems to be that the theories that we have in psychotherapy come from a male perspective and a male’s viewpoint, male’s values.

Kjos: Yeah, I think the feminist, or gender-sensitive, therapist tries to work for more of an egalitarian approach. Or somewhat, there’s
some humanistic components to it. But one of the overriding pieces is client empowerment and basically helping clients learn about what the implications of society and teaching clients how to function more effectively in society at this point.

**Carlson:** So in some ways, it’s like some of the other theories, but it’s different as well.

Why don’t we bring in our guest, Lenore Walker, and find out more about feminist or gender-sensitive therapy.

Welcome, Lenore. Thank you.

**Dr. Lenore Walker:** Thank you.

1—3

**Kjos:** Welcome.

**Walker:** Thank you.

Hi.

**Carlson:** Lenore, Diane and I have been talking about gender-sensitive or feminist therapy theory, and we don’t know what it is. Is….

Anything that you could tell us to help us understand its components, concepts?

**Walker:** Well, feminist therapy’s been around for awhile, since the early 1970s, and it came basically out of the scholarship of the new psychology of women so that we really began to look at the kinds of things we’ve been taught about human behavior that do come from male values and a male perspective on society, which then affects how women live, how they make their choices, and indeed, some of the things we label as psychopathology.

But I think one of the most important studies that helped us define feminist therapy was one done by the Bravermans and some of their colleagues back in, it was published back in 1970.

1—4

And they asked people to rate all of the kinds of behaviors and thinking and attitudes and feelings associated with a healthy man and with a healthy woman and then with a healthy person, and
what we discovered was that a healthy man was considered a healthy person but a healthy woman couldn’t be a healthy person. She didn’t have the same characteristics. Now that really sort of typified the kind of double bind that people who were in the feminist movement at that time were talking about. And I think Phyllis Chesler really wrote the first book on women and madness and talked about how mental illness was being used to label different women rather than having them adapt to society. And so it became a kind of antidote to adaptation therapies and much more in the early stages of being able to talk about techniques to empower women and to sort out what part of a woman’s dysfunction or her need or desire for therapy comes from living in a culture that doesn’t always value gender or women’s issues and what part might come from some intrapsychic or areas that they learn as they were growing up that are unique to them and their family situation rather than to society.

So you have to work on both.

Carlson: Both sides, yeah. The inner and then the societal context.

Walker: Exactly.

Carlson: How did you arrive as a feminist therapist?

Walker: Well, my mother says I was always a feminist from the time I was very young. Of course, I didn’t have the language or the words to support it.

But I was living in the East Coast. I was very involved in the beginnings of the feminist movement. It sort of resonated, I think, to my social justice issues. It just didn’t seem fair. And so I started doing, now what we call “feminist” activities, working in education and in trying to empower women and make it a more fair, egalitarian context for girls to learn as well as for boys. And I became involved in the early NOW groups.

Carlson: Is that the National Organization… for Women?

Walker: For women. Yes. Where we really began—they were really
using psychology techniques and group therapy techniques, but they claim they were leaderless groups at the time—and did what we called consciousness raising, where people shared their experience, and that’s one of the tenets that has remained in feminist therapy, is that the personal is political.

1—7
What happens to you as an individual affects everybody. It affects the power relationships between men and women. And I became, I think, one of the psychologists around the country doing this kind of work that was much more focused on the strengths of women and helping women discover their strengths and kind of be empowered by them. Although we didn’t use the word “empowerment,” either, in those times.

Kjos: As you’re talking, I’m thinking of the linking, too, to what we now pay a lot of attention to, the multi-cultural issues.

Walker: Absolutely. And feminist therapists did pay attention to those issues early on, but you know, we were mostly white professionals, even though many of us came from backgrounds that might have been of different class strata and some different cultural strata. We talked a lot about it, but we didn’t until, maybe about five to 10 years ago, really truly integrate multicultural kinds of attitudes and understandings as psychologists became more sensitive to diversity issues.

1—8
And we also dealt with the issues of lesbian versus heterosexual women and some of the tensions between the two groups of women, and we’ve dealt now with the issues of men and the new psychology of men, which is gender-sensitive to male ways of knowing the world.

Carlson: So it’s not for, you know, women only or for women only approach?

Walker: Well, I think it’s broadened, but not everybody. Some feminist therapists still insist they do the best work only with women, and they’re much more woman-oriented. Some feminist or gender-sensitive therapists really work with both men and women.
So it really is up to the individual. You know, when we first started, I think feminist therapy has undergone some generational changes. When we first started, it was mostly adapting feminist theory to good therapy techniques, and we challenged many of the original theories. We challenged orthodox psychoanalysis. We challenged behavior therapy. We challenged the touchy-feely humanist and existential therapy that didn’t pay attention to social context and just stuck with the present and the now kind of moment. And so we were much more critical.

Then, the second generation, we sort of moved and said, “Wait a second. There’s some good things…”

Carlson: Kind of an angry stage there, that first one, or a critical stage.

Walker: You know, the media made us out to be angry, but many of us were not. Some were, but some of our anger was even legitimate.

But we were, we were, we’d like to think we were being critical in using our scholarship because the research supported us. You know, if you only do research on men and then you try to generalize to women, sometimes you’ll be right but a lot of times you won’t be. And we challenged our scientific colleagues and said, “Wait a second. If you’re really scientific and you know that you can’t generalize from an unrepresentative sample, why are you doing that about human behavior?” So we really had to challenge in that way.

But the second stage, we stopped throwing everything out, and we said, “Whoa. You know, there are some good things from traditional therapy.” And so we began to look at some of the positives and began to integrate that in our therapy.

We then moved to a third stage, which was pushing the people in each of the, the leaders in each of the types of therapy.

And in that stage, we began to suggest that maybe you could keep the theoretical components and add gender sensitivity. And so, we
now have gender-sensitive psychodynamic therapies, gender-sensitive humanistic therapies, baby therapies and family therapies and all the major therapy systems.

And now, I think we’re into the fourth generation. The fourth generation says, “Feminist therapy theory is on its own.” So we’ve changed therapy; we’ve made it more adaptive and more responsive to the gender issues, but we also have a particular kind of therapy that says gender is so critical in our lives that we must put it prominent. It must be absolutely used in every therapeutic intervention through the process, because it will determine the outcome.

1—12

**Kjos:** With both men or, and women?

**Walker:** Yes, with both men and women.

**Kjos:** Okay.

**Walker:** And men don’t like it, being called feminist therapy.

**Kjos:** Well, so we use….

**Walker:** So we say gender-sensitive, but you know what, principles are pretty much the same.

**Kjos:** What about couples and families? Is it, could you talk a bit about that?

**Walker:** Absolutely. Absolutely. In fact, it’s critical when you talk about couples and families because we’re really talking about roles, and we’re talking about the stereotypical attitudes towards roles, how we’ve been socialized, how that affects how we think, how we feel, and how we act. And those are the, the three areas that, I believe, need to be congruent for good mental health to take place. And so, we have to look at that in couples where there are no models. This is new territory as we redefine male and female roles in relationships.

**Carlson:** You talked about the stereotypes and the cultural problems, but you also talked about the importance of the individual.

1—13

How do you tailor this approach to each individual so it isn’t just the,
kind of a boilerplate stamping out approach; everyone’s treated the same?

**Walker:** Well, there are a number of things that are very different in feminist therapy approach. It’s not just an add-on and stir and mix. There’s a sense of egalitarianism where we don’t think that each person in that relationship is equal because we know there’s a difference in power, and power and the analysis of power is critical in a therapist’s, a feminist therapist’s approach. But we go beyond that. We also respect what our client brings to that situation, and we accept that our client is really the most knowledgeable about his or behavior and how he thinks and how he feels. And it’s our job to make sense out of what the client tells us.

1—14

**Carlson:** Okay, so they bring themselves and they’re an expert on that, then you bring your credentials and therapy training.

**Walker:** Of course. Of course. And I watch the power balance between us. A lot of what I do in that therapy session is to try to give the client permission to be understood, to present the information in the broadest context. And then I use what they say to look at the social context, the cultural context, the historical context, their feelings of power and their use of power in a sort of political context, and I—and class, of course, context—and then I look at all the regular psychological kinds of things. So I’m always looking for issues of depression, issues of anxiety. How do they give meaning to their life? And what do they do when they get into positions that are difficult for them?

