



Feminist challenge and Women's Liberation

By Cheryl White

The 1970s and 1980s were a time of profound feminist challenge in the therapy field. Ann Epston and I, Michael, and David were all vitally engaged with and influenced by the feminist issues of that time. Everything was up for questioning: the gender roles in families, the practices of mother-blaming, the concept of 'schizophrenogenic mothers', gender inequities in the field of family therapy, male-centred language, heterosexual dominance, the politics of representation, and so on.

To try to convey the context from which these challenges emerged, it's necessary to speak of Women's Liberation which was later known as the feminist movement:

Because our work is never done and underpaid and boring or repetitious and we are the first to get the sack and what we look like is more important than what we do and if we get raped it's our fault and if we get bashed we must have provoked it and if we raise our voices we're nagging bitches and if we enjoy sex we're nymphos and if we don't we're frigid and if we love women it's because we can't get a man and if we ask our doctor many questions we're neurotic and if we stand up for our rights we're aggressive and unfeminine and if we don't we're typical weak females and if we want to get married we're out to trap a man

and if we don't we're unnatural and because we still can't get an adequate safe contraceptive but men can walk on the moon and if we can't cope or don't want a pregnancy we're made to feel guilty about abortion and ... for lots of other reasons we are part of Women's Liberation. (from a broadsheet written by Joyce Stevens for an International Women's Day March in 1975, published in Wills, 1983, pp. 312-313)

In the late 1960s and early 1970s, interactions between men and women, which had been taken for granted for so long, were shifting. There were many elements to this social movement. I can vividly recall the early consciousness-raising groups. It was so significant that these groups were personal, but also collective and related more broadly to our political frameworks. How the problem was defined, the analysis, and the response were all personal *and* collective.

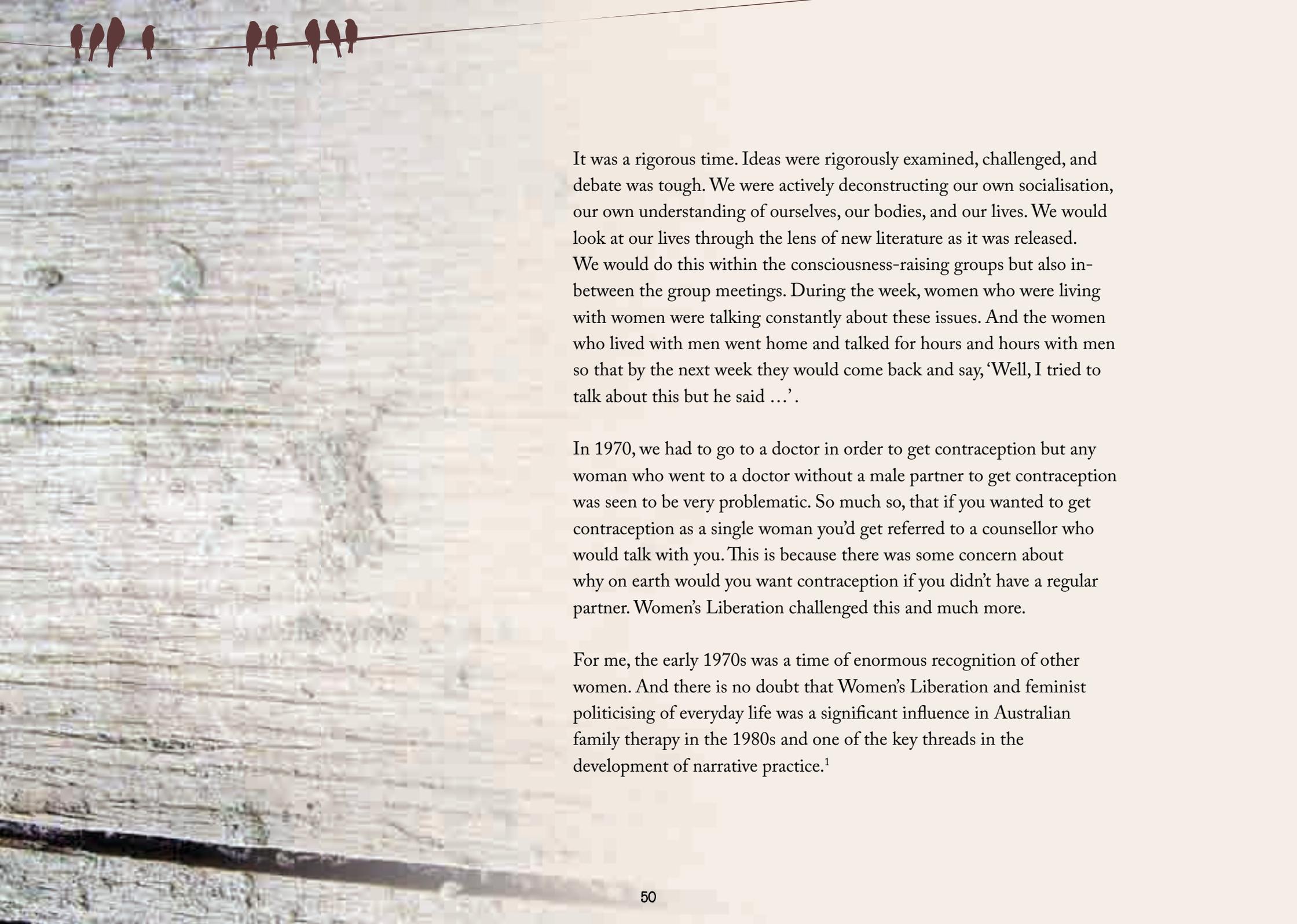
At this time, we were all reading the latest feminist writings and trying to relate women's personal problems or personal experiences to this growing literature. We were analysing our personal experience so that these difficulties were no longer seen only as individual women's problems, but part of a much broader struggle. We started to see that violence against women, sexual assault, terrible childbirths due to medical intervention,

