

# Women's Narratives of Trauma: (Re)storying Uncertainty, Minimization and Self-Blame

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Résumé de l'article

Women's stories of trauma often reveal uncertainty, minimization, and self-blame. This paper explores community-based research findings on women's narratives illustrating powerful, yet uncertain, stories of chronic, multiple, and severe trauma. This paper argues that 1) research needs to recognize that posttraumatic responses often involve uncertainty and ambivalence about telling stories of trauma; 2) uncertainty is not just a product of trauma but also reflects the influence of the dominant discourse on women and trauma that creates fragmented memory of the events and supports blaming women for the violence and minimizing the seriousness of the violence; 3) uncertainty reveals the dangers of speaking and often a struggle with speaking and hiding simultaneously; and 4) research questions can be designed to counterintuitive dominant discourse which will bring forward the prevalence and nature of the violence.

## **Women's Narratives of Trauma: (Re)storying Uncertainty, Minimization and Self-Blame<sup>1</sup>**

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Women's stories of trauma often reveal uncertainty, minimization, and self-blame. This paper explores community-based research findings on women's narratives illustrating powerful, yet uncertain, stories of chronic, multiple, and severe trauma. This paper argues that 1) research needs to recognize that posttraumatic responses often involve uncertainty and ambivalence about telling stories of trauma; 2) uncertainty is not just a product of trauma but also reflects the influence of the dominant discourse on women and trauma that creates fragmented memory of the events and supports blaming women for the violence and minimizing the seriousness of the violence; 3) uncertainty reveals the dangers of speaking and often a struggle with speaking and hiding simultaneously; and 4) research questions can be designed to counterview dominant discourse which will bring forward the prevalence and nature of the violence.

Despite powerful stories of chronic, multiple, and severe trauma, women's narratives of trauma reveal uncertainty, minimization, and self-blame in this community-based research. This paper explores how uncertainty is reflected in women's struggle with interpreting and talking about their trauma experiences. Uncertainty functions as a constraint against and regulation of speaking about violence, suggesting that speaking challenges ongoing cultural supports for violence against

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women. Further, uncertainty reflects the dominant discourse on women and trauma that supports blaming women for the violence and minimizing the seriousness of the abuse. Uncertainty reveals the dangers of speaking and women's struggle with speaking and hiding simultaneously. I argue that the gendered and discursive context of violence and trauma creates the uncertainty, minimization, and self-blame which are dominant themes within women's stories. This context makes it difficult not only for women to speak about trauma, but often for people to hear these stories.

This research emphasizes an ethical obligation to ensure that uncertainty is not recorded as an absence of trauma. Trauma histories are vastly underreported in research results, with significant unacknowledged implications for research findings and outcomes. Moreover, there is an ethical responsibility to not reify self-blame in the interview process. Researcher questions which explore self-blame can begin to create a scaffold for unpacking self-blame rather than leaving it intact. Narrative-based research or inquiry needs to acknowledge the social organization of uncertainty and to move beyond surface accounts of trauma. Instead, I suggest that narrative research on trauma experiences needs to move toward richer, thicker descriptions which avoid further embedding women's minimization and self-blame.

Emancipatory research can develop purposeful counterviewing interview questions (Madigan, 2003) which explore the dominant discourse that pathologizes women, as well as potential preferred stories of research participants. By disrupting the dominant discourse, counterviewing questions can also illuminate the prevalence and nature of violence against women in patriarchal society and emphasize men's responsibility for this violence. Counterviewing is particularly important when researchers acknowledge the constraints women face in telling their stories in the context of dominant discourse and audiences that support this discourse. As I explore women's stories of violence, I am conscious of the dangers in speaking and the "absent but implicit" (White, 2000, 2003), or those disqualified parts of stories that lie beyond the dominant stories of self.

Drawing on Michael White's work (1991, 1995, 1997, 2001, 2007), this research attempts to bring the epistemological principles and practices of narrative therapy to the broader field of narrative approaches and methodologies. Specifically, this involves the development of externalizing questions (White, 1991) which locate problems outside individuals and which allows the counterviewing (Madigan, 2003) of dominant oppressive stories in narrative research inquiry. In this narrative

inquiry, I became aware of how easy it is to render invisible the significance of this uncertainty and even to report women's uncertainty as an absence of trauma. A counterviewing approach allowed me to "double listen" (White, 2002) or "listen beyond the words" (DeVault, 1990), to the uncertainty in women's narratives of trauma. Rather than discounting women's stories because women are uncertain, I unpacked and politicized women's uncertainty within this study.

I begin this paper by exploring the relationship between dominant discourse, self-surveillance, and women's trauma stories. This is followed by establishing the epistemological premise that experience, and accounts of experience, are socially constructed and as such are the beginning rather than end points of social inquiry within this research. Next, a feminist postmodern narrative approach to methodology and data collection is outlined. The findings will demonstrate the uncertainty in women's trauma stories. Women's stories suggested posttraumatic coping through struggles with fragmented memory, minimization of the trauma, and self-blame for violence and abuse (Herman, 1992). The central themes of uncertainty, self-blame, and minimization in women's trauma stories are explored in the context of the dominant discourse of violence against women which shape and constrain them. I argue that this discursive social context makes it difficult for women to speak about trauma and often for people to hear these stories. I explore how uncertainty exposes women's vulnerability in speaking, while hinting at both conformity and resistance to dominant discourse.

### **Dominant Discourse, Self-Surveillance, and Trauma Narratives**

Dominant discourse on violence against women often blames women and minimizes its traumatizing effects. McKenzie-Mohr and LaFrance (2011) report that research shows that half of women who meet the legal definition of rape do not describe it as such. These "unacknowledged" rape victims become invisible in reports of violence against women. Hegemonic cultural discourse holds women responsible for sexual violence and minimizes sexual violence as "just sex" (Gavey, 2005). It is suggested that because dominant rape scripts are prescriptive, many women's experiences do not fit their parameters. Subsequently, women's rape experiences are minimized by being viewed as "just sex." In her book, *Just sex? The cultural scaffolding of rape*, Gavey (2005) illustrates the patriarchal cultural context of dominant discourse which perceives rape as "just sex," and reifies violence as ordinary. This not

only minimizes rape—it results in the disqualification or suppression of experience. Further, as McKenzie-Mohr and LaFrance argue, women try to find a way to make sense of their experiences within dominant social narratives which provide inadequate accounts of their experiences and tend to reify oppressive dominant discourse, including the blaming of women for rape. As women rely on the dominant discourses available to them, they often tell unhelpful stories about their lives (Brown, 2007a, 2007c, 2007d).