1—15

Because even if your, you understand it comes from a social context, if somebody pulls the covers over their head or somebody’s highly anxious or someone’s being beaten or someone has an eating disorder or many of the other kinds of disorders that are so common in women, it’s not enough to know where it comes from; you also have to have the therapy skills to be able to help them develop other ways of dealing with things that they may not be able to change so easily.
Kjos: Are there any specific techniques that we associate with this type of therapy? Like, we talk about empty chair in Gestalt. Something like that.

Walker: Well, the egalitarianism and the power relationship and looking at relationship is very critical. We use a little bit from everything, so if we need an empty chair technique, we’ll use it.

Kjos: It’s fine.

Walker: But we’re very careful how we use it. We’re very respectful of the client and timing is everything. I think it is in most therapies, but it’s everything in feminist therapy.

1—16
We use some self-disclosure and we do a lot of monitoring of that. In the early days, feminist therapists thought, “Uh oh. You have to tell everything to be equal.” That’s not really... We’ve worked on that and that’s not really where we’re at. We’re much more careful about what we say, but we put our values out on the table. We don’t try to be a blank screen because we don’t believe that you can be a blank screen. So if we, if we articulate our values, and we try to give the client the opportunity to relate to us as a person, and that’s a really important technique and we do it from the very start.

Carlson: Neutrality isn’t there, then.

Was: No.

Carlson: No. Not at all.

Walker: No, we don’t. We don’t assume neutrality.

Now, there may be some dynamic-oriented therapists who try to do a little bit more neutrality. Some people are more active.

1—17
I also have a cognitive behavioral approach superimposed on my feminist therapy, and I have a trauma approach. I’m very sensitive to issues of trauma, and so I often create the atmosphere that allows a person to talk about it, and I ask questions directly and then listen to the, what the client says and I move back and forth in areas as I sense
are appropriate for the client. And sometimes I’ll actually move to a place, see that I’ve hit a kind of rough spot, and I’ll move back and away from it, and then I might go back again depending upon the situation.

**Carlson:** Well, theoretically this sounds really sound, and it seems to make a lot of sense. Does it work? Is there any research that supports this approach?

**Walker:** Well, there’s not much research. That’s one of the issues that feminist therapists are working on now, but there’s the practical understanding. Feminist therapists are usually the therapy of choice once a woman, particularly the women, go to see a feminist therapist.

1—18

They don’t go back. They understand that, they feel understood. They feel empowered, and we know it works in the issue of violence cases. And with the statistics about the high numbers of women who have experienced physical or sexual abuse in their childhood, in their relationships, intimate relationships or in their workplace, we know that that’s a critical area that feminist therapy has been very supportive of.

**Carlson:** In a few minutes, we’re going to be watching you do a demonstration of feminist therapy. And what were your goals in this interview with Gina?

**Walker:** Well, this was an initial interview with Gina. I knew almost nothing about her when it started, so my major goal was to learn a little about her and about what was important to her.

1—19

I wanted to know what kind of background she grew up in. Interestingly, although she’s an African American woman, she’s a professional woman and grew up in a professional, educated family, and so we have to be very careful about making assumptions just by somebody’s racial identification. Also, looking at class and history and educational levels and social-political kinds of contexts and where those values that she would have might clash with society’s expectations for her. So I was very sensitive, both for gender and for
race and culture in this particular case, just knowing that little bit of information. I also knew she was getting divorced, but I didn’t know much more about it. And I knew she had at least one son, so I knew she was parenting, who was, who was, who she had just come from watching his first basketball game, so I knew that she was parenting an almost adolescent child.

1—20
And so there’s a, that’s where I started with, okay, what does how, what she comes to in therapy, what are her styles of dealing with these kinds of issues based on what I know about human behavior and what she presents, and we went from there.

Kjos: Is there anything that we should be watching for, anything particular from that session that the audience should be looking for as they watch this?

Walker: Well, I think the issue of abuse does come up, and her disclosure of the abuse, and I would suggest watching the directness of my questions and my response to her presenting the abuse issues: my, my allowing her to present it, my naming it, my validating her story so that she can continue talking about it. I use a technique that I have developed that comes from a combination of feminist therapy and trauma therapy where I actually name, I ask her to tell me about four specific incidents of abuse so that I can get a sense of what this is about for her and what kind of violence it is, and she begins to open up and talk much more, and my concern for her safety, which she was very…

1—21
She felt that was a real connection between us, and so I would pay some attention to that.

Carlson: Would those be the unique features, though, of the feminist approach that we might not see in one of these more male-oriented approaches?

Walker: Well, it certainly is one of them. You know, also the intensity of the relationship between the two of us I think is very important to, to watch, and my kind of activity and stepping back.
My ability to be active and ask very specific direct questions but also my ability to step back and give her the space to talk about them without providing a solution right away.

Carlson: You really listened and were empathic.

Walker: Yes. Although that’s not particularly feminist. I think that’s good therapy, but it’s that.... I also want you to look at the ability to bring out her strengths. I think that’s specifically feminist. We’re not just empathic with pain; we’re empathic with the strengths, and we really want to move to an educational, non-pathology approach, a less authoritarian, but not give up our power as a therapist. Somebody comes to us because we have special knowledge, and we want to not deny that, but we don’t want to abuse it.

Carlson: Well, let’s don’t wait anymore. Let’s get on and watch the interview with Gina.

PSYCHOTHERAPY SESSION

Walker: All right. Well, we’re going to talk for about 45 minutes or so, maybe a little longer if we need it. And I know, I don’t know very much about you at all, so I’m going to let you do a lot of the talking.

Gina: Okay.

Walker: But you can know a little bit about me, too. So I don’t know what you’ve been told, but I’m a psychologist, and my name is Dr. Lenore Walker, and I’m from Denver, Colorado now. And you can ask me some questions if you want, you know, like where I went to school or those kinds of things if that’s important to you or whatever at any point, but you know, you’re certainly welcome to ask me anything now before we start because we’ll probably talk about some personal stuff, and it’s only fair.

Gina: All right, then I can have it in return.

Walker: I might not answer.

Gina: That’s alright. You have...
**Walker:** You might not answer when I ask you.

**Gina:** That’s true, too. That’s true.

What is your area of specialty?

**Walker:** My specialization is working with battered women and child abuse victims.

2—2

So that’s really what I specialize in and in feminist therapy, therapy with women.

**Gina:** All right. There we go. This is pretty good. We’ll get along real good.

**Walker:** All right.

**Gina:** I’m in my pro-woman stage now, so yeah.

**Walker:** That’s why I asked you where you worked out.

**Gina:** Yeah. That’s, I see that. Oh yes, definitely.

**Walker:** So all I know is what we, just a little bit we were chatting before, so I know that you have done this before, and I know you’ve been in therapy for awhile.

**Gina:** Yes, I have.

**Walker:** So you know the game of therapy: we talk and back and forth. And really, what I think we can do today because it’s just, you know, a kind of short initial time is to explore some of the things that have been going on in your life, some things that are good, some things that haven’t been so good. I’ll get to know you a little bit and then I’ll try and give you a little feedback at the end as to what I see is going on.

2—3

**Gina:** Okay. That’d be all right.

**Walker:** How does that sound?

**Gina:** Sounds good. Sounds real good. I can definitely talk, so that’ll be okay.

**Walker:** And if, if, you know, sometimes I’ll take some notes or
something, if that’s okay with you. And I’ll just grab my pad or something.

Gina: Oh, sure. That’s fine. Sure.

Walker: And sometimes I don’t. I just...

Gina: Okay, so I won’t feel hurt if you don’t take notes.

Walker: No. It does not mean I’m not listening.

Gina: Okay. All right. That’s all right. That’ll be fine.

Walker: So why don’t you give me a little, maybe just a little kind of overview of, of, you know, what you’re doing now and what life’s like for you. I know you have a son.

Gina: I actually have two sons. I have two sons: 12 in seventh grade and eight.

Walker: The basketball star.

Gina: Yes. Yes. The basketball player. Yes, he’s real happy that he made the seventh grade team and I’m real proud of him. He’s been destined to do this since he was two years old. He was going to eventually get on his school team and represent his school and wear the uniform and all of that, and he is just on cloud nine and I am so happy for him. And it’s, it’s, I was very proud watching him today playing the game.

