

Working with abused women in the GIM Method

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Abstracts: The widespread existence of abuse in all its extreme and subtle forms (structural, economical, psychological, verbal, physical etc) as well as its impact on women, children and the community makes imperative the integration of feminist analysis of violence and feminist counselling approaches with previous training and experience of the Bonny Method of Guided Imagery and Music (BMGIM).

First I would like to say a little bit about my background to this subject. I have been working as a psychotherapist for about 30 years. My involvement from early on in gender issues grew out of my personal interest. The beginning of my training as a psychotherapist coincided not only with my opening up to my body and to my psyche, but also a deep questioning of my male role both in my human relationships and in society as a political being. I was also lucky to be, so to say, on the right place in the right moment: second half of the nineteen seventies in Sweden, Scandinavia and California, in the middle of a very vigorous feminist movement and the beginning of a pro-feminist, auto-critical men' movement which later changed quite a lot. (In some part of my lecture I also want to talk about what in feminist literature is called back-clash, which in different approaches is called by different names, like the individualism of the nineties, or the return of biologism in human sciences.) Ever since then I have been working a lot with the issue of male violence, with abused women and with abusive men. It just came to me, it was unavoidable, and I just had to take a stand.

In the actuality, besides my clinical work in Spain, I am caring for the caretakers as the supervisor of the only telephone-line for battered women in Hungary, maintained by a women's organization. I am also training psychologists in how to include the gender view in the psychotherapeutic work. During the last two years I have been doing supervisions at the first two GIM trainings in Spain, and again it was like the subject was coming to me. As you know, in GIM trainings we have so called direct supervisions. I was just discovering one case after the other, that, gosh, this woman is actually telling that she has been abused, that she is actually abused, that her problems are because that someone is crazy-making her, and still the guide was not hearing it. So I began to sort out in my head what was going on and began to put together what was needed for hearing them. My focus in connecting the work with abuse with GIM is about

- what you will need when you have clients who do not come to you having clear that they have an abuse story, or that they are right now victims of some of the many possible kinds of violence women might suffer from;

* Revised version composed on the basis of the PowerPoint slides and the audio recording of the workshop (thanks to Dyane Van der Weyden for the transcription!).

- what are the main topics you have to be able to listen to, and what previous preparation you need in order to include that in your work.

This morning I went through the Spanish newspaper “La Vanguardia”, and I found right away two heavy pages with the title “Women pending on a thread”, talking about the subject of women whose mistreaters have a restrain order, and how the programs with the chip the abusers should carry do work or not. A whole page was about the big quantity of women who denounce very severe mistreatment, but after one day, or two days, or one week they take back the denouncing. This connected me again with the fact that that the wide spread and the deep impact on society of male violence against women is always there, whether we know about it, or whether we ignore it. Statistically we have to count on that in the therapeutical population, and even among them who are coming to us for music therapy, there will be the same amount of abuse, or even more, because in therapeutical population you have to count on more. There will be abused persons who many times don't know that they are abused. In the last decades a worldwide process has been going on, in some countries more, in other countries less, that of giving name to the subject of abuse, giving names to what society and culture did no have names for, or had only euphemisms for. Unfortunately this process did not fully penetrate yet the helping professions, and even less the psychotherapeutic community.

So my parting point is that

“All music therapists need to have basic competencies to effectively screen for abuse with all clients, and then provide their clients with supports or referrals, if they do not have the knowledge or expertise to deal with abuse issues.”

And that

“A feminist analysis of abuse [...] can help music therapists understand abuse and respond in a helpful way.”