I suggest that Madigan's (2007) therapeutic emphasis on the importance of counterviewing the internalized-problem conversations about oneself can be extended to researchers who seek to explore beyond thin story descriptions. This is critical, as

conversations involve injurious speech acts that reproduce horrible, paralyzing, and long-lasting negative effects on how individuals view themselves (Butler, 1997). Left unchecked, the problem conversations gain support through the many ways that dominant culture supports the noncontextual/nondiscursive views the psychological project has regarding problems. (p. 137)

Arguably, the dominant discourse can be described as injurious speech (Butler, 1997; Madigan, 2003), which creates uncertainty in women's accounts of their trauma. The incongruence of the dominant discourse with women's actual experience of violence ultimately fails women (McKenzie-Mohr & LaFrance, 2011). McKenzie-Mohr and LaFrance's (2011) research on living well after rape and recovering from depression, respectively, describes the "*linguistic incongruence*" [emphasis added] women reveal in their efforts to story their experiences. They argue:

Researchers attempting to investigate facets of women's lives must be attuned, then, to the ways in which women narrate their lives, the ways they "translate", say "things that are not quite right" and use "the language in non-standard ways" (DeVault, 1990: 97). In listening beyond the words, researchers can challenge the dominant discourse and work toward the development of alternative and more helpful narratives. (p.52)

Butler (1997) describes how the *injurious speech* of dominant social discourse—for instance, in this case, "you caused the violence" or

“it wasn’t as bad as you say it was”—can also make one *linguistically vulnerable* as it shapes what can be said by and to whom. The dominant discourse of violence against women is injurious not only in terms of its truth claims, but in constraining what can be said by women themselves. Women police themselves according to this dominant discourse. Telling others about oneself is no easy task (Bruner, 2002), and that may be particularly so for women talking about trauma experiences. Mead (1977) refers to the notion of the “looking glass self,” in which people see themselves through the eyes of others. There is always an audience; even when alone, people watch the other watch (Goffman, 1959; Madigan, 2007). People anticipate being seen or judged by others and shape themselves accordingly. People turn their gaze upon themselves to gain control over how they are seen, valued, and treated (Berger, 1972). Tensions between who one perceives oneself to be, who one would like to be, and who one is expected to be are often evident (Brown, 2007c; 2007d). Trauma stories are likely to be edited or censored through this self-surveillance. Dominant social stories about gender and abuse are likely part of this self-surveillance (Hare-Mustin, 1994). The discourses of personal failure or blame pivotal to identity construction in women’s narratives ensure ongoing monitoring of self (Brown, 2007d; Foucault, 1980; Madigan, 2007; Wade, 2007).

In the process of self-surveillance, where women watch themselves being watched, reporting trauma experiences involves acute awareness of the audience. According to Madigan (2007),

The other gives us meaning and a comprehension of ourselves so that we might possibly function in the social world. The knowledge that we have of ourselves appears in and through social practices, namely, interaction, practices, dialogue, and conversation with others’ responses. We are not passive; rather, we respond to these interactions and the discourses intent for power. What gets to be said about who we are and with what authority is in constant debate and carried throughout language traditions. (p. 146)

The influence of the dominant discourse can lead people and interviewers, specifically, to blame women, minimize the seriousness of the violence, and be sceptical of women’s accounts of violence. Researchers should, therefore, begin to anticipate how dominant

discourse produces injurious speech and linguistic vulnerability (Butler, 1997), and subsequently, the impact it has on women's stories of trauma.

Despite substantial research and writing, there continues to be very little that focuses on women's own accounts of their experiences of trauma. At least in part, this may reflect both that women are not asked about their experiences and the difficulty women may have in telling their stories. As has been shown by the work of MacMartin (1999) on the discourse of disclosure among children, disclosure of abuse involves not only the teller, but the listener. The disclosure story that takes shape reflects the social interaction of that conversation. Early feminist work on trauma highlighted the "conspiracy of silence" around incest and sexual violence (see Butler, 1978). Despite its prevalence, feminist analysis identifies many reasons that women do not report or disclose experiences of violence. These include not recognizing rape as sexual assault; feeling responsible in some way for violence against them; fearing they will be shamed, ridiculed, not believed, or rejected; fearing retribution or further violence; and having a lack of faith in the criminal justice system including concerns about racist and sexist responses (CRIA, 2002). According to Herman (1992), individuals often blame themselves for violence and abuse, believing they have an inner badness and that they are responsible for abusers' behaviour. Rather than an individual deficit approach to how women experience trauma, this research stresses that these experiences and women's accounts are influenced by the dominant discourse, which not only makes it difficult for women to speak about trauma, but shape the talk itself.

### **Writing in the Social: A Narrative Approach to Storying Experience**

In this research, both women's experiences and stories about experiences are seen as socially constructed, and thus, rather than being taken up as is, they need to be unpacked. In the words of Scott (1992), experience is "at once already an interpretation and in need of interpretation" (p. 38). While experiences are important as the juncture in which lived events and the corresponding meaning made of those events are joined, they are not inherently "true" or "valid." Women's accounts of their trauma are a critical beginning point of inquiry, requiring deconstruction and reflexive analysis. This necessarily situates both the research participants and researchers as active rather than passive actors in narrative research conversations (Butler, 1993; Ussher, 2011).

While narratives are socially constructed, women are agents in their own stories (Berger & Luckmann, 1966; Brown, 2007a; Gergen, 1985). No single story can encompass the richness of experience and much goes untold. Women's stories reveal gaps and contradictions in a selective process about what information to include. This approach to stories reflects a non-essentialist, social constructionist epistemology which reflexively deconstructs experience rather than treating it as "truth" (Brown, 2007a, 2012).

