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CONSCIOUSNESS, HEALING, AND WOMEN'S LITERACY PRACTICES:  
A FEMINIST CRITIQUE

by

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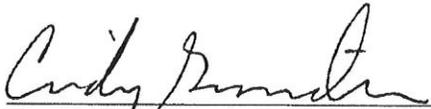
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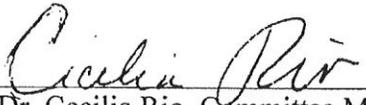
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## **ABSTRACT**

### **CONSCIOUSNESS, HEALING, AND WOMEN'S LITERACY PRACTICES: A FEMINIST CRITIQUE**

Krista L. Nickerson

This research surveys scholarly work on consciousness, healing, and women's literacy practices with the goal to characterize current arguments on women's healing and critique those claims from a feminist perspective. Scholars contend that literacy practices, or reading and writing, promote healing for women's traumatized consciousness by stimulating empathetic connection, opening space for dialogic interaction, and fostering personal agency. These changes occur across three "domains of consciousness": physiological, psychological, and socio-cultural. My critique, based on feminist analyses of gendered emotion, emotional labor, and discursive politics, reveals that arguments for the salutary effects of women's literacy practices fail to account for structural inequalities that affect women's consciousness in each domain. This deficit weakens research claims and limits practical approaches to women's healing. I suggest methodological and conceptual adjustments to improve the comprehensiveness and accuracy of research and the effectiveness of interventions for women in a Western patriarchal context.

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## CHAPTER 1

### INTRODUCTION

I developed this thesis project to explore my interest in the intersection between the cerebral world of words and the tangible world of bodies. From a young age, I tried to manipulate words to create a safe, stable (and admittedly idealized) sense of reality. I created elaborate fictions of myself based on the varied familial and cultural narratives that infiltrated my life. As I grew older, these fictions clashed sometimes painfully with my actual experience, and I began more often to put my thoughts in writing to locate a sense of direction and coherence and to comprehend sources of dissonance. Writing became integral to a continual process of discovering (and keeping up with) who I was in relation to the people, situations, and relationships that I encountered in lived interactions. Although I did not think in terms of identity at the time, my storied reality was linked to my multipart embodied identity as (most prominently) a White, middle-class, heterosexual, able-bodied woman and “military brat.” My graduate research in Women’s and Gender Studies provided me a language and foundation of knowledge to understand the influence of social and material identities on the narratives that defined my embodied experience.

My personal journey converged with my academic path when I developed a writing workshop for adjudicated adolescent girls as part of a field-based internship. With the goal to conceptualize a feminist healing process incorporating women’s autobiographical literacy practices, I explored scholarly interpretations of how interacting with written texts generates personal and social transformations. Across various disciplinary perspectives, arguments reiterated the interdependencies among bodies,

minds, and words. Authors proposed that words not only *mean* something different but also *feel* different depending on one's relationship to the stories that one constructs and believes about those words. Activities (such as reading and writing) that change one's relationship to words and meanings also change the ways that bodies respond to experience, producing concrete, lived outcomes.

Although these analyses offered multifaceted views of consciousness and healing, arguments related to *women's* healing lacked critical insights from feminist perspectives. Researchers consistently failed to include, or acknowledged only minimally, the impact of structural inequality based on gender, race, class, and other identity categories on the processes and outcomes that they examined. Feminist analyses shed light on these omissions and suggest conceptual and methodological adjustments to improve the comprehensiveness of research and, more importantly, the effectiveness of healing interventions for women in the patriarchal and misogynistic context of the United States.

### **Thesis**

A diverse cross-section of scholars, practitioners, and activists – including researchers of therapeutic expressive writing, scholars of women's autobiography, feminist activists promoting women's "voice," instructors of writing in college and community contexts, and trauma theorists in psychotherapy and literary criticism – argue that autobiographical literacy practices promote the healing of women's traumatized consciousness by (a) stimulating empathetic connection with the self and the world; (b) opening space for dialogic interaction and movement; (c) inspiring a sense of personal agency and capacity to change. The assorted literature on women's healing literacy practices employs various frameworks of analysis to capture the components of healing

identified above. Using an inductive approach detecting patterns across observations, I distinguish three “domains of consciousness” to which healing frameworks apply: physiological, psychological, and socio-cultural. In the physiological domain (drawing on neuroscience and traditional Western psychology), research on women’s therapeutic expressive writing describes healing in terms of neural and chemical changes comprising “emotional and cognitive processing” and “self-regulation” (e.g., Holmes, 2007; Laccetti, 2007; Lepore, Greenberg, Bruno, & Smyth, 2002). In the psychological domain (drawing on psychoanalysis and narrative therapy), scholarship on women’s non-clinical autobiographical writing frames healing as releasing the unconscious, forming a coherent narrative, and engaging in empathetic listening. In the socio-cultural domain (drawing on poststructural theory), scholarship on women’s “trauma” writing describes healing as forming a new sense of identity and adopting an altered discursive reality.

I argue that each of the frameworks for healing women’s traumatized consciousness must be strengthened by including attention to the obstructive force of patriarchy that inhabits consciousness in the physiological, psychological, and socio-cultural domains. Integrating attention to patriarchy in each domain of consciousness requires incorporating feminist arguments regarding each set of operative frameworks. In the physiological domain, the lived effects of patriarchy affect women’s physical and mental (emotional and cognitive) constitution and ability to heal. In the psychological domain, emotional and institutional barriers, or gatekeepers, stymie women’s ability to overhaul ingrained, normative patterns. In the socio-cultural domain, the discursive subordination of traumatized identities intersects with hierarchies of gender, race, class, and other identity markers to further marginalize rather than support women’s healing.