Walker: Was this the first game?

Gina: First home game, yeah, first home game. So it’s one of many more of the rest of my life.

2—4
I can see myself....

Walker: You’ll be there.

Gina: ...for years, but that’s okay. It is different now watching him at the higher level than in the park district, different leagues they were in, just weekend kind of basketball, so.

And my youngest is eight. He’s in third grade, and he’s getting into the athletics. He likes to do it, I think, but sometimes I wonder, is he doing it just because big brother’s doing it? But if I ask that, he goes, “No, no.
I like it.” He’s got big plans, what he’s going to do and everything, so it’s kind of nice. He’s…..

**Walker:** Is he playing anything now?

**Gina:** Yes. He just finished playing soccer, and they’re going to go into basketball starting this Saturday. So they’ve got a third and fourth grade team, or at least third/fourth grade park district league. He can’t play on a team yet; they don’t have it at that level, but that’s where my oldest started, so he’s real excited about doing that. And he actually is kind of theatrical. He just, the third grade at the school where he’s going, they put on an opera every year.

**Walker:** An opera?

**Gina:** And he... Yeah, an opera. They pick an opera. They just did The Magic Flute, and he was the prince and he did a really good...

**Walker:** Oh, that’s exciting! He was the prince? Whoa!

**Gina:** Not just he’s my child, but I was very proud of him.

2—5

He carried it off perfectly. He did the adlibbing with the singing and the arm movements and... He... That is his, his calling. He needs to really do that more. I’m going to encourage him to maybe do that if he gets involved with, like, the park district has classes on acting and they can audition for, you know, small plays and things like that. And there’s a church activity group that he’s in that they do that, and he likes to do that. So I think we’re going to see if he wants to explore that a little bit, because he does like it.

**Walker:** And this is the little one?

**Gina:** This is my youngest. Yes. Yeah. So that each have their own way of doing things, and they both do well in math, so I’m real happy about that. That’s probably because I did well in math, so they like that. And science, math and science they really enjoy.

**Walker:** Now are you working now?

**Gina:** Yes. I’m a teacher. I teach chemistry.

**Walker:** Oh, boy. So you did do well at math and science, didn’t you?
Gina: Yes, I did. Yes, I did. I’ve always liked those areas. And oftentimes, to tie in the feminine part of it, I don’t find there are women going into those different fields.

2—6

Walker: No, those are not...

Gina: I was at a conference this past weekend and most of the teachers that were there were male, you know, very few females, and that always gets me going. You know, because there should be more. And I always encourage the girls in my class to pursue the sciences and the math and don’t, you know, push it aside. And what’s funny, too, is when they pair up in lab groups—I sometimes have coed groups—and the girls usually tell the guys what to do. They take charge of the situation, and I like that a lot.

Walker: What grade do you teach?

Gina: I have mostly sophomores, a few juniors, a couple of seniors that have to take that last science before they graduate. And this is my fifth year in high school. I taught six years before that at junior high level.

Walker: You like the high school better?

Gina: Yeah, I do. I like high school. I’m teaching kids and not hormones as much. In junior high, you deal a lot with hormones and a lot of nurturing, and they need the attention because they can’t help it. And I’m kind of in that situation with my 12—year-old, because he’s hitting that stage. I’m like, “Oh, boy. Now I’ve got to deal with what I’ve been working with,” and like... I kind of have an advantage because I’ve taught and I kind of know what to expect, and he knows that.

2—7

And actually, he likes it. Yeah, that has not been, it’s not been a problem with Mom being a teacher, going to different things. They actually kind of expect me to do things. If I don’t do something: “Mom, why didn’t you say something?” Like, “Well, I was being Mom, not teacher.” But they kind of want me to step up and do things.

Walker: Are you in the same school district as they’re in?
**Gina:** No, I’m not. No, I’m in a different school district. And my youngest actually wants me to, he wants to be in one of my classes one day. So we’ll see. We might, we might not.

But they, it has been an advantage for them with me being a teacher, whereas sometimes it can be a disadvantage. They actually do like it, they do. And I’m glad of that because it could be a problem.

**Walker:** Now, do… Are you married now?

**Gina:** No, I’m going through a divorce, which is almost final. And quite happy about it, by the way. I’m not…

**Walker:** Okay. I figured you’re in pro-woman stage; there might be something there.

**Gina:** Yes. Yes, definitely. And it’s actually getting toward the end. It’s not so painful and hurtful anymore. I’ve come into my own within the last year, actually that last two years.

2—8
We were married almost 15 years.

**Walker:** That’s a long time.

**Gina:** Yeah, it is. And I stuck it through for about 13, and then realized that this is… I’m not happy. I wasn’t happy, and I actually woke up one… I actually woke up New Year’s Day two years ago and said, “I’ve got to change. This is not going to work. I can’t keep going around in circles. I’m not going forward at all; I keep going backwards.” And that’s when I started counseling. I called up Governors State, actually, and got into the counseling program here, and then I continued it with South Suburban Women’s Shelter.

**Walker:** A battered women’s shelter?

**Gina:** Yes.

**Walker:** So you were abused?

**Gina:** Yes.

**Walker:** Physically?

**Gina:** Yes.
**Walker:** Mentally?

**Gina:** Yes.

**Walker:** Sexually?

**Gina:** No. Verbally, also. Yeah, so that was probably the most out of all of them. The physical didn’t happen on that many occasions, but that was the breaking point for me to realize that this is it. I’ve got to really do something with this marriage.

**Walker:** When was the first time that he physically hit you?

**Gina:** I’m trying to remember: it was either the first or second year we were married.

2—9

**Walker:** Do you remember the incident?

**Gina:** Oh, yes. Very much so.

**Walker:** Tell me about that.

**Gina:** We had disagreed on something, and he wouldn’t actually hear me through, which at the time, was very frustrating for me. And I don’t, I don’t even remember what I did. I don’t know if I, like, pushed him or just, to get his attention, but he hit me in my face.

**Walker:** Slapped you?

**Gina:** Yeah. Mm-hmm.

**Walker:** Open hand?

**Gina:** Yeah. Yeah, it was open hand, but it wasn’t as hard as the second time he did it.

**Walker:** So just one...

**Gina:** One time, yeah. And it was, I was in the kitchen. I remember when it happened, and at that point, it was like, “Oh, my goodness.” And it was really a struggle for me because I told myself all up until that point if a man ever hit me, that was it. He’s out of my life. Forget it. But that didn’t happen.

**Walker:** What happened? What did he do afterwards?
Gina: I think he said he was sorry, but then he said that I caused it to happen, that if I hadn’t...

Walker: Did you believe it?

Gina: Yes, I did. I did. Because I really, I thought I pushed him to a point where he didn’t have any boundaries or any way to deal with it.

2—10
And yes, I did think it was my fault.

Walker: You still?

Gina: No, I don’t anymore. No. Because you don’t have to get to that point.

Walker: But it took you awhile to get…

Gina: Oh, it took me a long time. Took me a very long time to realize that. And it’s funny because when you’re in it, you can’t see it. When I look at other people outside of what I am, I could easily spot it, but it’s really hard to spot it with you. And I almost believe that it wasn’t really the case. It’s hard for me even now to say “I’m an abused woman,” because I still don’t see myself that way, yet I know I was. And it’s been, that’s probably one of the hardest things to come to terms with.

Walker: So you also see yourself as a strong woman?

Gina: Yes. Yes.

Walker: So, of course, it’s very difficult to know that, you know, you can be strong and be an abused woman at the same time.

2—11
Gina: Yes. Yeah. It is tough. Yeah, but…

Walker: Tell me, tell me the last incident that happened.

Gina: The last incident. We had not communicated in probably about three months, where we needed to talk about things, talk about the relationship

Walker: You were still living together.

Gina: We were still living together, yes. Still sharing the same
bedroom and all of that. And we hadn’t communicated, and we
needed to talk. I’m a talker; I need to talk. I can’t sit on problems. Let’s
talk about them. Let’s work it out. Whether we agree or not, I need to
communicate.