Women do not make up stories or interpret experiences outside the social worlds in which they live. They construct stories through culturally available discourses and meaning, and thus draw on existing stories. By talking about themselves, the women insert themselves into discourse (Foucault, 1980). There is, therefore, no single author or voice as all stories are embedded in social interaction, culture, and history: there are always multiple voices at work. From this view, all women in this research are seen to have partial knowledge (Haraway, 1988).

Not only are all women's stories co-authored, no story is outside power (Foucault, 1980; White, 1994). There is also no objective telling of "a world out there." There is no neutral telling of stories, no neutral hearing of stories. Stories are always interpretive, always partial and situated (Haraway, 1988). Ultimately, stories convey specific meaning and interpretation, revealing what has become subjectively meaningful. At the same time, although not typically the intent of the story teller, the social context and meaning of the story are also revealed. In other words, women's stories are never just subjective; they are always at once social (Smith, 1999).

According to White (1995, 2001), stories need to be told, deconstructed, reconstructed—not simply heard—in order to avoid reifying existing unhelpful or oppressive stories. He maintains that as narratives typically reflect both dominant and subjugated knowledge, it is critical that narratives be unpacked. Rather than participating in reifying stories, research is arguably strengthened by exploring dominant and subjugated knowledge in the narrative process of inquiry. This then involves examining how women's stories may both reify and challenge dominant discourse. Researchers can then critically explore how these stories are constructed from available discourses, including, for instance, gender, trauma, and the self. Through externalizing conversations, the dominant social discourse and the dominant stories it produces can be unpacked, allowing alternative stories and possibilities to emerge. Counterviewing questions facilitate the unpacking of internalized cultural



conversations where people “measure ourselves against the external world” (Madigan, 2003. p. 43). Previously, disqualified stories rendered invisible—the absent but implicit—may then have a greater opportunity to become known.

This research is influenced by contemporary postmodern feminist and narrative theory (Bordo, 1990, 1993; Brown 2003, 2007c, 2011; Brown & Augusta-Scott, 2007; Butler, 1990a, 1990b, 1992; Butler & Scott, 1992; Foucault, 1980; Haraway, 1988, 1990; Nicholson, 1990; Scott, 1988, 1992; White, 2007). Although I use the language of “trauma” and “posttrauma,” I am not endorsing a deficit or disease-based paradigm of women’s responses to violence. Further, I do not wish to depoliticize violence against women through use of this language. On the contrary, from my view, violence is social, political, and oppressive. From this view, posttrauma is a legitimate response to trauma and violence.

### **Research Methods**

Qualitative research methods are emphasized as they are consistent with the postmodern epistemological lens through which this study will be conducted. Qualitative methods are invaluable to feminist research as they position women's stories at the center of the inquiry, allowing for rich examination of these stories within their larger gendered social context (Reinharz, 1992; Stoppard, 2000). Stoppard argues that such approaches permit us to see the "discursive conditions shaping women's experiences within specific socio-cultural contexts" (p. 37). From this perspective, I emphasize how stories of experience are socially organized (Smith, 1999).

Interviews and a focus group established the rapport needed between the researcher and the participant for women to share their stories (Finch, 1984; Oakley, 1981). The individual, semi-structured interviews allowed women to raise issues that they may not have been comfortable discussing in a group. In-depth, semi-structured interviews allowed for a life story approach, which provided a narrative structure across time. Participants were asked about the time sequence or history of events related to their understanding of their experiences of alcohol use and trauma and what these events had meant to them over time (see White, 2007). A focus group generated additional information beyond the individual interviews. The group interview structure provided an interactive approach, yielding rich data and discussion stimulated by

varying positions and opinions as well as shared experience (Morgan, 1998).

Madigan's (2003) approach to counterviewing "conversational habits of internalized self-surveillance audience" (p. 48) is useful here. According to Madigan, "the interview acts with purpose and direction" (p. 47). This means the narrative researcher is positioned to develop questions which can deconstruct and explore dominant pathologizing problem stories and identities, as well as explore the research participants' preferred stories. Drawing on the postmodern narrative work of White (2001) and Brown & Augusta-Scott (2007), I employ a constructionist understanding of how experiences are organized and storied. Research findings will highlight the themes of self-blame, minimization of trauma experiences, and uncertainty about trauma which is then followed by a discussion which situates these themes within a social context in which violence against women is blamed on women and minimized. It is argued that it makes sense that women will frame their stories within the language available to them, and the uncertainty itself may be seen as a way in which women are not able to easily place their account into dominant discourse.

This inquiry is part of a larger, community-based, multiple-method research study funded by the Nova Scotia Health Research Foundation on adult Nova Scotian women with co-existing experiences of depression and alcohol-use problems. Sixty adult women (aged 18 years or older) seeking treatment for alcohol use problems were recruited through Addiction Prevention and Treatment Services (Capital District Health Authority) women's programs in Halifax, Nova Scotia (i.e., Matrix, Core, Counseling, and Community Support Services). All 60 women screened revealed a dual problem with depression and alcohol use. Following this screening, 20 women agreed to participate in semi-structured, in-depth interviews, and, subsequently 6 of these agreed to participate in a follow-up focus group. The interviews and focus group were audiotaped and transcribed. Women's names have been changed to pseudonyms of their choosing. This paper analyzes the stories of trauma emerging from community-based narrative research on these women in treatment for alcohol-use problems. Among these 20 women, 18 described experiences of some form of childhood or adulthood abuse. This paper focuses specifically on women's trauma stories in this research.

### **Data Analysis**

Thematic analysis is a flexible method that involves identifying, analyzing, and reporting patterns within data and can be used with a variety of epistemologies (Braun & Clarke, 2006). In this research, data analysis begins with thematic analysis of the content of women's narratives, and moves to discourse analysis, which allows for the exploration of the meaning of narratives contextualized within the broader social discourse on gender, trauma, and coping (McMullen, 2011; Wells, 2011; White, 2007). From a constructionist perspective, thematic analysis sets out to understand the socio-cultural contexts and conditions within which research participants' accounts are embedded. In order to manage data, transcripts were first coded thematically (Braun & Clarke, 2006). The qualitative analysis software package Atlas-ti helped to organize the large amount of data expected and to assist in managing and analyzing the data through an initial identification of reoccurring themes within women's narratives (Muhr, 2004). I began by identifying common themes, followed by coding for connections between themes and patterns of meaning across the data set, as researchers moved to identifying the story lines of women's accounts. I noted gaps, contradictions, and notable omissions within stories (White & Epston, 1990).