difficulties in accessing contraception, and so on, were collective problems. We didn't separate ourselves from the experience of other women:

'... the point [of consciousness-raising groups] is to understand the relationship between an individual's experience of oppression and oppressive political and social structures, with the aim of transforming them.' (McLaren, 2012, p. 159)

We were also politicising the concept of 'voice'. We were considering questions such as, 'whose body is this?', 'whose life is this?', 'whose story is this?'. It was profound to realise that we weren't actually in charge of our own bodies. We were not in charge of contraception, abortion, when we would have sex, what sort of birth we would deliver. We had been taught not to think of our bodies as our own. Considering that we had the right to knowledge about our own bodies was profound for us.





It was a rigorous time. Ideas were rigorously examined, challenged, and debate was tough. We were actively deconstructing our own socialisation, our own understanding of ourselves, our bodies, and our lives. We would look at our lives through the lens of new literature as it was released. We would do this within the consciousness-raising groups but also in-between the group meetings. During the week, women who were living with women were talking constantly about these issues. And the women who lived with men went home and talked for hours and hours with men so that by the next week they would come back and say, 'Well, I tried to talk about this but he said ...'.

In 1970, we had to go to a doctor in order to get contraception but any woman who went to a doctor without a male partner to get contraception was seen to be very problematic. So much so, that if you wanted to get contraception as a single woman you'd get referred to a counsellor who would talk with you. This is because there was some concern about why on earth would you want contraception if you didn't have a regular partner. Women's Liberation challenged this and much more.

For me, the early 1970s was a time of enormous recognition of other women. And there is no doubt that Women's Liberation and feminist politicising of everyday life was a significant influence in Australian family therapy in the 1980s and one of the key threads in the development of narrative practice.¹

Women's meetings

In the 1980s, strong feminist women spoke out about every aspect of family therapy. As feminist critique grew, a number of us, with Judith Cross (1984) and Kerrie James (1984) playing influential roles, started to host women's-only meetings (Chamberlain, 1992; Hewson, 1989/90). The first of these occurred in Adelaide in 1983 and women flew in from other states. Over time, these women's meetings were then held prior to family therapy conferences:

The Women in Family Therapy Meetings began at a time (1983) when women had recognized the need for an independent venue in which to claim the right to speak in a 'woman-made language', as well as acknowledging the 'men-made language' of formal academic professional presentation. It was apparent that the authority, or lack of it, of women as leaders in the field needed to be addressed. (Chamberlain, 1992, p. 49)

Initially, these separate women's meetings caused some consternation, as Kerrie James (1984) described in her influential paper 'Breaking the chains of gender: Family therapy's position?':

So, some of us have decided to take space for ourselves and meet separately ... my claim to my separateness does represent a challenge to men on a number of levels. I am challenging your power to define and circumscribe my experience, to provide words and to assume to know my meanings. I also challenge you to reflect on your power within patriarchy. Some women claiming their space represent a challenge to other women as well as men to explore the chains and restraints of gender and to incorporate gender and an understanding of power into their work as family therapists. I ask that you take up this challenge and thereby, maybe experience what all the fuss is about. (p. 248)