And he shut me out, and for about three months, we didn’t talk about
feelings, what we’re going to do, how we’re going to fix this, any of
those things. And one day, I just decided I wanted to talk and he had
to listen to me and I had wanted him to say something, but he didn’t
want to do that. He avoided me by moving to different rooms, going
upstairs, going downstairs, and I followed him because it was one of
those days I said, “I’m going to get this done because this is crazy. We
can’t keep going like this.” And he just outright refused.

And it was so frustrating that at one point, I just took my hands and
went, “Can’t you just listen to me?” And I didn’t really hit him or
anything, it’s just that I needed him to stop moving, and I said,
“Stop. Let’s talk about this.” And he put his hands around my neck
and pushed me back against the wall and continued pushing me down
the stairs and said a couple things, yelling and screaming, things like
that, and I’m on the stairs like, “I don’t believe you just did that. You
didn’t listen to me.” I got back up, went back and confronted him
again, saying, “Look. You have got to talk because this is crazy.” He
then pushed me down, picked up a chair to get ready to hit me, didn’t,
but put the chair down. Ended up kicking me. Well, actually, no. He
didn’t put his hands around me, that was... He put his, he pushed,
grabbed my wrist, twisted them and pushed me up against the wall
and pushed me out of the bathroom and down the stairs.

After he kicked me, I still got up, trying to like, this... He’s not
listening to me. I can get through to him. This, this is important
and at that point, he put his hands around me and was getting ready
to choke me, and at that point, I realized, “You’re not going to get
through this man, so just stop.”

And he didn’t choke me but there was a look on his face that I’ve never
seen before that’s like, “I’m not going to get up in his face again,” and
at that point, I then removed myself and went to the bedroom and, for the rest of the evening, because this happened about 12:30 in morning. We attempted to try to discuss it, but didn’t work. It didn’t work. And then, about a half hour after it happened, I went downstairs and came back upstairs. My youngest was there. And my first concern was, “Oh, my gosh. What did he see? What did he hear? Oh, no.” And I still think he might have heard and maybe saw something, but it’s never come out. I don’t think he’s traumatized by it, but I still wonder if he saw it and heard it and...

Walker: Have you asked him?

Gina: Yes, I have.

Walker: And he says “no.”

Gina: And he said, “No.” He said, “I just heard you guys talking. That’s all. I didn’t...” You know. So I had to convince myself that that was okay. And still...

I don’t worry about it too much now because I know they’re a lot happier. Things are going much better now. But that happened in April of ’95. April of ’95. And I didn’t tell anybody about it until of Mother’s Day of ’95; I told my mom.

Walker: Wow.

Gina: About it. That was the first time I told her about anything. She had thought that that was happening all along in our marriage.

Walker: Did she say why she thought that?

Gina: Because she saw how he was as a person, and she knew how I was as a person.

Walker: Was he very demanding?

Gina: Yes, very much.

Walker: Controlling?

Gina: Yes, and...

Walker: Argumentative?
Gina: Yes. Yeah. That, that really… Yes. But very much in need of some things that I thought I could give him. He was an adopted child. I… He says he had a happy childhood. I wonder sometimes if he did. I knew he wasn’t a happy person when I met him, but I thought I had enough happiness for both of us, and I could make him happy. And I did my best. I tried.

2—15
And it was funny, because now when people hear that we’re getting divorced, they’re so shocked. “You all looked so fine. You look…”

And, and we did. I did a real good job on the outside.

Walker: You covered up well.

Gina: Yeah, I did. And then when we came back home, it all unraveled and it was still there, you know. And it’s funny because I’m seeing a man right now, and he said, “You know, when we go out you pay me a whole lot of attention, but we’re alone, you don’t.” And I’m like, “Yeah. What about it? You know, it’s okay.”

But he says, “You know what I think? You’re so used to doing that, that you can’t get out of that.” And I went, “Okay. Never thought about that.” And I really did think about it, and he’s right. I’ve been going through those motions for so long that I’m still doing that, and it’s a completely different person.

Walker: What happens if he gets angry with you?

Gina: The guy I’m... I don’t worry about it anymore. One, because the first thing I say is, “He’s a man.” And that’s the first reaction I say, but he points out, “But I’m a different man. You can’t compare me.”

But I don’t take it so personally anymore.

Walker: What happens if he gets angry with you?

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2—16
I don’t take it as an attack upon my intelligence or my feelings or my situation. He hasn’t gotten that upset, which is kind of nice, too. We talk very openly about things. We don’t let a day go by that we don’t deal with it. Well, we did let one day go by. We did have a day where we cooled off with something. And…
Walker: Now, are you living together?
Gina: No.

Walker: But you see each other every day?
Gina: No, we don’t. No. Basically we see each other weekends and it’s... We’re dating. We’re not, you know, serious. I’m not serious with anyone. I won’t be serious for awhile. But it’s interesting, you know, to start getting back into dating and to be single again.

Walker: Was that hard?
Gina: No. If it’s done the way I want it to be done, it’s not hard.

Walker: What’s the way you want it to be done?
Gina: To, not have commitment and no attachments. Just to be friends and to enjoy each other’s company with no seriousness right now.

Walker: Can you do that with the guys you meet?
Gina: So far, yeah. He’s the only one who’s putting opposition to it right now.

Walker: But you’re only dating one guy at a time.
Gina: No, I’m not. No.

Walker: You’re dating others?
Gina: Yes. Yes.

Walker: Are you dating African American men?
Gina: Yes.

Walker: Are they more... Some of my friends tell me that they are more demanding of commitment and of your time than, than some of the other guys.

Gina: Well, my husband was, and the guy that I’m talking about now is. I don’t know if all of them are.

Walker: Of course not everybody but...
Gina: I’m open to see if there is a difference, to be honest with you.
I do know that I’ve, when I’ve gone to a couple clubs and, or like, I was at a restaurant this Saturday and we were waiting to be seated, a whole group of us, and there was a white guy that did start talking to me. I just started talking. I’ll talk to probably anybody. I’ll talk to dogs on the street, cats on the corner; I’ll just do that. It’s just me. And for some reason, he just started talking to me, and I just kept talking because I’m at a point in my life where there’s nothing wrong with a little conversation. Sometimes people just need to know that somebody’s listening to them.

2—18
Walker: Would your husband have been jealous of you doing that?
Gina: Oh, absolutely. Oh, absolutely yes.
Walker: So you wouldn’t have done that if you were out with him.
Gina: No. No. So in a lot of ways, I’m sort of busting out, as they say, doing things that I’ve always done until we got, we got together.
Walker: And your boys now see you do that?
Gina: See me talking to people?
Walker: To other, to other people without there being a big fuss.
Gina: Yes. Yes. Yes. Yeah. They’ll say, they’ll say, “Mom, why’d the person talk to you?” I said, “You know, I really don’t know. I guess they were lonely. They just wanted to say something.” And they’re like, “Oh, okay.” And they’re okay. Yeah, they’re okay.

They have met this one guy, and they’re very open about it. They, I told them, “He’s not going to be your father. He’s just a friend. Nothing serious.” And all of that. And they go, “Yeah, we know, Mom. It’s okay.” They’re really pretty good about it. You know, but it was, it was kind of easy. I was worried at first.
Walker: Do they have contact with their dad?
Gina: Yes, they do. Yes, they do.
Walker: And is he good with them?
Gina: Yes, pretty much they are, he is. They...
Walker: Think he’s going to handle adolescence well?

Gina: I think so. But I still think he’s growing up, too. Not to put it all on him: I’m still growing up, too. I’ve just found myself again, and I actually have a new way of looking at myself and I like it. And I am constantly evolving. This is not a, “I’m going to be this way forever.” I’m changing daily, sometimes weekly, and I’ve got some growing up, you know, to do. And I know he does, too, and some of the growing up might conflict, you know, with, with them, and there may be some problems. Sometimes I don’t think the children feel comfortable with him, because I know I didn’t feel comfortable with him on some things. So that could cause some problems where they don’t feel comfortable talking to him about things. Say...

Walker: Do they talk to you about that?

Gina: Yes, they do. Yes, they do. We have, we communicate very openly. I’m really, really happy about that. That’s one of the things I think that will get me through this adolescent period is that I do talk openly with my children. I call things the way they are.