These quotes are from a chapter by Colleen Purdon (2006) in *Feminist Perspectives in Music Therapy* edited by Susan Hadley and published by Barcelona Publishers in 2006, a book I recommend you very much. Also in her chapter I found the following quote which I perfectly could use in first person singular for the introduction of this talk. The only difference between my way and Colleen Purdon's way is that while she got her music therapy training first and after working many years she opened up for the feminist approach, I came in contact with the music therapy after having worked quite a few years already as a psychotherapist and as a social activist with a feminist approach. She says:

“My work at the Women's Centre presented me some initially overwhelming questions:

- Why was I not aware of abuse and the impact of abuse on women, children, and families [...]?
- Why did I not know of the prevalence, seriousness, and impact of violence against women and children? Was the music therapy

- community part of the larger collective denial surrounding this issue?
- Was it possible to integrate a feminist analysis of violence against women and feminist counselling approaches with my previous training and experience as a music therapist?"

When I was supervising GIM trainees here in Spain and I saw all the missed cases of abused women, I realized that these are the questions I would like to open up in the GIM community and especially to the new students.

This leads us to look at music therapy work and specifically the GIM work, whether there is some contra-indication or whether there are some vessels for the work we propose. Another author in this book, Randi Rolvsjord (2006) is making a statement I subscribe completely:

"[...] I do not think that the discourse of music therapy is generally a patriarchal discourse. There is probably no need for revolution, but for more feminist, as well as political, reflexivity in general."

Here I would like to make a clarification: feminism is not about women's issues, it is about equality. It is about achieve even for women what we in the music therapy or in any psychotherapeutical work would like to achieve for any individual. In a patriarchal society the frontline between feminist or anti-feminism is often the same as between knowledge or not knowledge of feminism, because feminism in the first place is a very broad knowledge about gendered relationships and how they influence not only people's economical and social, but also psychological wellbeing. The frontline between knowing or not knowing is not drawn by biological sex. As my beloved teacher Fran Goldberg pointes out in her chapter in *Feminist Perspectives in Music Therapy*, the GIM community is actually a female dominated world (for example I was the only man in my GIM training) and still the feminist approach is not integrated in this work. As Sandra L. Curtis (2006) states:

"Feminist therapists generally receive training within a traditional therapeutic approach and only later undergo an individual process of feminist transformation of their practice."

Quoting other authors (Worell & Remer, 2003) she enumerates five points of what a feminist transformation of the music therapy work requires:

- 1) to identify sources of bias in the theory
- 2) to modify or eliminate any biased components
- 3) to assess the theory's viability
- 4) to determine its compatibility with feminist criteria; and
- 5) to highlight its unique contributions to feminist therapy."

Following these five points she also points out that

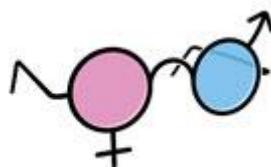
“[...] music therapy proves to be especially available for feminist transformation”

and (without mentioning GIM) adds:

[...] music therapy techniques which involve a combination of music and verbal processing are particularly well situated for this [...].”

Although in a GIM session the therapeutical process happens mainly in the music, the great thing about GIM is the unique combination of a very deep travel in the symbolic resolution of conflicts at the same time connected to the cognitive process, present through the verbal part. The pre and the post talks in a GIM session are the natural places for what in the feminist approach to psychotherapy is called the “name-giving” process. What you do not give name to or what you give a misleading name to will either not have a chance to be formulated in a travel or it will cause even more inner conflict for the traveller. Now, in order to be able to give things the right names you need to be able to see them yourself, have that knowledge. When opticians help you to obtain your optimal sight, they put on you one lens and then another lens and then a combination (although this process nowadays might be done digitally) and then suddenly you have your clear vision. The development of psychology can be compared with that process, where putting on different lenses equals to the name-giving process. For example Freud did not invent the unconscious, he just gave it a name. By putting on this lens for us, we realized that oh, things that before they tried to solve with lobotomy, we can actually resolve by talking.

Gender view is another lens, without which we can't see what's there, for example the naturalized and normalized ways of abuse. Many years ago the Swedish government initiated an information campaign especially for people working in the administration. The campaign's slogan were “Get better sight with gender glasses”, and was accompanied by a little badge which looked like this:



So here is your chance to get a better sight with gender glasses.