After detailing the inadequacies of current conceptions of healing in women's autobiographical literacy practices, I recommend strategies to achieve a more tailored, feminist approach for women. My aim in this project is to supply women survivors of trauma, women who use literacy practices as a coping devices, and women and men who teach, study, or advocate for literacy practices with a broader selection of conceptual tools to apply toward the goal of healing through reading and writing. I also offer practical solutions to address obstacles and inadequacies that theorists, clinicians, activists, teachers, and students may encounter. This thesis project augments existing literature on trauma theory in the social sciences; literacy practices and physiological, psychological, socio-cultural healing; feminist approaches to emotion and healing; and women's and feminist literacy practices.

### **Feminist Academic Background and Motivation**

Writing, reading, feminist consciousness, and gendered emotion intersect frequently in the subtext of feminist academic and activist work. Women's and Gender Studies scholars regularly describe changed or transformed consciousness and the array of emotions that accompany these shifts. Additionally, the transformation often depends on women's literacy practices; writing and reading serve as primary tools to promote the spread of feminist ideas and to foster like-minded communities mobilized for action. The legacy of U.S. feminism reveals successive periods in which diverse groups of women create and disseminate texts seeking to foment "feminist consciousness" leading to desired social changes (Campbell, 1983; Carlson, 1992; Kynclová, 2006; Walker, 1983/2004; Zobel, 2009). Even among women with low or minimal literacy levels, women's texts in the form of oral history/her-story, poetry, music, and performance

traditions create bonded communities shaping women's personal and collective knowledge and empowerment (Fulton, 2006; Goldin, 2009; Radner, 1993). Additionally, the idea of writing and reading as therapeutic and restorative, rather than simply transformative, has encouraged scholars, psychotherapists and clinicians, social activists, and writing professionals, among others, to explore how literacy practices promote healing in various ways (Anderson & MacCurdy, 2000; Brand & Graves, 1994; Fiandt, 2006; Julier, 1994; Lee, 1997; Lepore & Smyth, 2002; Miller & Tougaw, 2002; Penn, 2001). Observing both the inconsistencies and startling commonalities among diverse, cross-disciplinary perspectives, I recognized the potential of using feminist theoretical and ideological frameworks to bridge the conceptual gaps within and between discipline-based perspectives on women's literacy practices and healing.

### **Method**

This project comprises an original form of comparative content analysis, examining a cross-section of recorded human communications as cultural artifacts and applying inductive and deductive analytic strategies. Content analysis is an unobtrusive method allowing me to study social behavior without affecting it (Babbie, 2010, p. 332). Cultural artifacts are “products of individual activity, social organization, technology, and cultural patterns” (Reinhartz, 1992, p. 147). My methodology is “original” in that my research interests require me to survey a unique combination of cultural artifacts that have not previously been examined together, namely cross-disciplinary secondary sources (scholarly books and articles) on women's literacy practices. Because I focus on the ways that women's literacy practices have been *constructed* as healing, my content analysis might more accurately be called an analysis of *meta*-content.

To encompass a broad collection of materials on the topic of women's healing literacy practices, I conceptualize and organize data under an original interpretive framework that I call "domains of consciousness." I group studies from disparate disciplines into their respective domains of consciousness based on the sites and processes that they invoke to describe healing. I also inductively construct a conceptualization of healing as a theoretical converse of trauma and the composite of women's and feminist conceptualizations of a consciousness enabling personal and political efficacy against suffering and subordination.

Inductive research derives patterns from a set of observations, whereas deductive research begins with a predicted pattern (a theory) and gathers observations to test hypotheses from the theory (Babbie, 2010). Inductive analysis is common in qualitative social research, including content analyses such as the present project (Babbie, 2010). I use inductive logic throughout this paper because my goal is not to prove a theory but to explore patterns and generate potential explanations. I espouse the feminist epistemological stance that knowledge is embodied or "situated" (Haraway, 1988); researcher bias influences both deductive and inductive reasoning processes. As I interpret my observations and explain how I derive my conclusions, I presume neither that mine is the only possible interpretation nor that any single interpretation may be exclusively "correct." I address my positioning and political stance further in the Paradigm and Perspective section of this chapter.

Because I am interested in how models for healing apply specifically to women, I use examples from research produced by women, about women, and/or for women audiences to illustrate my observations. The authors in my evaluation do not necessarily

identify as feminist, but they display a desire to advance women's prospects for healing. Like many other feminist content analysis projects, my work exposes how the cultural artifacts under consideration reflect and mediate a "pervasive patriarchal and even misogynist culture" (Reinhartz, 1992, p. 147). Even some research that claims a feminist perspective uses methods and theories that reify a gender-slanted status quo. The present project also fits what Reinhartz (1992) calls "the sociology of the lack of knowledge" (p. 163), as I strive to indicate the gaps and omissions that systematically silence the experiences of women and other marginalized groups.

### **Paradigm and Perspective**

This thesis project is grounded in my multiple locations as a leftist, third-wave feminist scholar with a postmodern/poststructuralist view of meanings, power, and social relationships. I embrace a postmodern skepticism regarding any singularity or identity of meaning and poststructural emphasis on the perpetual, performative *becoming* of what we call reality.