We talk about girls. We talk about guys. We talk about sex. We talk about anything, you know, and I never criticize them for it. At least, I try not to. I don’t think I do. But I’ve always told them, “You can talk about anything here. But if there are things that you don’t want to talk about, please go to…” Their uncles. You know, I say, “You can go to Grandpa, but grandpas are the older generation so you may not want to talk about some things with Grandpa, but…”

Walker: Now this is your father?

Gina: Yeah, my father.

Walker: So you have a relationship with your father and your mother?

Gina: Oh, yeah. Both my parents are alive, yes.

Walker: And, and you’re close with them?

Gina: Yes.
Walker: They live nearby?

Gina: Yes. They live in the city. Yes, they do. And I wasn’t always... I was close growing up. Got married, wasn’t too close. Husband...

Walker: That was going to be my next question. Did he not like that?

Gina: Yeah, no. He liked us, immediate family, and probably felt threatened by my family. Pointed out errors in my family and things that he didn’t like and I actually believed some of those. At one point, to prove my love for him, I did not communicate with my family for over a year.

2—21

Walker: Do you feel guilty about that now?

Gina: No, I don’t. I did earlier, but I don’t now. I don’t really feel guilty about anything I’ve done. If I had to do it all over, if you put me back in the same time, knowing me, the fact that I really believed what I was doing was right, I probably would do everything again. Except maybe once the abuse started. I think I would probably pull out then, because those were definitely signs that I did not pick up on. I was too stubborn and too convinced I could change him, when you really can’t change people. They’re going to be who they’re going to be, and you just hope that you can get to a certain point where you can work together with it.

I had a hard time accepting the differences. I wanted to change the differences because they were too big, and if I didn’t change them, that would mean we’d have problems.

Walker: Did you know his family?

Gina: Not extremely well.

Walker: Did they live nearby?

Gina: Oh yeah, they did. Yeah. Actually, I did. I did know them fairly well. Yeah. But there were problems when he was growing up, too,

2—22

I knew; his mom and I were kind of close and we talked about things. You know, and that he, he had trouble, you know, following
through on things. He procrastinated. He didn’t want to take blame sometimes. Very stubborn, wanted to do it his way and no other way, and his mom and I would say, “Well, yeah. But maybe we could do this or maybe we could do that.” And we both tried to, you know, fix things for him.

**Walker:** Did she try to do that for her husband, too?

**Gina:** I think so, yeah. I think so.

**Walker:** Did you ever notice any kind of emotional or verbal kinds of cruelty?

**Gina:** No, I didn’t during, but I, I sometimes question it, thinking like, you know, the apple doesn’t fall, you know, far from the tree, and you’re raised a certain way… I know his mother loved, you know, her husband. But I also know, too, that she wasn’t as totally happy as she could be.

**Walker:** Did, did you see any of that kind of abuse when you were growing up?

**Gina:** No. No.

**Walker:** You have brothers?

**Gina:** Yes. I have two brothers and a sister. I’m the oldest out of four.

2—23

**Walker:** You’re the oldest.

**Gina:** Yeah. And I saw, my parents argued.

**Walker:** And you’re how old?

**Gina:** I’m 38.

**Walker:** And your, your...

**Gina:** My sister is 36. My brother is thirty… will be 35, and I have a brother who is 28. So we were a pretty close family. We stayed pretty much amongst ourselves. We went out and things, but my mom had a real close handle on all of us.

**Walker:** So she knew where everybody was?

**Gina:** Yeah. And that’s her. I know how that is. If she had a wish, she
probably would have all of us live in one house with her so she could have us close by. But yet she would say that she would not get into our business, but yet, she does. And that, that mom thing. But see, I understand that because… At least I think I understand that. She was adopted as well, and it’s very important for her to have her family close to her. Her family is very, very important to her, and I can understand why, you know, being adopted and everything.

**Walker:** So you got those values from her?

**Gina:** Yes. Yes, I did. Growing up, my mom and dad argued but it was always a situation where my dad would leave until he cooled down and then he would come back and they would work it out.

2—24

My dad never hit my mother. He wouldn’t dare. My mother was too strong a person to, to let that happen.

**Walker:** What kind of occupation did your dad have?

**Gina:** My dad’s a teacher and so’s my mom.

**Walker:** Both of them.

**Gina:** Actually, they’re, my dad’s still, he teaches at college, Community King. And my mom is actually an administrator.

**Walker:** What does he teach?

**Gina:** He teaches, he’s a graphic art, communications, offset printing, publications, all that kind of thing, at Community King College in the city. And my mother started out as a Head Start aid and worked her way through school and became a teacher, got her Master’s and a certificate and became an administrator, so she now oversees 35 or more preschool sites around the south side of the city.

**Walker:** Wow. It sounds like you’re proud of her.

**Gina:** Oh, I am. I am. Very much so. I am. I am.

**Walker:** And how about your sisters and brothers? Are they all teachers, too?

**Gina:** Nope. Nope, they’re not. Although my youngest brother is getting the hang of it because he’s working with my dad right now in
the printing department, and he also has been helping teach some of the classes. So I think he’s getting the bug.

2—25
He, he is. I think he’s getting it. And he’s been talking about getting certified as a tennis instructor so he can also teach tennis. So I think he’ll probably do it.

Walker: Interesting.

Gina: Yeah. But I didn’t start out that way. I was going a totally different direction, but very, very happy where I am now. I wouldn’t do anything else but teach. I really like it. It gives me everything that I want. It gives me a career. It gives me satisfaction in helping people, which is something I like to do. It kind of puts me up on a pedestal in a way, which I like. And yet, it gives me time to be a mom and spend time with my kids and to raise them and do as much as I can with them, which is what I wanted.

Walker: Now how often do they see their dad?

Gina: Once a week and every other weekend. And it’s…

Walker: So that gives you some time, also, to spend with friends.

Gina: Yes. Yes. Yes, it does.

Walker: Did you develop, have to develop all new women friends after you started getting divorced?

Gina: No. Actually, I haven’t gotten any more … I haven’t gotten any new women friends. I have the same women friends that I’ve had all through my marriage.

2—26
A couple have developed since working at the high school and even at the junior high before I taught at this high school, so that I have a couple of new friends, but they’re like five, six years old in friendship. So that I haven’t really developed any new female friends.

Walker: So you didn’t let yourself get too isolated?

Gina: Yeah, I did. I did. I would be times my girlfriend say, “Come on and go out,” and then he’d look sad and, “aw,” and I go, “Oh, that’s
okay. I’m going to stay home.” Or he would make me feel guilty about going out, and then I would stay home, and I shouldn’t have did that. I should have went out, because there was nothing wrong with me going out. It didn’t threaten our relationship any, but I think it did for him. I know he was insecure about some things. As all of us are. But I basically never did anything, you know, that would make him think otherwise. That he couldn’t see when I went out with my friends, I’m a better person when I come back. I’ll be a better wife when I come back because I had a chance to be me.

2—27
And then, once I get that taken care of, then I can jump back into the role of being wife and we’ll all win in this situation.

Walker: But batterers don’t like that.
Gina: No.
Walker: You can’t be “me.” You have to be him.
Gina: Yeah. Yeah.
Walker: So what made you decide that you were battered? Was it the last incident or was it before then?
Gina: Yeah. It was the last incident that made me really say that I was a battered woman.
Walker: And what did you do?
Gina: The next day I called the police. But I never filed out a report.
Walker: How did you get the courage to even call?
Gina: Oh, I’d called before. I’d called before.
Walker: Okay. Had you filed a report before?
Gina: I never filed an official report. Never did a restraining…
Walker: What was the worst incident that happened?
Gina: Probably this last one.
Walker: How about...
Gina: Before that?
Walker: …before that one.

Gina: Well, it’s a toss-up between two. Once when I got slapped in the face on the middle of a highway.

2—28

Walker: In the car?

Gina: No, outside of the car. That probably more so than when he spit in my face and called me a bitch. That probably is… I still feel that slap. I still feel it to this day.

Walker: And that was when you said it wasn’t, it was a harder slap with an open hand?

Gina: Yeah. Yeah.

Walker: Was that when you called the police?

Gina: No, because I wasn’t in the city. I was out of town. When he spit in my face, I called the police then. I did. Because I didn’t know what else to do, and I figured, “Okay, that’s just like hitting me. Fine, I’m calling the police on you.” And they came and basically they said we should spend time away. You know, he should leave. He didn’t. He stayed upstairs; I stayed downstairs.