What are the gender glasses? This is actually another name for the feminist analysis of human relationships which acknowledges that all human relationships are power relationships determined social and historical conditions, and that in a patriarchal society the conditions for men and women are unequal both in the social structures, in the social interactions and in the individual relationships.

It can be interesting to read the text which forms part of the “gender glasses” campaign, this time in Finland (<http://stm.fi/en/gender-equality/gender-glasses>, 2016.02.28). Play with the idea of that these are instructions for how to incorporate the gender perspective in your GIM work, and you will see how they fit into the different stages of a GIM session.

“How to incorporate the gender perspective in your own work

Gender glasses can be used in all preparatory work, for example in matters involving legislation and decision-making, and in the preparation of broad projects, programmes and measures.

Step 1: Put on your gender glasses

Examine each matter at every stage of preparation from the perspective of women and men. At the start of the preparatory stage, examine:

- * how the matter affects women and men, girls and boys
- * what you already know about the situations and needs of women and men
- * what more you need to find out.

Use the gender perspective (people = women and men) as one of the examination perspectives throughout the preparation work.

Step 2: Assess gender impact

Gender impact assessment refers to the separate assessment of impacts from the perspective of women and men and gender equality. Gender impact assessment is carried out as standard working practice. Gender impact is always assessed when operations have an effect on different groups of people.

Assess gender impact:

- * by statistical analysis; how do women's and men's situations differ?
- * by conducting further research; how do the differences in women's and men's situations affect issues in the preparatory work?
- * by listening to experts and interest groups; how do they assess the gender impact?

Step 3: Take note of the results

Include the gender perspective when drawing up the final presentation.

- * Examine the impact of gender perspective on the final content.
 - * Highlight the results of gender impact assessment and how the assessment was implemented.
 - * If an impact assessment was not carried out, present the reasons.
 - * Gender perspective must also be considered throughout the monitoring and follow-up stages.”
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So just to resume what gender view is about: it is making visible and giving names to the different conditions for men and women, problematising what was not questioned, what was naturalised or bagatellised. When something is completely naturalised, it is made invisible. Patriarchal society relies on attributing different tasks and different roles and different places in the power structure to women and men, and then it presents as it had to do with some essence in the biological aspects of men and women, because women ARE like that, and men ARE like that. Gender view problematises this biologism, and the intervention models based on it, that is the making of interpersonal or social problems into individual, intrapersonal questions.

Putting on your gender glasses is extremely important when it comes to the issue of violence against women. It makes you see that violence against women is different from any other kind of violence in a few very important aspects. First of all it forms part of what we call structural violence, that is any kind of violence which “corresponds to the social and cultural norms and values that serve as the basis of general belief” (Szil, 2006). For example, in a country where xenophobe feelings have been stirred up for many years by Le Pen and company and a right-wing government is colluding with that movement, criminal acts like the expulsion of an ethnic group, the gypsies is not seen as a violent act because it colludes, it corresponds to the prejudices which are widespread about the gypsies in France. In the apartheid of South Africa or in the deep south of Alabama in the 1960s it was okay to kill a negro. In a culture where jokes about blondes and their intellectual capacity, jokes about violence against women or women as inferior beings are accepted, it remains invisible that individual men are acting out this in abuse. Until we don't question, don't problematise that someone can have free time because someone else is doing all the housework for him, and we don't talk about exploitation or a form of economical violence in a case like that, we cannot sort out what is violence and what is just conviviality. In a society where even the public space is invaded by objectification or even pornografisation of women's body, it will be more accepted or less visible and not problematised the sexual violence against women.