From a poststructural perspective, *literacy* is a discursive category constructed according to rules that define who should read and write what texts, in what ways and in which contexts. Literacy practices are politically, not just personally, potent tools. Although Western, liberal individualist culture has normalized self-exploratory literacy practices as a popular form of self-development and civic participation, writing and reading remain steeped in discursive politics at the individual and societal levels. Literacy may expand, liberate, and validate one's individual sense of self, as it does for Precious in Sapphire's (1996) novel *Push*, but literacy established within rigid academic guidelines also often stifles individual expression and traumatizes writers who do not conform to the

standard (Allen, 2000; Paley, 2001). On a broader social level, literacy has been designated part of the universal human right to education since 1948, but change initiatives yield little progress without the galvanization of political will and local social mobilization (UNESCO, 2004, p. 8). In the United States only since the 1970s have women begun to substantially counteract their “deafening silence” in the Western academic canon (Dallery, 1989).

Healing, as I have defined it, also constitutes a political endeavor. My definition of healing is linked to my third-wave feminist concern to address the interdependencies between gender subordination and other kinds of human oppression. A central task of third-wave feminism is to find strategies to acknowledge, respect, and unite across many strands of difference. As explored in a cluster of *NWSA Journal* articles collectively entitled “Moving Locations: The Politics of Identity in Motion,” third-wave feminists have proposed models of solidarity-in-difference, coalitional consciousness, and processual (be)longing that reconfigure an exclusionary politics of “location” into an inclusive politics of “relation” (Keating, 2005; Rowe, 2005; Rowe & Licona, 2005). These models require building self-reflexive awareness of the shifting *affective* experience of identity. Feminist geographers J.K. Gibson-Graham (2006) also elaborate a politics of “community” that refuses to suppress the togetherness and multiplicity within any identity (p. 82). Gibson-Graham’s (2006) politics of community implies an “ethic of being-in-common, of coexistence with the other,” without requiring an essential, stable identity or commonality (p. 85-86). Central to the ability to form communities in this paradigm is the affective energy that moves individuals to *be* in common.

Feminist articulations of togetherness-across-difference enable diverse groups to establish mutually caring, cooperative communities to achieve goals for social change. As a feminist interested in building mutuality across diversity, I hope to contribute scholarship to advance this cause. I agree that we cannot continue to “rely on some benign sense of ‘sameness’ to build our identities and serve as the basis of our communities” (Rowe & Licona, 2005, p. 11). To that end, my interpretation of healing – establishing new empathetic connections, becoming open to dialogic engagement with the “other,” and perceiving individual capacity for change – constitutes constructing a subjectivity that resists singularity and stasis and incorporates human *affect* into a process of relational self-discovery. The healed subject is a subject that can engage lovingly, critically, and fruitfully within a world of difference.

As a White, middle-class, heterosexual woman with minimal history of recognized traumatic experience, I concede my inability to speak with personal authority on many of the circumstances that I discuss in this paper, such as intimate partner violence, posttraumatic stress, and persistent racial, ethnic, class, and sexual discrimination. For this reason, I use women’s own words wherever possible to support my analyses. Being skeptical of labels and binary opposites, however, I question the conceptual splitting of trauma from normalcy. Although a positivist, empiricist stance emphasizes the researcher’s personal distance from a topic, a postmodern feminist orientation acknowledges that meaning is embodied and indivisible from the emotional, moral, and ethical leanings of the socially-located individual (Haraway, 1988; Jaggar, 1989). I perceive traumatic rupture to be interwoven with and even sometimes indistinguishable from “normal” experience. I wholeheartedly uphold my political

objective to alter circumstances that I believe fuel continuing social and individual suffering, whether or not it is labeled “traumatic.”

### **Outline of Chapters**

I proceed with my analysis in four phases. First, I define the major concepts – consciousness, literacy practices, and healing – in Chapters 2, 3, and 4. Because each concept totes a plurality of potential historical meanings, I detail at length my sources, evidence, and rationale in selecting my definitions. I then discuss in Chapter 5 the mechanisms in each domain of consciousness that foster women’s healing through literacy practices. Third, in Chapter 6, I elaborate my critiques based on feminist understandings of physiological, psychological, and socio-cultural processes. Lastly, I offer recommendations to modify or transform future research endeavors in all three domains to better achieve healing goals for women in a patriarchal, misogynistic society. My approach recognizes the varied and multiple ways that individual women and groups of women experience and are constructed by patriarchy.

**CHAPTER 2**  
**PHYSIOLOGICAL, PSYCHOLOGICAL, AND SOCIO-CULTURAL**  
**DOMAINS OF CONSCIOUSNESS**

The present thesis project considers conceptions of consciousness in relation to the healing effects of literacy practices, or patterns of reading and writing, on women's traumatized consciousness. Researchers target various dimensions of experience as sites for healing interventions. In this chapter, I elaborate a definition and organizational schema for consciousness that encapsulates researcher perspectives within the scope of my argument. I am not concerned with the philosophy or origins of consciousness; rather, I discuss physiological, psychological, and socio-cultural frameworks that clinicians, scholars, social activists, and other authors interested in women's literacy practices use to conceptualize how consciousness operates and changes. My purpose is to develop the model that I use throughout the present project to categorize and examine healing processes related to literacy practices.