In-depth, semi-structured interviews allowed for a life story approach which provided a narrative structure across time. Following White's (2007) narrative structure, participants were asked about the time sequence or history of events in their lives (thematic content) and what these events had meant to them over time (discursive). Moving beyond a content analysis, a latent thematic analysis is interpretive, concerned with thick description that moves past the surface story to the rich meaning that holds a story together (Braun & Clarke, 2006). While women's stories are centered in the data collection, discursive data analysis involves a researcher's interpretation of these stories. Data analysis in this research moves beyond providing a summary or descriptive content analysis of women's narratives. By moving to a discursive analysis (Brown, 2007a, 2007b; McMullen, 2011; Wells, 2011), experience was viewed as the beginning of social inquiry. Within this narrative strategy, discourse analysis emphasizes the dominant cultural trauma discourse which shapes women's stories (McMullen, 2011; Wells, 2011). This research explored what these narratives said, what they meant to women, how they were organized, what cultural practices and discourse were evident, why the story was constructed, and what it accomplished. Taken

together, these strategies allowed me to unpack, contextualize, and interpret the narratives produced in this study. By exploring narratives in this manner, I focused on how stories had been organized to give meaning, structure, and coherence to the events or experiences in the participants' lives (Wells, 2011; White & Epston, 1990).

This approach to data collection is highly congruent with the postmodern/narrative theoretical foundation of this study, whereby one explores the social construction of meaning through the stories told. Since stories only emerge within available social discourses (Brown & Augusta-Scott, 2007; Brown, 2007a; White, 2007), the data analysis attempted to situate women's stories about trauma within dominant social discourses and the context of their lives. By exploring the construction of trauma narratives, the extent to which dominant discourse was challenged or reinforced was investigated.

### **Research Findings**

Among the 20 women recruited for the in-depth interviews, 18 or 90% reported histories of trauma. Overall, 6 of the women or 30% were involved in sex trade work. All of the women involved with sex-work had a history of trauma. The average age of participants was 44.73 years (range 29 to 61). Most women were economically marginalized with 76.4.% earning no more than \$20,000 per year and 87.5% reporting they were unemployed. Over half of the women (55%) had not completed high school. Most women were Caucasian (83.5%), and 5.5% described themselves as First Nations, 5.5% African Canadian and 5.5% reported mixed heritage. Women seemed socially isolated, without strong family or friendship supports. Among the women, 66% lived alone and 50% reported no intimate relationships. Yet many were sole parents while struggling with alcohol use, depression, and histories of trauma and abuse: 60% had at least one child. In addition to alcohol-use problems, 45% had at least one other substance-use problem.

### **Narrative Interviews: Responses to Trauma and Violence**

Although the women reported multiple, severe, and chronic abuse in their lives, they were often ambivalent in telling their stories of abuse. Significant uncertainty, minimization, and self-blame were evident, especially in reporting sexual abuse. Findings suggest that the gendered context of violence and trauma creates the uncertainty, minimization, and

self-blame which are dominant themes within women's stories. Women in this study reported long-term histories of severe violence and abuse from childhood into adulthood.

The trauma stories women told in this research suggested posttraumatic coping through 1) struggles with fragmented memory; 2) minimization of the trauma; and 3) self-blame for violence and abuse. Taken together, these themes are central components of uncertainty in women's trauma stories. Uncertainty is itself a dominant theme in women's trauma talk in this research. Uncertainty refers to the struggles women have in interpreting and talking about their trauma experiences, specifically the caution, self-doubt, and lack of authority that prevail. Women's accounts of their experiences from interviews and a focus group are presented together below.

### **Uncertainty: Struggles with Fragmented Memory**

In this research women often demonstrated a fragmented memory in which they questioned their memories and their significance. Other research has also shown that people often have difficulty remembering early childhood abuse, particularly in the form of fully formulated stories (Herman, 1992). Instead, they often remember snapshot images, feelings, and physical sensations, including embodied sensations of panic, smells, taste, and pain.

In Maria's story, her "not remembering" (i.e., her fragmented memory) is highlighted. She seems to be very concerned about gaps in her memory. She hints that between the ages of 7 and 9 something may have "transpired" and connects this with a "terrible sense of sadness and grief" as well as "physical pain in my stomach." She describes always having a "constant feeling in the pit of my stomach," being "on edge all the time, "like being paralyzed with fear." She suggests she had no idea of what was causing these feelings of anxiety and fear, but it seems she has suspicions. She is clear, though, that her OCD and drinking helped to numb these difficult feelings. The state of "hyperarousal" described by Herman (1992) as a state of constant watchfulness may well be at play in her childhood experience. Her adult experience seems to include anxiety and sadness, which she self-medicates:

*The difficult part of my childhood is I don't remember. I don't think there was, but I can't tell you 100% and I don't know if the big gaps that I have are just because I was a child, or if there was a*

reason for them. ...Oh, why can't I remember that, but I just can't it is just not there. ...That would be, I don't know somewhere between the age of 7 and 9 and I don't know what transpired before that except that I had a terrible sense of sadness and grief and I felt it as a physical pain in my stomach. ...I just said to myself well I am not going to feel that ever again. I made absolutely sure that I didn't. So I think what really happens is when I start feeling things that reminds me of that...that is either the time that I do my other behavior [OCD] to get myself out of it or start drinking or whatever. ...I had this constant feeling in the pit of my stomach...it was like I was on edge all the time. ...It is almost like being paralyzed with fear. ...And I didn't really have any idea of what was causing it, it just seemed to be there all the time. ...So there have been episodes that I've had where I talked to my counselor about things and the next time we talked I couldn't ever remember what we talked about. So it is almost like I am there in body, but I am just gone somewhere else.