Walker: So they didn’t make an arrest?

Gina: No, they didn’t. No. It’s real hard to do that, and I wasn’t willing to press charges.

Walker: How long ago was it?

Gina: That was about, maybe four years ago. Well, no, maybe about three years ago. ’94.

Walker: And you still had to press charges?

Gina: I didn’t. I filed a complaint, and the police made a report of it but nothing was ever really done.

2—29

Because I felt it was my fault again. Yeah. I did. I thought it was my fault: I provoked him.

Walker: That’s what happens, yeah.
Gina: I made him do that. It’s not all that bad. I really don’t want to get a divorce. I’d really like to work this out. And all these other things I tried to convince myself of. You know, even as hard as it is for me to say, “Well, what’s a spit in the face?” You know, I still find it hard to say that that was, you know, abuse, but it is. You know, I know it is. It is, you know.

Walker: Of course, it is. And it sounds like it wasn’t just a spit in the face. We have all these other incidents and it sounds like you had a lot of psychological and verbal abuse as well.

Gina: Yeah. Yeah. Oh, yeah. I did. Yeah. I mean, he would criticize what I would wear: “You shouldn’t wear that. You don’t look right in that.” And I would go, “Okay, well, what would you like me to wear?” And it doesn’t make sense. That’s one of the reasons my girlfriends would get so mad. It’s like, “You are so intelligent. You can just… Why do you do that?” But when you’re in love and you think you’re doing the right thing, it’s very easy to follow along with that. You know. But the other incidents, I didn’t have any bruises or any marks from it, so it didn’t stay with me.

Walker: Did you seek medical?

Gina: No, I didn’t. No, I didn’t. But…

Walker: So you told him you wanted a divorce?

Gina: I did, yes.

Walker: How did he handle it?

Gina: He didn’t like it. To this day, he still doesn’t want it. But he’s accepted the fact that that’s what’s going to happen, and he claims he’s ready to move on and to, you know, go, you know, go on with his life and me go on with my life.

Walker: So he didn’t get worse afterwards?

Gina: No, because I told myself I won’t put myself in the situation
again. Whenever the…

**Walker:** Did he separate? At that point?

**Gina:** No. I did.

**Walker:** Ah, so you just left with the kids?

**Gina:** Yeah. Well, actually…

**Walker:** That happened... Yeah. That happened...

**Gina:** Okay, that happened in ’95, April ’95.

**Walker:** Right. You told your mom the next month.

**Gina:** Yeah.

**Walker:** And they were supportive?

**Gina:** They were supportive. They didn’t interfere.

2—31

But we had a code on the phone that if something happened I was to just pick the phone up, hit a number, they knew that that, to just come out and help me, my brothers, basically. Yeah. Yeah. I never used it, but we did have that system set up.

**Walker:** Excellent.

**Gina:** But I also told her, “You don’t have to worry about this happening again because I’m not going to confront him.” The abuse happens when I confront him.

**Walker:** The physical abuse.

**Gina:** Yeah.

**Walker:** But the emotional abuse happens no matter what you do.

**Gina:** Right. Right. So that happened April of ’95. As of July of ’95, we stopped having sex.

**Walker:** At your instigation?

**Gina:** Yes. Yes. And in October of ’95, I moved out of the bedroom and slept on the couch. Thanksgiving. At that point, that’s when I told the boys that Mom and Dad are going to get a divorce. During the month of October, I asked him to leave. I gave him until the end of
the year. Because the lease was in my name. “I paid for everything. It’s my place. You should leave. I shouldn’t leave. Why should I uproot the children and myself? You leave.” He said he would move by the end of the year.

2—32

December 31st came, didn’t move. January and didn’t move. February, March, April did not move. We went to court for the first time with the divorce in April of ’96 and at that point he asked me for alimony and maintenance to maintain the kind of lifestyle he was accustomed to.

My lawyer asked me, “Can you leave?” I went, “I’m out of the house now.” I mean, it was like I didn’t even blink. I said, “I can go right now.” So after having lunch with my brother and thinking about it and realizing I don’t really want to move back home with Mom, I decided I’ll move, and Mother’s Day of this year, I moved into a two-bedroom apartment. Took the kids with me and moved and have been very happy since then.

Walker: Good for you.

Gina: Yeah, I’m slow. But once I get my mind made up, I pretty much... So... Yeah...

Walker: That doesn’t sound like it was easy for you to do at all.

Gina: Yeah. April was rough, but May was very easy. Moving was very easy. It was very, very easy. You know. But...

Walker: So you’re really only out about five months, six months or so?

2—33

Gina: Yeah. Yeah. Physically, yeah. But mentally, in my heart and all of that, it’s been over a year.

Walker: You’ve been out.

Gina: Yeah. It happened that Mother’s Day when I told my mom. When I finally told my mom about that, that did it for me pretty much.

Walker: Do you think that’s why you didn’t tell her before was because you...

Walker: Once you knew you’d told her, you’d have to do something?

Gina: Somewhat, yeah. And I was still apprehensive about making that decision, but looking at it—and I was going through counseling at the time, too—it was very clear that there is, no. This not going to get any better. And you have to own up to that.

Walker: And he never got into counseling?

Gina: He did. A little… in September of last year, of ’95, he went through counseling. He wanted us to go through counseling together; I said, “No.” We had done that twice before and there, there was no way. No way.

Walker: Did he admit to his abusiveness?

Gina: No. To this day, he said I instigated it. I basically hit him first. I had physical contact with him first in all the situations.

2—34

Walker: Do you believe that?

Gina: I did touch his body first in all cases, but I don’t believe it was abuse on my part. I’m a very physical person. I touch, I have to be careful, being a teacher naturally, but I deal with that. And that’s my way of saying, “Hey, focus on me. We’ve got to talk. This is important.” But he makes it the other way.

Walker: But you also learn, I mean, you know, think about your ability to understand that if you did that then it would get more physical. Now he had the responsibility of not responding to you.

Gina: So he did not have, I do believe, he did not have to go the way he went.

Walker: No, of course not.

Gina: I know that. I know now, too, that I don’t have to do that anymore, either. That I’ve learned.

Walker: So you protected yourself.

Gina: Yes, that’s why I knew it wasn’t going to happen again, because I
knew the only time he did that was when I confronted him. I can stop myself very... I can stop. I don’t have to do that. You know, I can just, you know, not do anything.

**Walker:** He hasn’t gotten crazy during the separation and divorce, pending divorce?

2—35

**Gina:** As far as I know, no.

**Walker:** Because, you know, some batterers do. So just watch out for it.

**Gina:** Yeah, my girlfriends have been telling me that. And I do watch, you know, to make sure, but so far it seems to be okay. But it’s not far from my mind.

**Walker:** Is he working?

**Gina:** Yes. He wasn’t, but now he is.

**Walker:** What does he do?

**Gina:** He’s a coach, a basketball coach. Which is why the son plays basketball.

**Walker:** Of your son’s team?

**Gina:** No, no. Not, no. He’s at college level, the college level.

**Walker:** So he doesn’t have to show up at the same games that you do?

**Gina:** Yes. He was there today. I saw him, but…

**Walker:** And that’s okay?

**Gina:** Yeah. It’s okay. I don’t hate him.

**Walker:** Does he know you have a boyfriend? Or that you date?

**Gina:** He probably does if the boys talk, which they do. And I’m sure, I’ve not told my boys, “Shh. Don’t tell him.” No. I’m not going to do that. He probably does know. And that’ll be interesting to see what happens with that. The world is too small of a place for us not to ever come in contact with each other.

2—36

**Walker:** Well, especially with the children.
Gina: Yeah. Exactly. With the kid. And just the same interests that we have, we could eventually cross paths, so that’ll be interesting to see. I don’t think there’s anything wrong with it. I don’t have any connection with him anymore. I don’t have to prove anything. I don’t have to defend anything with him anymore, so I think I’ll be fine with the situation and I would hope that he would be okay with it, too.

Walker: What makes you think he’ll be so mature? He hasn’t been so mature in other things.

Gina: I know. I know. That’s my hopeful thinking, but it really doesn’t matter because I will deal with it when it happens.

Walker: Well, it does matter just to stay safe. That’s what matters.