I begin with a simple definition of consciousness – knowledge of the self and world – that applies across the three domains of consciousness that I elaborate in the remainder of the chapter. The first domain I explore is the physiological realm of the embodied brain and the physical building blocks of consciousness. I provide an overview of the cellular and chemical processes that together create consciousness from a physiological perspective. In the psychological domain, I examine how researchers have interpreted consciousness based on descriptive theories of mind and mentality from psychoanalysis and narrative therapy. In the socio-cultural domain, I discuss theories of identity and discourse that researchers use to explore how social meanings mediate

individual patterns of thought and action. Critical research addresses the intersection of language, meaning, and structural power and privilege. These conceptions of consciousness from the physiological, psychological, and socio-cultural domains form a foundation for my definition of healing and discussion of how literacy practices heal consciousness.

### **A Basic Definition of Consciousness**

Scholars across disciplines capture the concept of consciousness in strikingly simple terms: knowledge of the self and the world (Damasio, 2010), a self-aware force of existence (Shirazi, 2010), one's waking knowledge of the "real" (McCann & Kim, 2010), and the evolving state of awareness of one's internal and external worlds (Willis et al., 2008). Philosopher Thomas Nagel (1974) provides an if-then logical statement in his "what it is like" definition: "An organism has conscious mental states if and only if there is something that it is to *be* that organism—something it is like *for* the organism" (p. 436, emphasis in original). Other descriptions provide more detail as to the outside stimuli—the "interactions, ideas, images, sounds, smells, tastes, and textures"—that blend with "internal memories, thoughts, and emotions, and (...) specific feelings and meanings" to construct consciousness (Jordi, 2011, p. 190). At the heart of these interpretations is a subjective experience that is known to the subject *as* her or his experience. In this view, consciousness arises in the midst of a streaming dialogue between an organism and its environment, between self and world. It is the site of the ongoing reception and *transformation* of inputs into a unique, subjective interpretation of reality. Consciousness forms continually as a process with no fixed or solid anchor.

Although authors describe consciousness in diverse ways, having *knowledge of the self* and *knowledge of the world* in which the self exists are consistent, basic premises of the ingredients to having consciousness (Damasio, 2010; Jordi, 2011; Willis et al., 2008). The discussions that follow in this chapter explore the components and workings of consciousness from various perspectives including neurophysiology, individual psychology, and socio-cultural research on meaning, identity, and language. Each of these perspectives explores unique aspects of consciousness as knowledge of the self and world, suggesting various potentialities and constraints for changing consciousness.<sup>1</sup>

### **The Physiology of Consciousness**

Studies in neuroscience characterize consciousness in terms of brain- and body-based cellular and chemical processes. From a physiological stance, consciousness is an engaged learning process linked to the sensitivity, complexity, and plasticity of the embodied brain. Consciousness is situated in the wakeful interaction of an embodied and self-aware brain system and its environment (Damasio, 2010). Neural and chemical pathways in the body channel messages to the brain that influence how conscious organisms interpret their internal and external worlds, which interact and transform continually in consciousness. In humans, explicit thoughts and judgments combine with the emotions, tacit knowledge, bodily sensations, and memories that exist outside what we translate into language (Jordi, 2011). This section explores neurophysiological views on how bodily mechanisms integrate and manipulate knowledge of the self and world to generate consciousness. I draw on the work of neurobiologist Antonio Damasio, psychiatrist Daniel Siegel, and other scholars who probe the interplay between cellular-chemical changes and human sensory, emotive, thinking, and relational processes.

## **The Cellular Building Blocks of Knowledge in Consciousness**

A physiological approach to consciousness examines the interoperation of neural and biochemical circuits in the brain and body proper. From this perspective, all subjective knowledge is physically rooted in the patterning of neural circuits originating in the brain. Neurons are the basic cells of the brain and distributed nervous system. Neurons respond to sensory events from the external world and to internal events (such as spontaneous memories) generated by the brain itself (Damasio 1994; Siegel, 2001). Neurons function by connecting with one another. Electrical pulses flow along the length of a neuron and stimulate the release of chemicals that pass to other neurons at a “synaptic connection” (Siegel, 2001, p. 69). This neural “firing” often connects very large ensembles of neural cells. Current research estimates that each neuron connects to about 10,000 other neurons, and the typical human nervous system has about 100 billion neurons (Siegel, 2001, p. 69). Additionally, neural connections occur “with a particular pattern, at certain rates, for a certain amount of time” (Damasio, 1994, p. 104). Ensembles of connected neurons are known as neural circuits. When neural circuits are activated in the brain proper, the brain creates a “neural map”—a specific pattern of firing—that forms what is known as a “mental image,” such as a sensory image (a smell or taste) or a linguistic representation of an idea or object (Siegel, 2001, p. 69). The term “representation” also refers to the mental image resulting from a neural map. Over time neural maps can strengthen with use or weaken with neglect. The strength of neural firing also is influenced by the chemical-emotional circumstances involved in the formation and use of a neural pattern (Siegel, 2006). The “knowledge” that the human brain carries in

neural representations depends on the integrated input that the brain system receives as it experiences and interprets the world.