Other early key issues involved developing non-sexist language policies, questioning marital therapy, and domestic violence:

Non-sexist language

The sole use of the pronouns 'he', 'him', 'his' and 'himself' is unacceptable. The deliberate choice to use 'he' and then explain that this includes male and female therapists and clients is unacceptable and arrogant. More acceptable options would be:

- > to change from the singular to plural and use 'they' and 'their' as an alternative to 'he/she' and 'her/his'.
- > to re-word the sentence such that the use of 'she/he' is not necessary.
- > to alternate the use of 'he' and 'she'.
- > to use 'one' in place of 'he' or 'she'. (Chapman, Martin, Park, Potts, & Scicchitano, 1984, p. 237)

I am
challenging
your power
to define and
circumscribe
my experience

Marital therapy and feminism:

How can feminists, operating as marriage and family counsellors, reconcile themselves to the fact that they may work at times to stabilise institutions such as marriage and the family that historically have operated to subordinate women? (Chapman & Park, 1984, p. 259)

Domestic violence:

It will be argued ... that, as mental health professionals, we are currently in the process of socially constructing the phenomenon known as 'domestic violence' or 'spouse abuse'. It will be argued further that we remain largely unconscious of this 'constructing' in which we are involved, preferring the idea that the phenomenon is being 'recognized' and described in some scientific, objective fashion. The consequences of this, both for our understanding of domestic violence and for our reaction to that understanding (i.e. our interventions) are major. It will be argued that the current construction of domestic violence, particularly as it is appearing in the family therapy literature, obscures far more than it reveals. It obscures, perhaps even obliterates, the experience of the woman victim; it obscures the relationships obtaining between domestic violence, the modern nuclear family, and the wider society; and it obscures the possibility of an alternative understanding or construction of domestic violence, one which would lead in quite different directions, to an analysis of patriarchal society and its mediation via the family, and thus to a different idea of possible interventions. (McIntyre, 1984, p. 249)

Over time, the women's meetings in family therapy grappled with similar issues as the feminist movement at large, as Susi Chamberlain (1992, p. 50) describes:

In 1989 the meeting was held at Akaroa (near Christchurch). Two issues emerged in this meeting: the invisibility of lesbians and respect for Indigenous peoples. An impromptu workshop held on the last morning of the meeting posed the question: 'When did you first realise you were heterosexual?' This both stimulated emotional response and opened up discussion of sexuality, the significances of sexual orientation in terms of the political location of individuals (be they therapists, clients, family, lovers or friends) and the right to a voice for all women, irrespective of their sexual orientation.

The presence of Maori women at the 1989 (and other) women's meetings, and the absence of Koori (or other Aboriginal) women at all meetings to date, crystallised in 1991 when a plenary session was called to consider the issues of race and social justice in therapy. A resolution was accepted that the women's meeting should show respect for the Indigenous people by setting aside a portion of proceeds for 'paying the rent'.

Further discussion centred on encouraging Aboriginal therapists to participate, if they wished to, in women's meetings, and on attending to the needs of Maori women for whom ceremonies of greeting and farewell were an important element of social interaction. Significantly, these discussions created a milieu in which the wider implications of race, indigeneity and post-colonial inheritance could be explored and examined, both as issues of personal integrity and in relation to the impact of these issues in the therapeutic context.

Another issue of cultural respect was raised in 1990: that year the women's meeting was cancelled out of respect for and support of Jewish women for whom the family therapy conference would have clashed with Yom Kippur – the central Jewish religious holy day. (p. 50)



Publishing and the politics of representation

A feminist ethos and politics also made it possible to explore new publishing principles. Dulwich Centre Publications began in 1983 and from the outset we were interested in prioritising the politics of representation². Over time, Amanda Kamsler and I (1990) made the following invitation to readers:

An open invitation to formulate policies around publishing (1990)

Cheryl White and Amanda Kamsler

We believe questions are being asked about the way writers have represented the experience of people whose lives and stories they are describing. Where people's actions are under discussion in the literature without their permission – no matter who they are and what is being said – these people are at the mercy of the writer's descriptions about their behaviour ... As a result of these considerations, there is now a greater importance being placed on the accurate representation of people's experience in articles and presentations. A number of Australian and New Zealand papers are now being co-authored by the therapist and the persons with whom they met in therapy. There has been a move away from the practice of writers discussing clinical examples as if their own perspective was the 'correct' one.