Gina: Yes. Yeah. I tried not to come up…

Walker: That tends to be an aggravator for some men. Not all, but for some.

Gina: And in his case, it could be.

Walker: So just be, you know. You were together for a long time, so just be careful with it, that’s all.

Gina: Yeah. I will. Thank you. Yeah. I have to, I appreciate that because sometimes I get this rosy picture: everything’s going to be fine! Then I quickly go, “Wait a minute. Was it really...” And so it’s something that I’m definitely…

2—37

Walker: But that’s a lingering kind of thing from having been abused is that you deny and you minimize everything so that you don’t want to deal with what it, how bad it could get.

Gina: And part of me says, “Well, why should I...” Like, I know that this one particular man I’m seeing, he might want to come to the game. Why can’t he come? But then it’s like, well. He’s going to be there.

Walker: He’s in your face, you know.

Gina: Yeah. It is. And I don’t want to do that. But yet part of me goes, “Why do I have to...” And the answer’s because I’m the one who’s
mature in the situation.

**Walker:** Right. Because you married him. You know.

**Gina:** Yeah. And it’s not that big a deal, either. And maybe as time goes on, it will become easier. Now I know it’s too, too soon. So I’m not, I don’t, I’m not going to aggravate the situation like that. I’ll be the mature person in this, and it’s fine. So it’ll be, you know...

**Walker:** You’re feisty. You know. You have a little feisty spirit there.

**Gina:** Yeah. Yeah. Yeah. I am. I am. And it feels really good, it does. But it’s going to present problems with the guys I go out with because I refuse to let go.

2—38

**Walker:** Do you tell them?

**Gina:** Yeah.

**Walker:** What’s the reaction?

**Gina:** “Don’t worry. It’ll be okay.” I understand. Because the first thing, I say, “Look. I’m divorced. I’m raising two kids. I am not going to get serious. I am into myself. I’m going to be that way. I’m going to be very selfish right now, but it doesn’t mean that I, that we can’t spend time together, that we won’t have fun. But if you want a lot from me now, you’re not going to be able to get it, and if you need that now, then this is not going to work.” And they appreciate the honesty, they do.

**Walker:** Do they believe you?

**Gina:** Yeah. Yeah. They do, yeah.

**Walker:** How do you know who to select? What kind of clues do you use?

**Gina:** It’s... Well, one person I’m seeing, I’ve known since first grade, so we’ve been friends for years. So that, that’s, that was just...

**Walker:** So that’s comfortable.

**Gina:** Yeah. Very, very, very comfortable, yes.

I don’t know.
If they seem nice... Okay, there’s one particular guy, gave me my personal space when we met in this, it was a dance, actually a party, and he gave me enough space. He didn’t crowd me right away. He kept distance between us and we had conversations at a certain distance. That made an impression with me, because he allowed me my space. He didn’t just start coming into my personal space, which I’ve learned through the counseling that I’m entitled to have and should have.

Walker: Good for you.

Gina: And just talked about the same kinds of things, similar interests, seemed to treat me with respect, wasn’t pushy and seemed like would be an interesting person to meet. I’m trying not to be too picky because everyone has their own way of doing things, so it’s kind of their appearance, how they handle themselves. They don’t have to be knockdown gorgeous for me, but if they carry themselves well, can hold a conversation, give me my props, as they say, as a woman, recognizes the things in me and praises me and can appreciate me, that… You have my interest. And then we’ll see, you know, where we go from there.

Walker: Do, when you meet somebody, do you get a sense if some guy is really going to be a problem?

Gina: Mm-hmm.

Walker: Is there a place in your body that you feel it? How do you know that this guy is...

Gina: If they invade my personal space immediately, that sets me off. Like, “You don’t have the right. I haven’t given you permission yet. Just, just hold up a minute here, okay. We may do this and may not.” If they’re rude to other people. If they have not complimented me right away—well, not right away but at least in our conversation, they haven’t picked out something that they like about me.

That didn’t happen with my husband. Now, I’m not saying everybody
has to compliment me, but I know I like that and I’m worthy of that and that should come out. Because that means you’re seeing me for me.

**Walker:** Is there, is there any place physiologically when you start to get scared that you feel it?

**Gina:** When they get too possessive.

**Walker:** But how does your body tell you that? I mean, like do you get…

**Gina:** I get real, my space gets closer. Don’t come in contact with me.

**Walker:** So you start to get stiffer?

**Gina:** Mm-hmm.

**Walker:** Do you feel it in your stomach, your head, or you just feel yourself pulling back and withdrawing?

**Gina:** I just, yeah. I feel that I need to remove myself from this. My stomach doesn’t hurt. My head doesn’t hurt. I close up. Conversation stops. I start thinking and figuring things out. This happened with one particular guy because I wasn’t, he was going fast and I wasn’t comfortable for him coming into my space.

2—42

It was funny because he had stayed. He spent the night and… Well, my kids were, they were, where were my kids? They were probably away with their dad or whatever, and it was very uncomfortable for me. It was too soon. And I really liked the way he handled it. He didn’t take it offensively. He says, “Well, do you want me to go?” And I went, “Go? Where you going to go? You didn’t drive. I drove.” He goes, “Well, I’ve got a friend nearby, and I can easily go spend, you know, the day with him.” And I’m like, “How are you going to get there?” He says, “I’ll walk.” I’m like, “You’re going to just walk?” And that said a lot to me. He recognized that I needed personal space, that I felt uncomfortable and that there was no problem with him, you know, leaving. And I went, “No, you don’t have to leave. But I’m just telling you right now I feel very uncomfortable and I hopefully will get through this, you know.” And he gave me my space, he did, you know. And that was kind of nice.
Walker: Good. Do you ever get fearful? Do you ever have any fears that, or get very anxious about things where you can't figure out where it’s coming from?

2—43
Gina: With my son, being an adolescent, yeah. With men, right now...

Walker: Or just in general. Do you ever have, like sit and think about what’s happening or just sitting down and then things popping in your head that you...

Gina: I’ve been doing that lately. I’ve been so busy sometimes just doing things, and I’d, I would keep busy to escape from the situation. I’m stopping, I’m starting to do that now. So I do. I stop and go okay, “What am I going to do in this situation?” It could be what I’m going to do with the kids at work. What am I going to do with my child who just seems to be blowing off at the top and doesn’t even know why? What do I do about their dad who said he was going to pick them up but all of the sudden, he can’t pick them up? So I tend to get quiet. My children say, “Are you mad about something?” And I say, “Why do you… No, why do you say that?” “Well, your face.” So I know I’m doing that now, and I said, “No, I’m not mad. I just need to think about something. So that, yes. I’m doing that.

2—44
I tended to react in the past.

Walker: Like what? Like more jumpy?

Gina: Well, yeah, the physical contact. I didn’t take time out to stop, think, get myself together, reevaluate the issues, put things in perspective and approach it in a calm, intelligent way. Sometimes I just jump right in it, and I’m now trying not to react.

Walker: Good for you.

Gina: Sometimes I do react, and I’m aware of it: “Oh, wait. That’s a reaction, I know. Let me answer that in another, you know, few more minutes, or let me tell you about... We’ll talk about that tomorrow.” And I do take time to think about it.
Walker: Do you get depressed at all?

Gina: I would have said over a year ago, two years ago, no way. But then I realized, yes, I do. But not often. Not... I don’t like depression. I like...

Walker: That’s why you have all this activity.

Gina: Yeah.

Walker: It keeps it away.

Gina: Yeah. I don’t, I don’t like depression, but yet, I have learned that it’s good. And I do go through those days where I’m depressed, and not just because of my period. It’s just days where, you know, I’m depressed. And I go through it. I don’t try to fix it.

2—45
I just go through the end of the day, and then the next day it’s okay. It’s actually something that I’m supposed to go through. You can’t be bubbly and happy all the time. Life isn’t, you know, a bowl of cherries all the time, and I thought it was. And I realized through the counseling that it’s not, but it’s okay if things aren’t going okay. Right now I’m at a very good point in my life.

Walker: Well, you sound great.

Gina: I’m so happy just, it’s great.

Walker: Now we’re going to have to summarize up a little bit.