The brain organ is the physical location and coordinating center of the distributed neural and chemical activity that produces physiological consciousness. The human brain is “triune,” comprised of the brain stem and limbic region at the base of the brain, and the cortex that covers the brain in a folded, gray mass of neural cells. The brain stem, limbic area, and cortex are integrated, or physically linked, both vertically and horizontally, or “bilaterally,” across the brain’s right and left hemispheres. The brain stem and limbic area are evolutionarily “older” than the cortex and are involved in non-symbolic sensory processing that allows the body to evaluate its environment and respond without actively “thinking” (Brand, 2000). Many of the mental and physical states that Western science calls emotions spring from this brain region. The amygdala (part of the limbic area), especially, can trigger an array of involuntary physiological changes in the body that prepare humans and other animals to face a perceived threat (Brand, 2000). The cortex, particularly the prefrontal cortex, is capable of abstract or symbolic thinking, allowing humans to conceptualize in pictures and language our experience and accumulated knowledge (Miller & Cohen, 2001). All of these brain regions are connected and coordinated through a middle prefrontal region (Siegel, 2007), so that information in the cortex (often considered the seat of “non-emotional” or “rational” thinking) continually receives input from the sensory and emotive regions, and vice versa (Damasio, 1994).

### **Mind – Accessing and Organizing Knowledge**

The *mind* is a concept that describes how the brain consciously perceives and manipulates knowledge as mental representations (Damasio, 1994). Siegel (2001) defines

mind as patterns of energy and information. Damasio (1994) defines mind as the process of forming neural representations that are manipulated in an activity called “thought” and eventually influence behavior (p. 90). The activity of the mind creates relationships among mental patterns that make them intelligible to us, forming what we “know” as symbolic thoughts. These relationships are the result of micro-structural changes in neural circuits to create new firing patterns or to reinforce or neglect existing patterns in the brain. The brain manipulates and makes sense of knowledge through the relational “flow” of the mind (Damasio, 2010; Siegel, 2001). Symbolic meanings may be expressed in consciousness through “thinking, language, art, or movement” (Jordi, 2011, p. 190). The operation of the mind is important for consciousness because the mind allows us to acquire new knowledge and also to bring into awareness and connect meanings to knowledge that may not previously have been accessible in symbolic form.

### **Memory – Connecting Knowledge to the Self through Time**

*Memory* is a critical neural process that connects knowledge to a present and ongoing sense of self. In order to be conscious, an organism must be able to perceive itself as the object of its perceptions and interpretations. Knowledge of a first-person self must connect to knowledge of the external world and the organism must recognize the knowledge as uniquely *its own* (Damasio, 2010). To achieve a sense of self, the brain generates a persistent reactivation of two sets of mental representations: a construction of identity from key autobiographical elements and a collective construction of the body’s past and present states (Damasio, 1994, p. 239). Although the self asserts an impression of stability, the self is continually (re)produced through ongoing conscious and unconscious memory processes.

Siegel (2001) explains memory as “the way in which past experience is encoded in the brain and shapes present and future functioning” (p. 74). The brain constructs its ongoing interpretation of reality from various inputs: immediate sensory perceptions, *remembered* interpretations of the past, and *remembered* plans for the future (Damasio, 1994, p.97). Some researchers identify two kinds of memory. *Implicit memory* is memory developed in infancy that allows humans to build knowledge of the world long before we gain command of language and other symbolic forms of representing knowledge. Implicit memory includes emotional, behavioral, perceptual, and somatosensory memory and functions to “prime” the body to react in certain ways to given situations (Siegel, 2001). Implicit memories directly shape our here-and-now experiences without our awareness of their reference to an experience from the past. Since implicit memory is not attached to an ongoing sense of self through time, some researchers refer to implicit memory as the “emerging self,” the “core self” (Stern, 1995, cited in Siegel, 2001), or the “proto-self” (Damasio, 1994).

In contrast, *explicit memory* includes factual and autobiographical memories that are connected to a “self” that persists through time and is projected into the future (Siegel, 2001, p. 74). Explicit memory develops after age two, when a child begins to use language to describe experience and to show self-referential behavior (recognizing oneself in the mirror and exhibiting self-conscious emotions such as embarrassment, empathy, guilt, pride, and shame) (Lewis, 2003). Explicit memory makes use of language and symbolic thinking, leading some scholars to refer to this stage as the “verbal” or “narrative” self (Siegel, 2001). The distinction between implicit and explicit memory reveals the distribution of subjective knowledge across conscious and unconscious mental

structures. Both implicit and explicit memory contain knowledge of the self and world, but implicit memory does not become conscious until it is transformed into symbolic form and accessed in explicit memory. According to some theories (which I explore in Chapter 4), healing changes in consciousness may result from making explicit the experience and knowledge held in implicit memory.

Some researchers distinguish various levels or “orders” of consciousness that relate to the functions of implicit and explicit memory. Primary consciousness draws on implicit memory functions. Primary consciousness is a wakeful state of knowledge of surroundings, comprising awareness of the world only in the present, without reference to a continuous self through time (Brand, 2000, p. 214). In contrast, higher-order consciousness denotes awareness of the self in relation to the past and future, incorporating explicit memory (Brand, 2000, p. 214). In higher-order consciousness, the brain’s ongoing receptivity to external stimuli engages with existing memories, thoughts, and emotions to produce a sense of a “me” experiencing the world. Although for my purposes I do not distinguish two types of consciousness, these theories help to elaborate the role of memory in constructing knowledge of the self and world over time.