Violence against women is also different from other forms of violence in that it is a systematic violence. We do not talk about aggressivity or about occasional violent acts. We talk about systematically used tactics which have an aim: to control, to rule over women, to establish and maintain men's dominance over women and in the last place to punish women who would like to stand up against this dominance. Just a little reminder: all countries 85 % of the women who die at their husbands, boyfriends, ex-husbands, ex-boyfriends hand just declared that they want to separate, or have separated. So viewing violence against women like that we can see that abuse is not about psychological issues, not about personality characters in the abusers. It is about sexist views and it is about inequality between the sexes, and not about communication problems, or stress, or anger management. There are always coming new waves of psychologisation or excusing of male violence. In times of the economical crisis is because they are without jobs. But it is an instrument of power and control, and it is a human right issue. It has been the main development in the last decades the discovery, that violence against women is actually an issue which cuts through all society on all levels. From seeing it as a public health issue to realize that it is a human rights issue have been the way of making it more visible and finding ways of dealing with it. In order to do that the Swedish government come up with a common name for violence against women, violence committed in the name of honour,

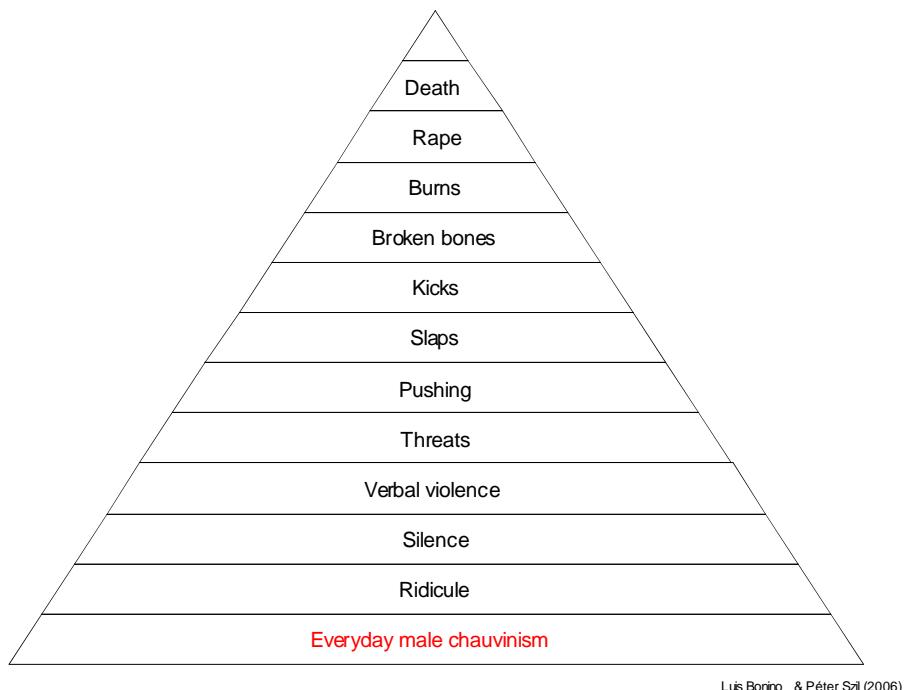
and violence against sexual minorities as gays, lesbians, transsexuals, naming it all patriarchal violence. So over the last decades we could gather information about what are the tactics abusers use to establish and maintain power and control and it is this information we have to include in the GIM work also.

The so called power and control wheel has been developed already in the 1980's in the frame of the so-called Duluth model by one of the first pioneers organizations dealing with abusers in the United States.