Gina: But tying in that, with the depression, I’m very, very happy and pleased with the way my life is going now, but yet I know there is that other side. I’ve been on that other side at certain points, but I know I can get through that and you can be happy again and then you’ll go through that again and you go through... It’s an evolving process.

Walker: So you’re less frightened of...

Gina: Yes, I’m less frightened. Yes.

Walker: It’s interesting because, you know, you have, you have qualities that are really helping you get through it, one of which you label as stubbornness but it’s also stick-to-it-iveness.
Gina: My mom would say… Yeah. Yeah.
Walker: So you know there’s two sides of that.
Gina: My mom calls it, “You’re a survivor.”

2—46
Walker: You are. You are a survivor. You certainly are a survivor.
Gina: And I, I’m beginning to see that. And I didn’t take credit for that early on but...
Walker: And I think you’re getting to know yourself and accept yourself well, real well.
Gina: Yeah. Yeah. My good points and my bad points. I do have some bad points, yes. Yes.
Walker: Oh, well, I haven’t seen any.
Gina: But no, but I, but… Yeah. I’m beginning to deal with...
Walker: Well, I think maybe a little impulsivity sometimes. And, and you know, being busy really does, I mean, it does two things: one is it keeps you occupied and doing some very purposeful, meaningful things. But you know, and when you have two teenage, one teenage and one going to get there very soon…
Gina: Yeah, real soon.
Walker: …teenage boy, you’re going to have plenty to do. But it also gives you the… And if you don’t stop and look at things, you know, you won’t be able to process them and deal with them, but it sounds like you’re really dealing with that.
Gina: Well, all the counseling is definitely a help. It has. It’s made me realize that that’s what I’m doing. Sometimes I just go, “I’m too busy. Okay, we’re not going to do anything.” And just sort of slow down. I still have to do it more than I do. I don’t do it a lot, you know.

2—47
One of my friends say, “What are you doing in your quiet time?” I went, “Quiet time? What’s quiet time? I don’t know what quiet time is.” Now I do know what quiet time is, but I didn’t have it earlier on.
Now, I need to find some more sometimes.

**Walker:** Right. But it sounds like you’re getting back with friends.

**Gina:** Yes. Yes, I am.

**Walker:** You know, you’re back in with your family. The boys have all kinds of activities that are theirs that you participate in. You’ve got all kinds of activities that are yours or the ones that you participate in, so you really are setting up, you know, a new life for yourself. And that’s exciting. It’s got to be exciting for you.

**Gina:** Yeah, it is. It is exciting. It is.

**Walker:** A job that you like, as well.

**Gina:** Oh, man. Yeah. That helped me get through a lot.

**Walker:** But there will be, you’re right, there will be bad moments.

**Gina:** Yeah. Actually, it sounds kind of weird but I kind of look forward to them so I can deal with them, you know. I mean, I don’t want them to happen but I’m not as scared. I know that there’s another side to it. It’s not the end of the world, that you can continue and learn from it.

**Walker:** And the fact, and the fact that you are allowing yourself to date and have some new friends but at the same time, really keeping your own personal boundaries and your personal space. You know, I want to just support you in that, too, because that’s real important.

**Gina:** Yeah, it is. Like, “Dang, why didn’t I do this before?” Because it’s, it’s a good feeling. And actually, it’s good for everybody, I think.

**Walker:** Probably. And it’s probably very good for your boys to see that because, you know, the, the, they’re at high risk to use abuse in their own relationships so they need a lot of encouragement to resolve conflicts in other ways.

**Gina:** I know. Yeah. Yeah, definitely.

**Walker:** Do you have any questions to ask me?

**Gina:** Okay. Teacher moment. Let me think. I’m trying to think in
general... No, I do appreciate you reminding me to be safe, you know, with him.

**Walker:** Yeah. Always.

**Gina:** Because I do tend to put the cloud over things and not see it, and I do appreciate that because that’s dealing with reality and sometimes I like to get away from it and have to...

2—49

**Walker:** He’s not going to change.

**Gina:** I know.

**Walker:** At least if he does, it will be over time. It won’t be, it won’t be 1–2–3 boom.

**Gina:** No. But I do appreciate that a lot. I do thank you for that because it does, I do need to be reminded of that. I do. Were you yourself abused?

**Walker:** No, I was not. But I’ve worked with abused women for the past 25 years.

**Gina:** Does there seem to be the same pattern all the time?

**Walker:** I mean, there are some different variations, but it is. In fact, I wrote a book that many women read called The Battered Woman, so if you’re ever in the mood to read about it, you know, it’s still... It was published by Harper & Row in 1979 but people are still reading it.

**Gina:** Because it’s still so prevalent.

**Walker:** Yeah, I’m sure they even have it at the shelter.

**Gina:** Okay, I’ll do that.

**Walker:** You know, you might want to pick it up and see where you fit in with some of the others.

**Gina:** Is the reason why we allow that to happen based on the fact of how we see ourselves in society?

2—50

**Walker:** Well, I think so.
Gina: How women are placed in society, in certain positions.

Walker: Of course, that’s an important reason. And it’s also important that, you know, you have been able to tie it to things that you did that you don’t think was positive behavior, so you took responsibility. He gave it to you, but you accepted it. You know, and because you were very strong. You know, I think if it would have been more frequent, you would have been out sooner.

Gina: Yes. I... Yeah.

Walker: You know, that you took the verbal abuse because that was simply, you know, there, but the physical abuse, if it was more frequent, you would have been out sooner.

Gina: Yeah. I do believe that.

Walker: And I think you protected yourself and that’s why it wasn’t as serious or as often. It could have been worse.

Gina: Yeah, I think about that every now and then. Not too often, because I’m not very proud of that, but I’m a lot better with that.

Walker: All right. Well.

Gina: Thank you very much.

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Walker: You’re welcome.

Gina: It was very easy talking to you, and I again thank you for that. I do.

Walker: Well, good. Well, I hope you stay safe and continue on to make a great new life for yourself. I think you’re doing just great.

Gina: Thank you. Thank you very much. Thank you.

Walker: All right.
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About the Contributors

VIDEO PARTICIPANTS

**Lenore E. A. Walker, EdD**, Featured Therapist, is Professor at Nova Southeastern University’s Center for Psychological Studies and Coordinator of the Clinical Forensic Psychology Concentration. In addition, Dr. Walker is a member of the faculty of the Institute for Trauma and Victimization at NSU-CPS. Previously she was on the faculties of Colorado Women’s College and the University of Denver School of Professional Psychology. Dr. Walker is the Executive Director of the Domestic Violence Institute www.dviworld.org, a not-for-profit organization dedicated to the education and training, research and public policy issues around domestic violence with affiliate centers around the world. She has a national practice in forensic psychology and testifies on psychological impact from interpersonal violence and trauma including domestic violence, child abuse and violence against women.

Dr. Walker’s areas of interest have been in feminist psychology, violence in the family and violence against women. She has written 13 books in the area including the now-classic *The Battered Woman*, published extensively in journals and book chapters, and presented at scientific meetings around the world. She has been in the national and local media discussing issues around domestic violence, introduction of the Battered Woman Syndrome in self-defense cases where women killed their abusive partners and drew attention for her work with the O.J. Simpson defence team.

**Jon Carlson, PsyD, EdD**, Host, is Professor of Psychology and Counseling at Governors State University and a practicing clinical psychologist. He has authored 40 books, 150 journal articles, and developed over 200 videos featuring leading experts in psychotherapy, substance abuse treatment, and parenting and couples education.

**Diane Kjos, PhD**, Host, now retired, was a professor at Governors State University in Illinois for twenty-two years, and past-President of both the Illinois Counseling Association and the National Career
Development Association. She is co-author, with John Carlson, of two textbooks, *Theories of Family Therapy*, and *Becoming an Effective Therapist*, and co-host of the video series *Psychotherapy with the Experts, Family Therapy with the Experts*, and *Brief Therapy Inside-out*.

**MANUAL AUTHORS**

**Randall C. Wyatt, PhD**, Editor-in-Chief of Psychotherapy.net, is Director of Professional Training at the California School of Professional Psychology, San Francisco at Alliant International University and a practicing psychologist in Oakland, California.

**Charlotte Dick, MA**, is the Production Manager at Psychotherapy.net. She manages Psychotherapy.net’s video production, website content, and monthly newsletter.
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