### **Emotion – Shaping the Meaning of Knowledge**

Although the cellular makeup of the brain and the flow and arrangement of knowledge in the brain are important to conceptualize the physiology of consciousness, the most critical component for my investigation is *emotion* – the ingredient that gives *meaning* to experience and knowledge. In order for the mind to generate anything but random sequences of energy and information, a mediating mechanism must determine priorities and connections among streams of stimuli. In Western science, the arbiter of

meaning in experience is called emotion. Emotions occur when mental images activate brain systems that trigger coordinated changes in the body's distributed neural and chemical circuitry including nerve cell connections and levels of hormones and peptides in the blood (Damasio, 1994, p. 143-5). The neural and chemical changes that produce emotion direct the flow of energy and information in the mind, connecting perception to its *felt* significance (Siegel, 2001). Although the Western scientific tradition often separates emotion from other mental processes and devalues emotion in comparison to "reason" or "cognition," neurobiological evidence indicates that emotions are integrative throughout the entire body, omnipresent in mental processes, and fundamental to "rational" thought and decision-making (Damasio, 1994; Siegel, 2001).<sup>2</sup> Because emotions so profoundly shape our interpretation of self and world, I elaborate in the following paragraphs some deeper considerations regarding the relation of emotion to knowledge in consciousness.

Psychological arguments generally agree on the basic function of emotion. Emotions allow us to evaluate and respond "appropriately" to stimuli that we encounter in our lived experience (Brody, 2001; Ekman, 1999; Shields, 2002). Paul Ekman's (1999) theory of basic emotions claims that emotions prepare organisms to deal with "fundamental life tasks." Emotional responses arise from the confluence of the evolutionary history of the human species and the adaptive learning that we acquire over a lifetime. Similarly, functionalist psychologist Leslie Brody (2001) describes emotions as motivational systems that shape people's interpretations and prompt behavioral reactions to events or situations that affect well-being. From a social constructivist approach, Stephanie Shields (2002) defines emotions simply as "taking it personally" (p.

12), or evaluating something as important to one's own interests. The "basic emotions," functionalist, and constructivist perspectives share the idea that emotional impulses prioritize the personal significance of events in a flow of experience, helping us to avoid threats, pursue affirmation or gratification, and disregard irrelevant input. Arguments diverge, however, regarding the relative influence of "nature" and "nurture" in the experience, interpretation, and expression of emotion.

One approach to the distinction between "natural" and learned emotive processes is Damasio's (1994) partition of *emotion* from *feeling*. Damasio's theory distinguishes between physiological changes and how those changes enter awareness. When emotional limbic circuits connect with the prefrontal cortex, emotional information is synthesized and associated with specific meanings (Jacobs, 2011, p. 24), which Damasio calls the experience of *feeling*. As opposed to emotions, which generally are automated actions produced in the body, feelings are our *perceptions* of what happens in the body and mind *while* we are emoting (Damasio, 2010). Feelings monitor what the body does as thoughts about specific content emerge. Damasio (2010) makes this distinction to argue that feelings are the means by which the mind distinguishes between *self* and *non-self* in consciousness. Feelings connect visceral sensations to one's existing base of knowledge of the self and world, allowing one to perceive the first-person *feeling of knowing* (Damasio, 1994). Through feeling, we connect emotions to other thoughts, feelings, and memories to interpret our and others' emotional states, which process gives rise to new emotions, new perceptions, and new behavioral responses. The circuitry of perception, emotion, and first-person feeling is essential to consciousness and allows humans to

respond to stimuli flexibly, rather than automatically, based on our particular histories in interaction with the environment (Damasio, 1994).

Although I do not distinguish between feeling and emotion throughout this paper, Damasio's argument is useful in suggesting a neurobiological basis for the social constructivist view of emotion; not all emotive activity reaches conscious awareness, and the activity that becomes conscious requires *existing knowledge frameworks* for the organism to interpret it (Damasio, 1994). For example, I may perceive my heart race, my hands sweat, and my face flush, but I do not experience these changes as "anxiety" unless I have learned to interpret them as signs of anxiety. The evolution of the prefrontal cortex, the center of symbolic thought, enabled humans to name and conceptualize conscious experience, including emotions (Shields, 2002). The experience of "feeling" is at least partially mediated by the symbolic systems (e.g., language, pictorial art, movement, gestures, etc.) that we learn and use to represent our mental activity to ourselves and others (Jordi, 2011). Social constructivists argue that "nurture" or *socialization* creates one's knowledge frameworks, including knowledge about what is "natural" and expected emotional expression (Shields, 2002). Although an infant can at birth express emotions in ways that may prompt a caregiver to meet the infant's needs, the emotional socialization that the child receives in interaction with the environment contributes substantially to her sensation and performance of emotion throughout later life (Brody, 2001; Shields, 2002).

Humans attach moral and aesthetic values to emotion and categorize emotions within broader belief systems (Shields, 2002). The social constructivist argument sees emotion-related experiences and displays as cultural artifacts evidencing social meanings

assigned to situations, including interpersonal relations. The neural and chemical changes that constitute emotion respond to social cues about the *meaning* of those changes. In particular, emotions mediate meanings that govern our identity – our sense or consciousness of the self in relation to the world (Brody, 2001; Froyum, 2010; Hochschild, 1979; Jaggar, 1989; Shields, 2002; Sutherland, 2005). Socially-held meanings and beliefs about emotion set norms for *who* can express *what* emotion, *how*, and in *which* circumstances (Shields, 2002). Adopting the shared standards about when, where, and how emotion should occur allows humans to act as functioning members of a society. Beliefs about emotion also provide a reference point to establish a sense of personal authenticity in relation to others in an environment (Jaggar, 1989; Shields, 2002). Of interest to the present project, feminist research on emotions links socialized emotion to *gendered* identity. Gender differences in emotion may functionally support men's and women's differing social roles and motivations, but feminists argue that socialized emotion patterns also perpetuate sexist and other identity-based social inequalities (Brody, 2001; Froyum, 2010; Hochschild, 1979; Jaggar, 1989; Shields, 2002). In a White heterosexual male-dominated capitalist society, hegemonic emotional socialization (and conscious experience) generally will take a racist, homophobic, sexist, misogynistic, and competitive orientation (Jaggar, 1989). As I explore later in this project, one's emotional conflicts with hegemonic norms and conscious sense of personal authenticity (or inauthenticity) play a major role in instigating changed consciousness.