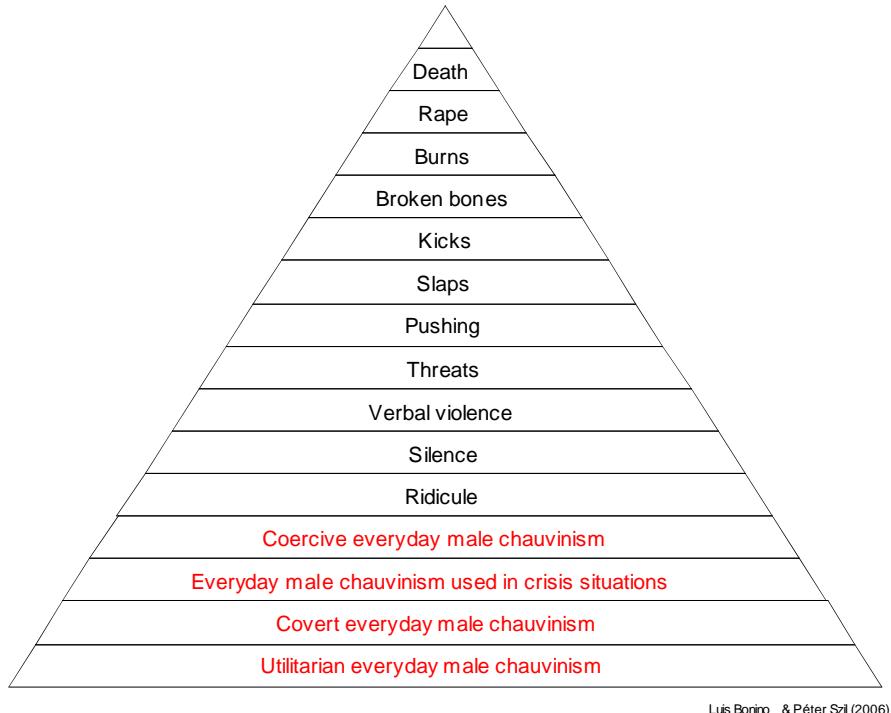
I propose that you start with "Using isolation" as this uses to be the first step after the honey-moon: isolating the women from her family, from her friends, from her work etc. Then begins the phase of using emotional abuse and what is not mentioned here: verbal abuse. (Actually when they made up the wheel in the 1980's, was not yet developed so much this knowledge about verbal abuse. I do recommend all of you a very important book of Patricia Evans called Verbal abuse, which is published also in Spanish.) Then begins the escalation of the violence using intimidation, using coercion and threats, the whole time using economical abuse, making use of male privilege and also using the children, and the whole time and specially when it comes to a point where it can become visible, minimizing and denying the abuse, and blaming the victim for it.



Here is another way of presenting the continuum of violence against women:



The pyramid or ice-berg model is very useful because it gives us the possibility to visibilise a process about which we began to gather a lot of information over the last few decades. You should look from down upwards, starting with everyday male chauvinism. The gathering of information about what a colleague of mine here in Spain, Luis Bonino, called everyday male chauvinism is a nice example of the visibilisation work of a violence which is not called violence yet. It consists in manoeuvres, tactics men use in everyday situations. They are so woven into everyday life, that we use to say “men are like that”, “men talk like that”, “they do like that”. These tactics was discovered and began to be mapped up when one woman after the other came into our offices talking about so-called “common” symptoms. These women were repeating phrases like “I actually do have everything so I have nothing to complain about, but I am not happy, I have depressions, I notice over the last years that I am losing my vitality” and in more advanced stages they talk about somatizations also. So we began to look at what these women have in common? And slowly, because we have the gender view and do not intrapersonalise psychosocial situations, just emerged, became visible all these men who do use the same tactics, the same phrases, the same small everyday manoeuvres. Then we began to map out them, and, over the years, we began even to see different strata of everyday male chauvinism, which Luis Bonino classified in the following manner:



Luis Bonino & Péter Szil (2006)

Here everyday male chauvinism is broken down to four different steps. Again it is good to read from down upwards.

Utilitarian every day male chauvinism is the most invisible. Actually it is mostly done by not doing, and that makes it very difficult to deal with. For example: not participating in the taking care of the children and the housework is difficult to call violence, but it leads to women being overloaded, with somatizations, loss of vitality, isolation etc. as consequence.

As we go upwards to the coercive everyday male chauvinism, you can see how we approach strata of male violence which are already visibilized in the society. Still, when one begins to integrate this knowledge in the psychotherapy practise, there are some personal and society mechanisms and processes at work which make identification of abuse very difficult both for the clients and the therapist. I will name a few, quoting again using the formulations of Colleen Purdon (2006) (comments in parenthesis from Péter Szil).

