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Feminist Approach to Clinical Psychology

Utilizing the feminist approach in clinical psychology includes recognition of a connection between the psychological suffering that an individual endures and the social context from their lives. The feminist theory of psychology closely ties the therapist to a commitment to social justice (Hare-Mustin & Marecek, 1991). A therapist utilizing the feminist approach is expected to look at the full picture of their client's lives, and include consideration of what social discrimination they may face in both treatment and clinical discussions. Moreover, the feminist clinical psychologist is expected to commit themselves to social justice work outside of their practice. Social problems incur mental health problems. This recognition shows that in order to help the individual, the social experiences they endure must be considered.

Feminists have long criticized the mental health field, particularly in regard to the treatment of women that is seen within the field. The feminist approach in clinical psychology was primarily focused on women's issues in the beginning, but that has shifted to include consideration of discrimination in a more general discussion (Brown & Brabeck, 1997). Discrimination impacts mental health, regardless of what the cause of the discrimination may be. Feminist clinical psychologists commit themselves to the betterment of the field of psychology. This feminist perspective in clinical psychology has helped bring about awareness of dangerous circumstances such as the misuse of medication, sexist use of diagnoses, and sexual misconduct within the realm of therapy. Moreover, the feminist perspective has brought about progress within therapy, with advances such as new approaches in psychoanalysis and family therapy (Marecek, 2017). The feminist theory of clinical psychology is still evolving, and further developments are to be expected (Brown & Brabeck, 1997).

A review of the feminist theory of clinical psychology will be provided. In consideration of a theory of clinical psychology, there are key components that must be reviewed. These components include the theory of personality, theory of psychopathology, and the approach to treatment. Each of these will be discussed in relation to the feminist theory of clinical psychology.

Theory of Personality

Feminist theory does not have a singular theory of personality, but a strong emphasis is put on the impact that environment has on the individual. People become who they are, not in spite of, but because of the society in which they are raised and the ways that they are treated within it. Magnusson and Marecek (2012) state,

Feminists' central premise was that people's experiences – and their emotional difficulties, personal distress, and relationship problems – were inextricably tied to the larger societal context, to their place in the social structure, and to cultural discourses. To repeat a well-worn slogan of the women's liberation movement, "the personal is political." For feminist therapists, a therapy client's private experiences are not solely her own; they are part of a matrix of interpersonal relations and also part of a broader pattern of relations of power in society. The issues to be addressed in therapy thus must be understood in the context of a client's interpersonal relationships and her location within structures of power and privilege, as well as the cultural meaning systems that shape her worldview,

In this statement it is asserted that an individual's development is undoubtedly tied to the environment in which they reside, and the experiences they have within that environment. Each

relationship present in an individual's life has an impact on the person they become, and those relationships are entwined with larger societal patterns.

To put this proposed idea of development within the context of societal place in a specific example, we can examine the development of women and girls. In the United States, women and girls develop within the understanding of what it means to be female in this country. This includes gender norms that are placed onto women and girls, pay discrepancies and job expectations, societal expectations, as well as a multitude of other examples that are too great to list. This idea can be expanded to any particular identity, each of which impacts the ways that an individual will develop (Radtke, 2017).

Theory of Psychopathology

The feminist theory of psychology examines the psychological problems that an individual may face conjointly with the societal discriminations that are present in the individual's life. It is an unfortunate reality that many individuals face discrimination and oppression. Individual psychological problems do not occur separately from these societal problems. The feminist perspective looks at the ways that societal problems influence psychological problems. The cause of psychological distress is said to be environmental and cultural. Mental disorders occur as a result of coping with oppressive environments (*Systems of psychotherapy a transtheoretical analysis*). If an individual faces racism, homophobia, sexism, classism, ableism, or any other form of oppression, then that individual is facing onslaughts in their everyday lives. This individual will face hardship due to the very person they are, because of aspects of themselves they cannot change.

Magnusson and Marecek (2012) explain, "In recent years feminist therapists – like feminist scholars and researchers – have increasingly endeavored to understand and address the

psychological harm connected to racial and ethnic inequality, class injustices and poverty, and immigration, as well as to homophobia and heteronormativity.” It is apparent that mental health is influenced by oppression and discrimination. To adequately understand the roots of mental health issues a therapist must understand all of the areas that the issues stem from, including the social context.