Arguments about emotion and identity illustrate the influence of socialization in the development of the physiological components of consciousness. Although biology and genetics partly determine human potential as members of a species, a complex

relationship between an organism and its environment, including neurological, social, cultural, and material/physical factors, drives the outcome. Consciousness is at once a product of biological determination and social education, responding to socially derived cues about how to express an authentic (gendered) self.

The physiological perspective configures consciousness as a conglomerate of cellular and chemical processes that change the structural makeup of the brain and body on an ongoing basis. Manuela Ferrari's (2010) self-reflective essay on "what I know"; 'how I know it'; and 'how I experience it'" illustrates how knowledge, mind, memory, emotion, and the contextual self coincide in a conception of consciousness. Ferrari (2010) examines her multiple conscious perceptions of a single experience: Ferrari's doctoral Qualifying Examination (QE). Ferrari (2010) uses Reinharz's (1997) concept of a researcher's *multiple selves* (including brought selves, research-based selves, and situation created selves) and Gardner's idea of *multiple intelligences* to explore her self-representation(s) in various communicative mediums. In a series of two- and three-dimensional visual art pieces, Ferrari (2010) captures the *felt* experience of how the exam process shaped her evolving consciousness. The color, light, shade, form, and patterns in the pieces evoke Ferrari's shifting mind states and conflicted emotions in conjunction with new and old memories. Her self-portrait shows four identical passport photos gradually enshrouded by the words and numbers that institutions use to identify Ferrari. The final near-disappearance of Ferrari's face signals the limitations of language and the need for other communicative mediums to represent her bodily experience (Ferrari, 2010, p. 223). *Sea of Text*, a multiple-medium collage of paint and text, depicts Ferrari's (2010) struggle to locate her voice among competing research paradigms (p. 223). A figure

navigating a bright panorama of sea and sky illustrates a journey from anxiety to acceptance. For a third piece, *Castle of Knowledge*, Ferrari constructs a pyramid of 71 playing cards, each printed with the front page of a peer-reviewed journal article or book chapter. The castle makes the “magnificence and volatility of scientific knowledge” (including her own work) directly accessible to the senses as an imposing yet fragile physical construction (Ferrari, 2010, p. 225). Although the reader or viewer cannot perceive the cellular changes internal to Ferrari, her visual art represents a change process that implicates thinking, memory, emotion, and self-concept(s) in an inclusive picture of “what it is like” to be Ferrari.

In this section I have discussed several concepts that contribute to a physiological view of consciousness. Consciousness comprises an ongoing process of integrating knowledge of the self with knowledge of surroundings, both of which physically reside in neural firing patterns in the brain and body. The mind gives experience an intelligible organization while the functions of memory and emotion impart ownership, continuity, and significance to experience over time. Because the self in any social context is subject to prevailing constructs of gender identity (and race, class, sexual-orientation, etc.), the emotional valuations attached to knowledge incorporate socialized beliefs about “authentic” emotional expression according to one’s social identity.

Research focused on the neural and chemical circuitry of consciousness has expanded interest in the physiological manifestations of trauma and the potential entry points for healing interventions. Physiological and neurological explorations, however, constitute only a small and relatively recent thrust in conceptualizing consciousness. Long before the birth of modern neuroscience, researchers developed theories for

describing how human mental workings affect lived experience. In the next section, I explore major psychological ideas that shape understandings of consciousness as a function of the psyche rather than the body.

### **Consciousness and Individual Psychology**

Psychological theories describe the human psyche as a mental force distinct from the body. The Western psychological tradition defines the “psyche” as a mental structure at the “center of thought, emotion, and behavior” which “consciously or unconsciously mediates the body's responses to the social and physical environment” (*American Heritage*, 2002). Ideas regarding the workings of the psyche influence contemporary understandings of consciousness, trauma, and healing. First, the concept of the *unconscious* introduces a dual representation of the processes occurring above and below awareness that coincide to motivate consciousness. Second, the concept of *narrative* refers to the stories that humans use to identify, capture, and comprehend patterns of individual and social experience. Third, the act of *listening* enables humans to perceive and develop knowledge from their own and others’ communicated mental processes.