Similarly, another woman also struggles with her memory of abuse in childhood. Memory in story form relies on some integration of feelings/cognition which are shaped by existing cultural meaning that can allow for an account of an event. When childhood events occur and children are not yet capable of forming an organized account or memory shaped by culturally available discourse, they may only be able to refer to the feelings or sense of trauma. Martha, like Maria, has no complete narrative of trauma, but has feelings. Martha begins by saying she does not think there was childhood violence and ends by saying she has feelings like she has been abused:

I don't (pause) think so. Ah, I am not really sure. I have the feelings like I have been sexually abused, but there is no mental picture to go with it.

In another instance, Trina is uncertain about a history of sexual abuse. She, too, is suspicious that there is sexual abuse in her history and describes specific experiences of hide and seek with an adult who *made* "her hide in the bedroom behind the bed." She has a "feeling like he had touched" her. She has these strong feelings as though abuse had occurred and yet is only able to conclude "I don't know":

I am very curious about that [sexual abuse] because at the time when my parents...had company over...my stepsisters came with their husbands. One of them brought a friend over and he played hide and seek in the house. ...I still get knots in my stomach when I think about it because he used to make me hide in the bedroom behind the bed...and I am curious like I have a feeling like he had touched me, or he was going to touch me. But it's like part of it was blocked out and I don't know.

Like with Trina, as the interview with Maria unfolds, there is a sense of her struggling with uncertainty:

*Interviewer:* Do you want me to be a little more specific- childhood physical abuse?

*Maria:* Yeah.

*Interviewer:* And you also said you couldn't remember before the age of 14.

*Maria:* I can remember a couple of things, like maybe an argument in the house, or something. Or sadness, some types of sadness but only a few things.

*Interviewer:* Childhood sexual abuse?

*Maria:* Yes.

*Interviewer:* Emotional abuse in childhood?

*Maria:* *I am not sure now if it was all just in my head.*

As the interview continues, Maria shifts from “not being sure” to “I know it must be there”:

*But I know it must be there* because when my husband tries to touch me I freeze. But when I was drinking I was alright. ...Yeah, so when my husband wanted to touch me I would say okay, let's get some drinking and it was okay at first and then it started to get worse and I would drink more. ...Although sometimes...that makes me angry because I don't have any sexual feelings.

If the interviewer did not proceed to inquire whether there was child sexual abuse Maria may have held to the account she remembers: a family climate of argument and sadness. With this shift away from arguments and sadness, abuse can now be explored further. It is clear in these instances how the telling of stories is fluid. The researcher, like the

therapist, is cued to pay greater attention when disjunctures, gaps, and contradictions are presented.

In the following interview excerpt, there is a conflation of fragmented memory, uncertainty, and minimization:

*Nancy: I only remember from 13 and up. I have no memory from 13 down. And the memories I do have! From 13 and up at home is a lot of yelling and screaming. So that is why everything scares me. I had everything I wanted at home and that I wasn't abused, or nothing like that. Just physically abused. But I guess verbal.*

*Interviewer: Okay so in childhood verbal abuse?*

*Nancy: Yup. I mean there was a couple of things that I remember about that. Ah, with physical abuse there is a couple of things.*

*Interviewer: What about sexual abuse?*

*Nancy: No. (sigh)*

By highlighting her fragmented memory, Nancy draws our attention to it in this excerpt. In doing so, she also establishes the position that there is not much point in exploring her home life. This itself may serve to protect her from talking about it. The lack of memory creates a barrier to exploring the possibility of abuse. She remembers “yelling and screaming,” that “everything scares” her. She asserts that she “had everything she wanted at home and wasn't abused” which also potentially blocks conversation which might explore abuse. Further, this statement shuts down exploring an alternative account. It sounds like this is a dominant story for her and maybe her family.

Then, in the focus group, where other women are talking about abuse, Nancy moves from minimizing abuse to being more open and curious about it, admitting she would like to be hypnotized to remember:

My mom was with an abusive man when I was young and so that's when I was thinking the fear of wondering did someone do something to me when I was younger...and um, I am afraid of the dark. ...I don't like thunder and lightning, so there must be a reason why I am scared of the dark...did somebody put me in the closet, or you know. ...And I am very claustrophobic. ...I always wanted to get hypnotized like, to find out 'cause that's my fear, right. Wondering if someone did something to me. ...I can only remember from 13 up...but I remember at one time when I was younger, I don't know why but I wanted to kill myself.



...Obviously I don't think I was trying to take my life, but I was doing something, right. But I remember my parents put me in the adolescent unit over in Dartmouth because they didn't know how to handle me.

Nancy's fear resonates strongly in this account. I, too, want to know about her fear of the dark. Like Nancy, I am curious whether someone put her in the closet, and why. It is possible it was safer for her to make this a question, rather than a statement. This may be a partial telling of a story that could have been explored further. The research interviewer was treading a careful line to not push too hard, but it is clear that there is a lot more to this story. She remembers wanting to kill herself and both minimizes this by saying "obviously I don't think I was trying to take my life..." and then proceeding to say that she was trying to communicate something: "I was doing something, right."

These kinds of narratives are full of gaps and contradictions, on the one hand inviting the researchers to accept their stance of uncertainty, minimization, and blame, and on the other hand inviting the exploration of the gaps and contradictions. This woman lived in an economically privileged home that appeared to the outside world as quite ideal. Her story, however, seems to suggest that she was living in a home that was quite the opposite. She reports living with an abusive stepfather, a scary environment, and that she may have been locked in a closet either as abusive punishment and/or as part of secretive sexual abuse. She reports she was physically and emotionally abused and was suicidal at one point. She reports in the focus group that she was very angry and that her parents "did not know how to handle her," so they "put me in the adolescent unit." At the very least, her story suggests she was very angry about physical and emotional abuse and that she subsequently made suicide attempts. Instead of talking about it or having the abuse addressed, she was institutionalized. *She* was the problem.

In their focus on the potential influence of the dominant discourse and the social construction of stories, narrative researchers are well positioned to notice within Nancy's account entry points for further conversation with a specific focus on unpacking ways that her disqualifying discursive strategies may minimize and dismiss alternative potentially helpful interpretations.