- Denial by the victim, perpetrator, and/or therapist;
- Minimizing the extent of abuse or the harm caused;
- Fear of reprisal by perpetrators, family, or the institution;
- Reluctance to take ‘sides’ or create a disruption in the family; (That is when the maintenance of the family comes first instead of the safety of women and children.)
- Pressure from clients, family members, or institution to keep secrets; (In this regard it is very important that the legislation gives an instrument to professionals making clear that violence is never a private issue, violence is always a public issue. This has been a big step here in Spain. With the actual legislation professionals who in

their work find out about any kind of abuse, violence, they are obliged to report to the authorities.)

- Believing the perpetrator's story or discrediting the victim's story; (One of the main things I did learn from all these women who, many times without getting any money for it, put their heart, life, time and energy into listening to the victims, is that you have to believe the victims. One of the main reasons of victims not coming out and denouncing is because they do not count on us believing them, although victims hardly have any reason to lie.)
- Victims are compelled to protect the perpetrator or maintain silence; (For many reasons: emotions, economy, family etc.)
- Therapy focus is on symptoms and not on the experience of victims or perpetrators;
- Discomfort with the issue or lack of training; (on the therapist's part) (and last but not least)
- Personal experiences of abuse that have not been identified or processed. (We should not think that among therapists violence against women has not been present to the same extent as in the rest of the population. One of the hardest experiences I have had was one evening in a supervision for a group of volunteers, all well trained people, who attend a telephone line for mistreated women. There was a question about how you deal with a phone-call from a woman who just has been raped. My first answer was that this is so distressing that in order to be able to be there you have to have your own stuff on place so let's first talk about possible own issues. There was about 15 women and as we went around, one after the other began to say some stories, but quite a few of them said "no, I don't, I can't recall, I had a harmless childhood, I was OK as a young woman, as an adult etc". But as the circle went on, even these women realized that "oh, of course, that dentist who used his chance when I was there with open mouth and in pain to touch my breast, that is of course sexual violence, that is abuse" and so on. So finally there was no one of them who could not name actually very profound and very stressful experiences of sexual harm, of sexual violence against them.)

So we come to a very important conclusion, formulated by Jennifer Adrienne (2006), a feminist sociologist and a former music therapist, one of the key writers in the anthology *Feminist Perspectives in Music Therapy* (Hadley 2006):

"Music therapy is part of the evolution of cultural values, including gender norms and values. It is not an oasis from cultural construction."

As to the gender norms disguised of cultural values the authors of the classical book *Feminist Family Therapy* point out three central assumptions about male and female rolls as underlying gender-based assignments (Goodrich et all, 1988)

:

- (1) “Men believe they should always have the privilege and the right to control women’s lives;
- (2) Women believe they are responsible for whatever goes wrong in a human relationship, and
- (3) Women believe men are essential for their well-being – essential rather than merely desirable or enjoyable.

These three assumptions combine to create most of the interactions as well as the problems between men and women.”

As to the historical evolution of cultural constructions it is important to realize that for the last decades we have been immersed in a period which in the feminist analysis is called the backlash. Sociologist Jennifer Adrienne (2006) quotes a colleague (Liz Kelly, 1999) who at the end of the nineties pointed out something which is unfortunately equally actual in 2010:

“As awareness of the extent of sexual violence has developed, so have professional responses to it. In many Western societies this response has become increasingly therapeutic and individualized, [...] displacing feminist frameworks, which stress collective support and response through self-help groups and political activism. The last decade could be described as the ‘decade of disorders’ ... and personal healing has eclipsed the stress on social justice and collective action.”

This is one more important reason for integrating the feminist approach in the GIM work, as (Purdon 2006)

“Feminist analysis recognizes the tendency to...

- excuse the actions of perpetrators
- silence victims individually and collectively
- interpret abuse as a relationship problem or a problem with anger
- understand abuse as a personal failure of the victim or the perpetrator, rather than a phenomena of a patriarchal society, and
- pathologize the survival methods of victims and to focus treatment on the symptoms rather than the cause.”