There has been a greater respect for the perspectives of family members in descriptions of the process of therapy ...

In relation to these issues, we would be interested to have readers' responses to the following questions:

- > *What guidelines would be appropriate for writers of case studies in describing the actions of people involved in therapy?*
- > *To what degree is it appropriate that people being described in case studies have their perspective represented?*
- > *To what degree is it appropriate that such persons participate in the writing up of the story of the therapy?*
- > *When the actions of other professional persons are described in the case study, to what extent should their permission be sought? Should their perspective be represented? If so, in what way?*
- > *If papers are of a more personal nature, relating to the author's own experience of life, what guidelines might be appropriate to observe when describing the actions of parents, family, and friendship networks?*

While we would write this invitation differently now, twenty-six years later, conversations about these issues are continuing and the invitation is still open.

Conferences

The early determination of the women in family therapy meetings to transform conferences continued to inspire and challenge us as we began to host narrative therapy and community work conferences.

Prior to the first of these events, we consulted widely in order to consider how we could take into account matters of culture, gender, class, sexual orientation, and other relations of power. While knowing that we would make many mistakes along the way, the following ideals were what we were aiming for:

- > to provide high quality presentations on the latest thinking and application of narrative ideas and to do so in ways that enable people of differing experience to be both engaged and challenged
- > to enable people of different cultures, countries, genders, ages, class backgrounds, physical abilities, and sexual identities to come together, enjoy each other's company, and have a sense that the conference program and processes include their perspectives, hopes, and ideas
- > to use the conference as a chance to acknowledge and come to terms with the history of the land on which it is held
- > to create an opportunity for participants to build a sense of connectedness and to contribute to the building of a community of ideas
- > to provide the opportunity and support necessary for individuals and groups who have never presented before at conferences (and indeed may never have told their stories in front of an audience) to present the stories of their lives and their particular knowledges and skills in keynote addresses
- > to create an atmosphere that is non-hierarchical, with no pronounced difference between presenters and participants
- > to provide a forum for conversations that are expanding the field (not confirming it or simply reiterating what is already known)
- > to de-centre the conference collective in both the lead-up and during the conference itself so that the focus remains on everyone's contributions to a community event. (White & Denborough, 2005b, p. 46–47).

The ripples from the Women's Liberation Movement and the feminist politicising of everyday life were key threads in the development of narrative practice.

The ripples continue.

Notes

- ¹ Looking back, these early women's liberation conversations were very Euro-centric. When talking about 'women's experiences' we were overwhelmingly referring only to white women.
- ² For more information, see White & Denborough (2005a).

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A letter from Singapore:

Elizabeth Quek



Elizabeth Quek

Dear Cheryl,

Thank you for writing this history of 'Feminist challenge and Women's Liberation'. It moved me in so many ways.

While my context here in Singapore is perhaps very different than your own, as I read about your journey and its connection with the broader social movement of Women's Liberation, I resonated with many of the experiences.

I particularly related to your story about women's access to contraception. I wonder how this social movement and questions and challenges like you describe have influenced my own access to doctor-prescribed contraceptives. I suspect the access I have now, with much less shame about 'my promiscuity' than was possible in the years you were describing, is linked to the legacy of Women's Liberation.

In Singapore, practices of circulating reports that record narratives of thin identity conclusions, and running case conferences from which families are excluded, are commonplace. My colleagues and I aim to use practices of transparency and collaboration, and create spaces that allow for lines of feedback, emphasising that people are experts of their own situations. We push for social reports to be co-written, and discussions with other professionals always occur with the family present, and that families have full access to their case files. At times, this threatens solidarity within the profession of 'experts'. As I read your story, I realised we are building upon a long legacy of prioritising solidarity with families over solidarity with our professions.

When I read the following quote from Kerrie James in 1984 (the year I was born), I was filled with a particular excitement and energy:

...my claim to my separateness does represent a challenge to men on a number of levels. I am challenging your power to define and circumscribe my experience, to provide words and to assume to know my meanings. I also challenge you to reflect on your power within patriarchy ... (p.248)

How profound it is for any group with less power to meet together as an act of claiming space, to reject definitions by people outside the group, and to define their own experiences! As I embark on community work projects, I will keep Kerrie's quote in my heart. It will act as a reminder that at times separate spaces will be necessary to create conversations that will not otherwise be possible.