### Uncertainty and Minimization

The research with women also revealed accounts of the violence that minimized the seriousness of the abuse. McKenzie-Mohr and LaFrance (2011) report that research shows that half of women who meet the legal definition of rape do not describe it as such. These “unacknowledged” rape victims become invisible in reports of violence against women. It is suggested that because dominant rape scripts are prescriptive, many women’s experiences do not fit their parameters. Subsequently, women’s rape experiences are viewed as “just sex.” In her book, *Just Sex? The Cultural Scaffolding of Rape*, Gavey (2005) illustrates the patriarchal cultural context in which rape can be perceived as “just sex,” and in which violence is reified as ordinary. This not only minimizes rape; it results in the disqualification or suppression of experience. Further, as McKenzie-Mohr and LaFrance argue, women try to find a way to make sense of their experiences within dominant social narratives, which provide inadequate accounts of their experiences and tend to reify oppressive dominant discourse, including the blaming of women for rape. As women rely on the dominant discourses available to them, they often tell unhelpful stories about their lives (Brown, 2007a, 2007c). In addition to the constraints of discourse, one way of coping with violence and abuse is to minimize its harmful impact.

In describing a date rape situation, Trina convinces herself to “forget about it,” to “act like it never happened.” When women go to a bar and bring a man back with them, they question how seriously they will be taken, minimizing the events and often blaming themselves. Trina states:

And me and my friend went out to a bar and we met these guys and we went to her place to have a few drinks after that. And the guy she was with he left and the other guy that I was with he stayed and we were chatting me and her and him. ... She went to bed and then he tried to force me—just right on to me. I felt dirty. I felt rotten. ... Then she come out to the room and asked what happened and what was all the noise after he left. ... And she wanted to get the police after him and I said leave it be and let’s forget about it. Let’s act like it never happened, you know.

Trina minimizes another situation which involved a husband who was abusive to both her and her children by qualifying the abuse as “not bad.”

Discursive devices of minimization are evident in the women's stories; abuse that is "not bad" echoes the interpretation of rape as "just sex":

My husband he was abusive at times, not bad, but he was abusive to me and my two kids. And then he would say he was sorry he went too far it wouldn't happen again.

Demi begins to suggest that she has never experienced any sort of childhood sexual abuse when she catches herself, remembering adult men exposing themselves to her when she was six. While she seems to have come to agree with her daughter's view that these incidents were inappropriate, the abuse is minimized by adopting a casual tone which refers to "older men around the neighborhood" and "we'd have a cigarette," suggesting these were ordinary everyday events in the neighborhood:

No. Just like actually I should not say no because it was not like anybody touched me, but there was older men around the neighborhood that used to take their thing out. You know what I mean? And give you a cigarette if you'd look at it. I mean we'd have a cigarette at six years old. ...So like that's abuse. That's what my daughter said. Incidents and talking dirty to you I mean you're a little kid.

### **Uncertainty and Self-Blame**

Women in this research consistently revealed that they blamed themselves for the violence they experienced. Children, youth, and adult women dealing with violence and abuse often see themselves as causing or contributing to the abuse. In the case of children, it is often self-protective to see themselves as the cause of abuse, as it allows them to preserve a sense of positive attachment to their caretakers; it is they who are the problem (Herman, 1992). Self-blame also allows the person being abused to believe she has some control over the situation, or agency, while feeling frighteningly out of control. Butler (1993) reminds us that choice and agency are always shaped and constrained by culture. This is evident in Heidi's description:

If I didn't do what he said then he would beat me. And if I did do what he said I would still get a beating. So either way, there was

no way—so I was trapped. And in my mind I thought it was my own fault. I was the one doing something wrong.

Denise describes an approach to abuse that appears compliant while she simultaneously holds onto her own sense of power, control, and agency. She stops the abuse by not “talking back.” Denise sees herself taking back some control, but does not seem to see the self-blame involved. If she is going to stay in this relationship and not get beaten, she concludes, she cannot express herself. On the surface it appears as though she accepts self-blame as a trade-off to ensure “everything would be okay.” This is a good example of what is described by McKenzie-Mohr and Lafrance (2011) as the dilemma women face within the dominant patriarchal cultural context of meaning and master narratives regarding violence. Women struggle with rejecting blame and also being empowered and active agents in their own lives. McKenzie-Mohr and Lafrance note that many women in their research adopt the stance, “I don’t feel responsible, but I don’t feel helpless either” (p. 63). This involves “complex identity positioning” where one is both an agent and a victim.

Gendered relationship expectations and performance are arguably at play here as women struggle with both having agency and having it constrained. Dominant social narratives reflect the notion of the “Hollywood rape,” involving brutal violent rape by a stranger (McKenzie-Mohr & Lafrance, 2011). This tends to obscure and minimize other experiences of rape. While being an agent and a victim is typically constructed as a binary, the both/and position women often struggle with is a closer approximation of their experiences. According to Denise,

I try to talk them out. And if that don’t work then I find I always allow the guy to think he’s won. But in my mind I know that that’s not the way it should be. So I will bow down to you and allow you to believe that your way of thinking is the right way. ...And I found that is how the abuse stopped—because I realized I am not leaving this guy—so by talking back it is making him beat me. So if I don’t talk back and allow him to think that he’s right then, everything would be okay.

In the following interview excerpt, Jo is able to minimize her traumatic experience of being moved around in foster homes by blaming herself. This little four-year-old girl had been put up for adoption by her

parents, who did not want her. Then she was bounced around from foster home to foster home, where to her it appeared as if no one else wanted her either. While she was no doubt scared, feeling unloved, grieving, and angry, she says she must have done something wrong: "I must have been a big bully or something." What she does not acknowledge—until asked—is that she was only four years old:

*Jo:* And I was adopted through what do you call it through Children's Aid. They just had all these chairs around and the people were supposed to keep me for a week, but didn't. And they brought me back a couple of days later and they said I beat up their kids. I don't know! I must have been a big bully, or something. I don't know.

*Interviewer:* At age four?

*Jo:* At four.

Rather than allowing compassion for her four-year-old self, a mere baby, who is struggling with an undoubtedly scary, painful, and traumatic situation, Jo reframes her foster care experience through self-blame.