And this is what is going on not only in the therapeutical context. It is around us in the press and in the personal conversations. For example in the last decade in many countries violence against women at least became an issue in the press. But I’m every week waiting for the day when instead of saying in the headlines “one more woman dead”, it will be said “one more man who killed”, just to shift the emphasis from the victim to the perpetrator. That in its turn might influence the conversations you can listen to in the pubs, analyzing why didn’t she go and what did she do to deserve that and so on.

Now, if we recognize that tendency, what can we use to counteract it? Feminist counselling tools are very simple tools which fit awfully well in the prelude and postlude of a GIM session. These tools consist basically of four steps – gathering information,

Feminist counseling tools

Gather information

?

Reflect

?

Take ethical stand

?

Deliver information

reflecting, taking an ethical stand and delivering information – without any clear cut separation between them. They can collude with each other so you sometimes are doing an intervention or a comment which covers two steps at the same time (that's what the arrows up and down are signalling), but if you at any moment are not in any of those four steps, then you are probably wandering around and not doing much profit for a victim of abuse.

I will say a few words about each of the four steps.

Gathering information is the detection of the abuse. How do you open up your ears, your mind, actually even your eyes to get when a person who comes to your office saying “I am depressed, I have nightmares” or not even that “I am losing vitality, I do not know, I do not work so much, but I am always so tired” is a victim of abuse? There is a poem which I read more than 30 years ago, but I do not remember where:

“There is no shadow
without a body
which casts shadow,
there is no phantasm
without cadaver.”

That means that you have to ask questions. But when asking questions you have to be very careful in not converting to an intrapersonal issue something which might be interpersonal or sometimes even extra-personal. Just to give an example: in one of the last supervisions there was a traveller who said: “I feel so little”. The guide asked her: “How do you make yourself little?” What did the guide do? She assumed that the problem is intrapersonal, supposed that the person is doing it to herself. She made it to an inner process of the traveller. She could have asked simply: “What makes you feel little?” Do you hear the difference? “How do you make yourself little?” “What makes you feel little?” The second question opens up to that she might say: “My husband is so big.” And then you can ask: “In which way is he big?” And then you might hear for example: “He always talks so loud”. Then you might ask: “What does he use to say when he is loud?” And in five minutes you might have the story of a woman completely rolled over by verbal abuse every day. We do have in GIM method a fantastic instrument with which to dig into the interior of the persons, but beware of turning into intrapersonal what is not, especially in the prelude, or in your devolutions, or in your conclusions. Open up instead to the awareness of that male violence exists, and it is an everyday present social phenomenon in woman’s and children’s lives. The chances are just too big that women do feel small, tired, depressed, lack of vitality because somebody is taking away their vitality, someone is making them overwork, someone is abusing of what Anna Jonasdóttir, an Icelandic sociologist working in Sweden calls the “love power” of women (as opposed to the power of control used by men) (Jonasdóttir 1989).

Taking an ethical stand is related to what we just said. What is a human rights issue should not be converted into a psychological issue, a very clear distinction should be made between human rights or safety issues and psychological issues.

For illustrating what delivering information is about let me again deliver you some information from Colleen Purdon (2006):

“Women need information about their options and how the therapy fits within the larger social service or justice system.”

The same way we do not want to make intrapersonal what is the effect of a cause and we do not want to leave victims of abuse alone, we do not want to be alone ourselves either with our limited resources which are in the first place psychological. So we want to collaborate and

“Be part of a coordinated community response to violence and communicate effectively with other service sectors and providers.”

Now, when you open up to that work it can often happen also that you work with a man and by having your feminist gender glass and hearing apparatus you find out that he is actually abusing. There we have to make an almost paradigmatic shift.