Recently Cheryl, we have begun to invite family members and groups who have consulted our services to share their experiences with us (and with colleagues and social work students) as valuable educators. These spaces are becoming almost sacred to us. As we hear their stories, we are constantly moved and challenged by their contributions of knowledges and wisdoms.

Knowing that our efforts here in Singapore are somehow linked to what you describe as 'prioritising of the politics of representation', and the recognition of not only gender injustice but also the importance of racial and other social justices, gives me pride and also courage. We are somehow linked to a longer-term legacy.

These rich histories you describe push us forwards. They remind me of those whose shoulders we stand on. And they challenge me to carry the torch or to push the boundaries so that voices who have been marginalised can represent themselves and transform our practices in ways that are more respectful, and more just.

Elizabeth Quek

Elizabeth is a Community Social Worker who works in the Bukit Merah Community in Singapore. She loves collaborations to create spaces of empowerment and social action.



Women in family therapy meetings

A conversation with Judith Cross



Judith Cross



Cheryl: Can we start by remembering some of the gender issues that informed calling the first Women in Family Therapy meeting?

Judith: In the early 1980s, I came across the book, *Women of ideas and what men have done to them*, by Australian feminist, Dale Spender (1982). Her writings gave me a language through which to notice and understand the ways in which what women said in our family therapy profession would be given less attention in various forums than what men said. By 1983, I'd been involved in family therapy for about five years. It had been exciting seeing the South Australian Family Therapy Association formed and to be part of the inaugural committee to establish the *Australian Journal of Family Therapy* (later the *Australian and New Zealand Journal of Family Therapy*). But Dale Spender's book, and the tide of feminist writings and analysis happening at the time, led us to start more rigorously looking at how the meetings, committees, and structures of family therapy associations and journals of the time, were privileging men's voices.

So it was that I started to review and research the status of women in Australian family therapy (Cross, 1984). I examined the participation of female family therapists in publications, education, and status positions. I looked at who was publishing, who was the first author in the publications, whose voice was being made secondary or more silent, and so on. I was also interested in the gender split of who was presenting in conference forums and soon discovered that women were significantly under-represented in all these areas.

In relation to calling the first women's meeting, you were influential Cheryl! I remember having a conversation with you and you said, 'Well, why don't you convene a meeting?' You were incredibly encouraging. So I joined with Liz McKenzie and together we announced the first Women in Family Therapy Meeting.

Cheryl: It was good I remember.

Judith: Yeah it was good! I remember we had to financially underwrite it ourselves, and that this felt like a huge risk. We hired a hall, organised some catering for a two-day meeting, and some fantastic women from New South Wales, Victoria, and other states of Australia flew over for the event. I seem to recall it was a controversial idea to create a women's only space ...

Cheryl: It was controversial and bold at the time!

Judith: There were some men who were really encouraging of the idea, including Michael White, but there were also men who were really unhappy with the notion. I remember receiving a lot of telephone calls from men saying how much they disagreed with the idea and saying it shouldn't go ahead, that women and

men needed to join together to work on these issues. I guess they were not understanding that sometimes for one group that's subjugated in society they need to have spaces where they can meet and talk and theorise at the same time as everyone working together on other spaces. We were never saying that men didn't have a role to play in changing gender relations. In fact feminist women of the time were calling on men in our field to work with other men in relation to men's violence. But some men who telephoned me in the lead-up to that first meeting were adamant it shouldn't go ahead, that women meeting alone would somehow bring disaster. In fact, at least two men said they were going to attend the meeting no matter what! I remember one senior man standing in the back of the room demonstrating his displeasure with arms crossed for a certain part of the meeting.

Cheryl: Oh yes, and another very senior man walked down the aisle at one stage and then swept out again with one of the senior women on his arm!

Judith: There were complexities weren't there. This meeting was in 1983 and I'd had my spinal injury in 1981. In the middle of the meeting, one woman came up to me and said, 'I don't see what

all this is about, I don't hate men like you do. And I'm married and you're not'. I remember talking with you at the time because I was so hurt and felt so vulnerable. I'd only been in my wheelchair a couple of years and here was this person saying to me, 'If you hold a meeting about women's empowerment, you must hate men'. If you wanted to do an analysis of what was going on in women's lives and stand up against systemic discrimination, we would be ascribed as hating men!

I found it so strange. The field of family therapy was a new field. It wasn't like the medical profession with so many entrenched traditions. This was a field with a more radical view of the world and yet even in this context there was such a backlash. I was surprised this was also from other women.