### Discussion

In this research, women's accounts of their trauma are characterized by uncertainty, which I argue represents internalized dominant discourse. The very idea that rape can be framed and minimized as "just sex" is one such example. Difficulties remembering details in stories, including fragmented memory or little beyond a sense or feeling that abuse had occurred, as well as minimization and self-blame often produced or reinforced uncertainty in women's trauma stories. Significant uncertainty was expressed, especially with regard to childhood trauma where memory was less clear. Minimization and self-blame were evident in childhood and adult stories of trauma.

The uncertainty observed in this study reinforces silence and invisibility and also involves resistance. Processes of minimization and self-blame allow women to maintain a sense of control over the situation. This helps them feel less out of control and anxious about the experience (Bass & Davis, 1988; Courtois, 1988; Herman, 1992). It also illuminates how difficult it can be to speak about violence within existing dominant frameworks and negative social responses (McKenzie-Mohr & LaFrance, 2011; Wade, 2007).

Even in a therapeutic context, it often takes considerable time and trust in order for women to feel safe enough to self-disclose. Trauma is hard for women to talk about and they often do not trust that they will be believed. This clearly has an impact on narrative research conversations on trauma with women. How researchers listen to women's stories of trauma is critical. The shape that disclosure takes will reflect the interaction between the person telling the story and those listening. It is clear that researchers can shut down or invite women to tell their trauma stories.

Women's doubtful hedging in the telling of their trauma stories reveals concern about how they will be seen. The gendered performance of self is apparent in this uncertainty, this lack of authority to speak of one's experiences. The "good girl" script calls for, among other things, normalization processes of self which rely on normalizing judgment of the culture. Self-surveillance demonstrates correct/incorrect attitudes toward demands of normalization itself as women watch themselves being watched. This script often calls for a withholding, a toning down, a tucking in of expression: not being too knowing, assertive, or certain in speech. This can be seen in the cultural speech practice, especially among young women, of turning statements into questions. Uncertainty functions as a constraint against and regulation of speaking about violence which suggests that speaking challenges ongoing cultural supports for violence against women.

Postmodernism embraces uncertainty and contradiction for the social complexities that they can reveal (Brown, 2012). While uncertainty may imply flexibility or a lack of orthodoxy, allowing for alternative interpretations and possibilities, it may also operate as a *mechanism of power* (Foucault, 1980). Drawing on Foucault, it is likely that uncertainty reflects women's efforts to make sense of their experiences through a lens of "normalizing judgment" in which they adjudicate their own and others' thoughts and actions against social norms and expectations, including those of professional bodies and disciplines (i.e., medical, legal) "normalizing truths." White and Epston (1990) suggest that "we are subject to power through the normalizing 'truths' that shape our lives and relationships" (p. 19). As such, uncertainty may reflect a troubled intersection of conformity and resistance to the dominant discourse available to women in telling their trauma stories and the problematic normalizing truths which they support.

The telling of self-stories is flawed and cannot perfectly represent “what was.” The stories people disqualify are perhaps as important as those they tell. According to Foucault (1980),

Silence itself—the things one declines to say, or is forbidden to name, the discretion that is required between different speakers—is less the absolute limit of discourse, the other side from which it is separated by a strict boundary, than an element that functions alongside the things said, with them and in relation to them within over-all strategies. There is no binary division to be made between what one says and what one does not say; we must try to determine the different ways of not saying such things, how those who can and those who cannot speak of them are distributed, which types of discourses are authorized, or which form of discretion is required in either case. There is not one but many silences, and they are an integral part of the strategies that underlie and permeate discourses. (p. 27)

Uncertainty in trauma stories exemplifies Foucault’s observation. Silence is evident in uncertainty, yet uncertainty immediately reveals both speaking and declining to speak. The posture of discretion about speaking is not innocent, but shaped by how cultural discourses and meanings determine particular ramifications associated with telling stories of trauma. Self-blame and minimization in women’s accounts of violence and trauma marked with uncertainty and ambivalence need to be unpacked. Uncertainty can offer a powerful entry point to explore and re-story self-blame and minimization while acknowledging how they are often, in themselves, an effort at resistance.

Generally, uncertainty, minimization, and self-blame are likely to reflect what White (2001) calls subjugated or disqualified stories—the absent but implicit. These stories are likely to live outside the dominant stories a person is telling. The disqualified or subjugated stories are rich with alternative information and interpretation which have largely remained silent. While uncertainty is ripe with possibilities, and may offer the safety of appearing “neutral,” detached, or non-positioned, it is not innocent. It can enable movement, agency, resistance as well as an abundance of caution and self-protection. Although uncertainty may be self-protective, in this study co-existing themes of self-blame and the minimization of violence may also lock women into harmful identity conclusions that interfere with how they live their lives. Exploring

uncertainty suggests that there are dangers or high levels of anxiety associated with talking. This danger may shape the self-stories women tell themselves, as well as the researcher. Caution and self-surveillance may render invisible, or disqualify, other aspects of the story while also serving to self-protect.

The dominant discourse often obscures subjugated accounts that may lead the way to alternative or preferred stories. I have emphasized the notions of double listening (White, 2002) and “listening around and beyond the words” (DeVault, 1990, p.101), which moves stories beyond the known and familiar toward the absent but implicit. Listening beyond the words allows us to listen to the dominant story as well as other interpretations and experiences which live outside the dominant story. These “unique outcomes” are often an entry point for new preferred stories.

The dominant discourse often fails women when they attempt to tell their stories, as the constituting discourse and language is often inadequate. McKenzie-Mohr and Lafrance (2011) draw on DeVault’s (1999) notion of “linguistic incongruence.” They suggest that there is a linguistic incongruence in women’s attempt to negotiate agency and blame in ways that the dominant narratives are unable to do. McKenzie-Mohr and Lafrance (2011) refer to this as “*tightrope talk*” [emphasis added]:

Any attempts at “both/and” talk that include elements of dominant assumptions can be missed or mis-heard because of the power of the dominant narratives to overtake more subtle shadings of meaning. The speakers are faced with the formidable challenges of “tightrope talk” when they attempt to construct themselves as both agents and patients; responsible and not responsible. (pp. 64-65)

There are dangers associated with this “tightrope talk.” Fear of being seen as making too big a deal, complaining, causing other people trouble, reflect gendered scripts for performing the “good woman” which reward women for minimizing their experiences of conflict and not upsetting others. When explored, uncertainty may fade or slip away, allowing a more determined, entitled, and confident voice to emerge. If both the women telling trauma stories and those listening to trauma stories are uncertain and afraid, that which is silenced or disqualified in uncertainty is reinforced. In the end, it can result in “writing out” these



aspects of women's stories when they often need to be included as integral and meaningful. It is important to be aware of the negative effects of leaving uncertainty intact, especially as it offers valuable possibilities if explored. In this research cautious fledgling accounts were evident in uncertainty. These alternative or disqualified stories needed gentle encouragement. It was easy to see how quickly these disqualified stories could quickly retreat again to safety and invisibility. Similarly, McKenzie-Mohr and Lafrance (2011) argue that helpful counter-stories reside within the disqualified story.