The negative impact of discrimination and oppression has been correlated with research. Discrimination has been found to reduce the physical and psychological health of individuals who identify with a minority group. This is incurred by threatening their sense of belonging and control. This negative effect can be found even when overt discrimination is replaced by tolerance. Verkuyten and colleagues said on tolerance,

We only Tolerate what we object to. In everyday life, being tolerated may not have only positive implications for minority members; it may also be offensive and hurtful because it implies disapproval of what one believes and practices and can be seen as reproducing inequality and domination.

Tolerance implies to the individual that they are able to live the way they would like only as long as the tolerating group allows (*Being 'Merely Tolerated' May Put Minority Members at Risk*, 2020). Feminist theory takes into consideration how social issues, such as discrimination and tolerance, could impact an individual’s mental health.

Approach to Treatment

Treatment through the lens of feminist theory requires inclusion of a full examination of the patient’s connection to the social world. A feminist psychologist would require understanding of the social harms present in the individual’s life to provide proper treatment. Mental problems

result from discrimination and oppression, and thus cannot be treated without understanding how these factors play a role in the individual's life.

Bogart (1999), proposed five tenets of feminist counseling psychology to teach to graduate students. The proposed tenets were adapted from the five central tenets of feminist research methods. Applying the tenets to clinical work requires understanding of the lack of an objective reality. Distortion occurs between what is spoken by the patient and what is understood by the therapist. A therapist enters each session with their own understanding of the world, and each client has a widely differing understanding. Recognizing, and attending to, these differences leads to improved clinical work.

The first tenet is as follows, "recognize the interdependence of the counselor and the person." The importance of this tenet is shown in previous research, which found that clients will alter responses based on the input, or lack thereof, from the therapist. The actions of the therapist impact the actions of the patient, and recognizing this allows for work to be done that ensures the therapist is not leading the patient to exclude or minimize relevant information.

The second tenet is, "avoid decontextualizing people," and through doing so, avoid inaccurate diagnoses. A therapist will encounter a multitude of individuals with differing backgrounds from themselves, which may be unfamiliar to the therapist. Social context can greatly impact the meaning of an individual's experiences, and it is important to take this into consideration. The experiences of the patient must be taken in through the understanding of what is common and accepted in their culture.

The third tenet is, "recognize the nature of one's values within the counseling context." Regardless of whether an attempt is made to separate personal experiences from counseling work an impact will still be seen in the sessions. Life experiences make people who they are, and every

aspect of a therapist's life will make its way into the counseling approach they utilize. Recognizing the ways that life experiences impact counseling and the relationship with the patient is a necessary step to provide the best treatment possible.

The fourth tenet is, "accept that facts do not exist independently of their linguistic codes." The language that is used in therapy is as important as the message being shared. The language seen in treatment reflects the underlying beliefs of the therapist, and the theory that the therapist tends to follow in their work. The patient will be seen through a different light dependent on how they are being examined, regardless of the facts of the case.

The final tenet that Bogart proposed was, "demystify the role of counselors and establish an egalitarian relationship between counselors and the people they serve." Therapy should be accessible to everyone, and the process should be known to both the therapist and the patient. A patient deserves to understand the journey they will take in therapy, and the help that should be expected from the therapist along the way. The therapist should provide an understanding to the patient of the process and the role the therapist will play in the patient's life. Moreover, a therapist must treat all patients as equal. A therapist and a patient form a relationship at the beginning of treatment, with a common goal of betterment of the patient's life. The patient is an equal in the relationship, and this must be the case for all patients no matter who they may be.

Conclusion

The feminist approach to clinical psychology requires a broadened understanding of each patient, and an awareness of the social problems within our society. The feminist psychologist must, by definition, be involved in social advocacy and progress outside of the realm of therapy. The patient is seen in the context of their social lives, and the impact of negative social circumstances such as discrimination and oppression are considered. A patient's development is

influenced by the environment in which they grow, and mental health problems can result from societal problems. Understanding social influence is essential to providing adequate treatment. Considering social influence on the part of patient and therapist allows for accurate treatment to take place. The utilization of the feminist approach to clinical psychology examines psychological suffering and social influences conjointly.

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