Cheryl: We had to develop an analysis that could explain this conflict didn't we?

Judith: Yes I remember that someone from the group from New South Wales provided a really good analysis of different forms of feminism. This analysis was fantastic as it placed our different efforts and any conflicts into a broader context. We started to understand the different philosophies of feminist separatism, compared to those fighting for equality but not separatism, and so on. This analysis meant that we didn't have to turn on each other, we could instead talk about our differences.

Cheryl: From then on, these Women in Family Therapy meetings were held each year. They were instrumental in women stepping up to present their work. We used the women's meeting to practice before going on to share work in the larger conferences. I think they really did bring about changes in the field. What do you think?

Judith: Yes, I think they have been important, although to be frank, I still think women's voices are less heard in professional settings than those of men, but there are now many more women in major leadership positions. While we've still got a long way to go, my sense is that people now do notice issues of gender much more. Generally speaking, in our field, people are more aware of the ways in which relations of gender are operating upon them, and that was our main aim: to raise awareness and to provide a forum through which women could find their voices. I think we did that.

Cheryl: I think so too. In some ways, those days were scary and in other ways they were quite exhilarating.

Judith: They were! They really were.

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Phillipa Johnson



Dear Cheryl,

There are so many things to say in relation to this history offered. In particular, it has me wanting to honour those many women who met together to examine and contend with dominant ideas, deconstruct them, and carve out alternative paths. It is impossible to know how the cumulative actions of those women have shaped what is possible for me to think, feel, dream, and aspire to. It is impossible to know how those seeds have grown in my life and as such it is impossible to know how the seeds I consequently sow will grow in others' lives. This thinking has been a powerful antidote to the temptations of despair and overwhelm present in the long haul of responding to domestic violence, sexual assault, and men's violence in places where movement can be hard to see and the stakes are high. This thinking is in glaring contrast to the widespread practices of isolation, competition, and individualism present in many places.

As you describe, this is deeply personal and also deeply collective. These stories offer us alternative places to stand, places where we are joined with invisible friends of the past and future who have made it possible to stand where we do and who will stand in new places because we stand here. I appreciate that this is not a story of a few heroes out the front. To me, they are stories that call us to friendship, partnership, and rigorous dialogue. They are stories that offer us encouragement in our endeavours to find ways to respond to violence against women that identify and challenge outwardly neutral or benign institutions and organisations which enact structural, racial, class, and gender violences amongst others. I am inspired by these histories to continue meeting with others in grappling with intersectional feminisms. The consciousness conversations are continuing.

*With warmth,
Phillipa*

Gender partnerships and men responding to men's violence

Cheryl White

Throughout the 1980s, the feminist movement was also influencing men in our families, friendship networks, and in the broader professional field. Here in Adelaide, Rob Hall, Alan Jenkins, and Michael White, along with a range of other men, were in conversation around these issues and each took up the invitations and challenges from women to develop ways of working with men who have been violent to women (see Hall, 1994; Jenkins, 1990; White, 1992, 2014).

The 1980s were a time when our local community, as women and men, sought to develop new forms of gender partnership. Just as white women, such as me, cannot sustain an acute awareness of white privilege without continuing collaboration and feedback from people of colour and/or Aboriginal colleagues, I really think that men cannot sustain an acute gender awareness without continuing feedback and collaboration with women.

As gender partnerships grew, new forms of practice to respond to the issue of men's violence were generated. Locally, Dallas Colley and Alison Newton's work with women survivors of domestic violence¹, Maxine Joy's² work with survivors of childhood sexual abuse, and Amanda Kamsler's (1990) work with survivors of sexual violence were significant.



By 1990, these efforts culminated in the publishing of a collection of papers in relation to *Ideas for therapy with sexual abuse* (Durrant & White, 1990), and Alan Jenkin's highly influential book *Invitations to responsibility: the therapeutic engagement of men who are violent and abusive* (1990).

The ripples of these feminist histories and gender partnerships continue:

Feminism has been perhaps the most extraordinary social achievement of the last few decades, and I think its influence within family therapy has been enormous. I believe that it has contributed to a sea-change, many of the implications of which are still being worked out ... Feminism has changed, and is continuing to change, so much of what we think and what we do. (White, 2001, p. 133)

Notes

- ¹ This work was later described in Colley, Hall, and Newton (1998).
- ² This work was later described in Joy (1999).

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