Researchers can acknowledge women's strength, resilience, and creativity, as well as pain, in relationship to sexualized and physical violence. Women's resistance and victimization are often polarized. If researchers only emphasize resistance, they risk silencing suffering and pain. If researchers emphasize only the suffering and pain and ignore the resistance, they strip women of their power and agency. The both/and position of being an agent and a victim captures the complex identity position they experience, as they seek ways of being heard and storying their experiences. Yet subject positions of agent and victim may have come to represent binary oppositions and may even be maintained through a both/and approach if researchers assume these are the only two possibilities. Emphasizing multiple possibilities is less constricting and allows for a more complex telling and hearing of trauma stories. According to McKenzie-Mohr and Lafrance (2011), "rejecting blame and yet seeking agency is a dangerous undertaking for women who have been raped" (p. 63). Restorying allows for both agency and pain, strength and vulnerability counter-narratives. Unless women's stories are unpacked, the self-blame and helplessness within dominant or privileged narratives are simply reconstituted:

If we, as allies, miss the nuances and complexities of "both/and" positioning women are attempting to construct with available (albeit inadequate) language and narrative frameworks, we risk undermining their work toward claiming agency. And yet we also risk supporting self-blame if we leave these accounts unpacked. Such unpacking would work to question and reject any remnants of oppressive narratives that linger in merging alternative scripts. Thus, allies are also called to reflexively enter in to the "both/and" position—to enter into "tightrope talk." (pp. 65-66)

Narrative strategies are helpful in unpacking women's stories, moving toward more constructive counter-narratives that acknowledge lived experience as complex and multi-storied. This enables and encourages women's agency and stories of oppression and victimization (Draucker, 1998).

I have argued that counterviewing questions allow for the exploration of the absent but implicit or disqualified stories. Interviewing women about violence and trauma requires some awareness of the dangers for women associated with speaking of violence as well as the need to create space for women to be able to talk about trauma. When women say they are not sure if they were raped, or that the abuse was not very bad, these are entry points for asking further questions. There is more story there. When one hears uncertainty—sensing a woman is *both speaking and hiding*—it is important that the researcher explore the uncertainty by continuing to ask rather than shut down questions. Rather than view uncertainty as the end point of the conversation, it is a critical entry point to important information about people's experience, which also reveals the cultural and discursive shaping involved in telling one's experience. I argue that uncertainty should not be coded as a negative response or a “no,” but as uncertainty. Those same uncertain responses should be qualified by actual *interview* content. Researchers must be respectful of people's choice to not speak and maintain safe emotional boundaries and yet explore disqualified “*not spoken*” or “*partially spoken*” aspects of stories. Uncertainty may come from not working through experience; it may sometimes be a *partial disclosure*—partial talk or hinting—a way of *telling without telling*. It may also reflect at least a partial desire to explore trauma and talk about it. This research emphasizes the importance of not “writing out” women's trauma experiences within research because of the discursive power of uncertainty, minimization, and self-blame.

While therapists can revisit uncertainty in future conversations, most research does not lend itself to this option. Research-based conversations are not therapy, but like therapy, they explore socially constructed stories. Narrative conversations explore the meanings of people's stories. Practitioners of both narrative practices need to be aware of retraumatizing or revictimizing through narrative conversation. White's approach to experience and story adopted here challenges the essentialism and individualism that can occur when stories are decontextualized. As I have argued, neither the telling nor the listening to stories in research is neutral. Questions can simply reproduce dominant

discourse or adopt a counterviewing strategy to explore more broadly. The scaffolding of counterviewing questions may facilitate multiple and non-binary understandings of stories. There are arguably ethical questions around what it means to leave uncertainty, minimization, and self-blame intact in research and therapy.

### **Conclusion**

It has been argued that rather than be dismissed or rendered invisible, uncertainty should be acknowledged and unpacked within the gendered dominant discourse that leads women to uncertainty. Further, stories of uncertainty or ambivalence need to be seen as integral and meaningful aspects of the stories told. Rendering ambivalence stories as invisible simply serves to reify women's existing uncertainty. This paper has argued that: 1) researchers need to recognize that posttraumatic responses often involve uncertainty and ambivalence about telling stories of trauma; 2) uncertainty is not just a product of trauma but as much a reflection of the discursive cultural context of meaning in which women's experiences and stories of them emerge; 3) uncertainty reveals the dangers of speaking and often a struggle with simultaneous speaking and hiding; and 4) research questions can be designed to counterview dominant discourse (Brown, 2007c). This research emphasizes an ethical obligation to ensure that uncertainty is not recorded as an absence of trauma. Trauma histories are vastly underreported in research results with significant unacknowledged implications for research findings and outcomes. Moreover, there is an ethical responsibility not to reify self-blame in the interview process. Researcher questions which explore self-blame can begin to create a scaffold for unpacking self-blame rather than leaving it intact. A complex approach to stories of trauma experience should expect the contradiction and gaps, as seen here. Yet uncertain trauma stories are rich entry points for further inquiry, as opposed to a binary "yes/no" focus—the definite or absolute answer of empirical research. Recognizing uncertainty allows for the messiness of trauma stories. Overall, this research suggests that it must be ensured that emancipatory research strategies for data collection and analysis have not colluded with dominant cultural approaches to trauma that make speaking dangerous and that reify oppressive dominant stories.

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