Victims / Perpetrators	
???	???
<ul style="list-style-type: none">• empowering• benefit• Therapeutically: foment well-being of the person	<ul style="list-style-type: none">• disempowering• abdicate privileges• Therapeutically: foment well-being of the person's environment
Peter Sall (2006)	

In general psychological work is about making the person who is in front of me feeling better. GIM work in general is about empowering. Working with abused women of course is in the first place about empowering. Empowering on the social level means to grant people who are in disadvantage benefits, and on the therapeutical level means fomenting the well-being of that person. Now when I find out that a person is abusing, I have to disempower that person because he has too

much power and he abuses of his power. I have to get him to abdicate privileges instead of getting more benefits. In the therapeutical field I have to foment not the well-being of that person, but the well-being of that person's environment, and even counting on that the person will temporally feel bad about losing privileges, loosing what he based his personal power on up to now, for example the power of control. And I have to do so until he finds the taste of for example to be a just person and to find reward in that. So while confronting his abusive behaviour, still being supportive of the possible change, and to be very clear about this distinction (Purdon 2006):

“Demonstrate an attitude of respect, understanding, patience, support and empowerment. [...] This is also important in work with abusers who need to be accountable for their abuse, while being treated respectfully. [...] Work with the justice and social service system to hold perpetrators of abuse accountable and to support changing abusive behaviour.”

My own book *Why Does He Abuse? Why Can He Abuse? Domestic Violence: Men's Responsibility* (Szil 2006) contains an appendix called "Programmes dealing with perpetrators" which summarizes some basic guidelines of "good practice" in that kind of work, easily applicable to any therapeutic context.

I would like to round up my presentation with two things.

One is a cartoon of my favourite caricaturist from England, Jacky Fleming, who emphasizes in a humorous way one of the very basic points of my presentation about the need to deal with abuse without blaming the victim.



www.jackyfleming.co.uk

The other thing is a citation from Sandra Curtis (2006) from whom I quoted earlier the five steps of feminist transformation of the therapeutic praxis. I think her words about the personal implications of that transformation would make a good closing for my presentation.

"As a result, personal transformation is required such that the personal relationships of feminist music therapists themselves are characterized by equality and ongoing feminist analysis. Furthermore, they must spend a portion of their personal lives in actively advocating for social change in order to better the external world for all women."

Bibliography

- Adrienne, Jennifer (2006) A Feminist Sociology. In Susan Hadley (ed.) (2006).
- Bonino, Luis & Szil, Péter (2006) *Everyday Male Chauvinism: Intimate Partner Violence Which is Not Called Violence*. Budapest: Stop-Férfierőszak Projekt. [Online] <http://www.stop-ferfieroszak.hu/en/everyday-male-chauvinism>
- Curtis, Sandra L. (2006) Transforming Theory, Transforming Lives. In Susan Hadley (ed.) (2006).
- Goodrich, Thelma Jean, Rampage, Cheryl, Ellman, Barbara & Halstead, Kris (1988) *Feminist Family Therapy: A Casebook*. New York: W. W. Norton
- Hadley, Susan (ed.) (2006) *Feminist Perspectives in Music Therapy*. Gilsum, NH: Barcelona Publishers.
- Jonasdóttir, Anna (1989) *The Political Interests of Gender: Developing Theory and Research with a Feminist Face*. Thousands Oaks, CA: Sage Publications.
- McMillan, Dina L. (2007) *But He Says He Loves Me: How to Avoid Being Trapped in a Manipulative Relationship*. Sidney: Allen & Unwin.
- Purdon, Colleen (2006) Feminist Music Therapy with Abused Teen Girls. In Susan Hadley (ed.) (2006).
- Rolvsjord, Randi (2006) Gender Politics in Music Therapy Discourse. In Susan Hadley (ed.) (2006).
- Szil, Péter (2006) *Why Does He Abuse? Why Can He Abuse? Domestic Violence: Men's Responsibility*. Budapest: Stop-Férfierőszak Projekt. [Online] <http://www.stop-ferfieroszak.hu/en/why-does-he-abuse>
- www.jackyfleming.co.uk
- www.theduluthmodel.org/