### **The Unconscious**

Sigmund Freud and Pierre Janet<sup>3</sup> are perhaps the best known figures in Western psychology to explore a hidden realm underlying consciousness known as the *unconscious* or *subconscious* in relation to psychic trauma (Lepore & Smyth, 2002; Rivkin & Ryan, 1998; van der Hart, Brown, & van der Kolk, 1989). According to psychoanalytic theory, the unconscious comprises a vast array of mental structures and processes that exist below the surface of awareness but nevertheless affect conscious interpretations and behaviors (Kihlstrom, 1987). Freud’s book *The Interpretation of*

*Dreams* shattered the seventeenth-century notion of a unified, fully knowable human mind by postulating a radical division between directly and indirectly accessible regions of the mind (Rivkin & Ryan, 1998). In Freud's view, the unconscious houses a profusion of "repressed desires, feelings, memories, and instinctual drives" often related to socially impermissible forms of sexuality and violence (Rivkin & Ryan, 1998, p. 119). The force of repression, by which members of a society constrain and mold instinctual urges into "civil behavior," is at once necessary and potentially detrimental to psychic and social life. Freud, Janet, and other early twentieth-century psychologists applied the theory of the unconscious to treat various mental and physical disorders through hypnosis, dream analysis, free association, and other indirect paths to the psyche (Rivkin & Ryan, 1998; van der Hart et al., 1989).

The concept of the unconscious remains influential across many branches of contemporary Western psychology and psychiatry. Recent scholarship on the unconscious spans, for example, organizational psychology (Blake & Buckle, 2011), cultural psychology (Salvatore & Freda, 2011), and integral psychology (incorporating Eastern spiritual traditions) (Shirazi, 2010). The unconscious also exerts a presence in popular psychology. For example, Gigerenzer's (2007) *Gut Feelings: The Intelligence of the Unconscious* claims that non-consciously produced gut feelings, intuitions, and hunches are integral to competent decision-making.

Feminist arguments have both appropriated and levied critiques on traditional Freudian approaches to the unconscious related to gender. Psychoanalytic feminists assert that women's oppression stems not from oppressive political, relational, or economic structures, but from experiences rooted in women's unconscious (Tong, 2009, p. 128-

129). A series of infantile and early childhood experiences related to sexual anatomy construct masculinity and femininity in the psyche, and these unconscious models become manifest in cultural patriarchy, misogyny, and women's ways of acting (Tong, 2009, p. 129). Feminists such as Betty Friedan and Kate Millett rejected Freud's emphasis on anatomy in unconscious psycho-sexual development and the implication of biologically-determined gender inequality (Tong, 2009). In contrast, theorists such as Juliet Mitchell and Gayle Rubin, drawing on the work of Jacques Lacan, used the unconscious to re-imagine possibilities for feminist interventions (Dever, 2004). Mitchell saw the phenomenal world – including the body and the phallus – as a projection of internal desires and conflicts that could be altered if exposed (Dever, 2004, p. 66). Rubin applied the unconscious to reveal the frailty and *indeterminacy* of relations (such as heterosexuality and conventional masculinity and femininity) that societies construct as “normal” or inevitable (Dever, 2004, p. 70-71). Later theorists Dorothy Dinnerstein and Nancy Chodorow argued for alterations at the level of family structure and infant development, changing social norms of parenting and “mothering” to induce gender equanimity (Dever, 2004; Tong, 2009).

Across these various interpretations and appropriations of Freudian theory, non-conscious mental life represents an influential sphere of activity that affects consciousness knowledge of the self and world. Altering the unconscious produces changes in conscious functioning, and changes to consciousness likewise implicate accessing, exposing, and amending or reinterpreting unconscious material.

To illustrate how psychoanalytic theorists envision the conscious release and assimilation of unconscious experience, I examine a scene from Alice Walker's (1982)

*The Color Purple* that leads to Celie's first sexual encounter with Shug Avery. Read from a psychoanalytic perspective, the scene represents the expression of multiple unconscious memories and impulses that introduce new understanding and transformation both within and between Celie and Shug. The incident begins when Shug asks Celie about her experience of intercourse with Celie's children's father. In response, Celie for the first time tells the story of her rape by her father when she was fourteen. When Shug reacts by sympathetically embracing Celie, Celie's emotions and memories flow freely:

Seem like it all come back to me, lying there in Shug's arms. How it hurt and how much I was surprise. How it stung while I finish trimming his hair. How the blood drip down my leg and mess up my stocking. How he don't never look at me straight after that [*sic*]. (Walker, 1982, p. 112)

As Shug continues to comfort Celie, kissing her face and tears, Celie continues to reveal and connect the remembered fragments of her experiences with sex and love. She recalls lying to her mother about having a boyfriend and the devastation of her childhood passion for cutting hair. She also connects the episode to her current loneliness and lack of love:

My mama die, I tell Shug. My sister Nettie run away. Mr. \_\_\_\_\_ come git me to take care his rotten children. He never ast me nothing bout myself. He clam on top of me and fuck and fuck, even when my head bandaged. Nobody ever love me, I say [*sic*]. (Walker, 1982, p. 112)

At this admission, Shug, seemingly overcome with empathy and care for Celie, kisses her and expresses her love outright. Celie and Shug both appear surprised yet willing to explore a new physical intimacy. From the view of the unconscious, both women

experience a conscious release of repressed sensations that enables them to see themselves and their situation differently and to act on this transformation. Celie's story brings Celie and Shug to consciousness that they are desirous and deserving of love and physical intimacy from each other.

### **Narrative**

The concept of narrative in psychotherapy and psychoanalytic theory has grown and expanded beyond its traditional psychoanalytic function. Freudian psychoanalysis relies on the role of the therapist to elicit and interpret the client's unconscious material and assist the client to accept the therapeutic analysis of her condition (Freud, 1920/1998, p. 171). Freud used the term "construction" to refer to the process of combining empathetic responses with logical reasoning to draw inferences and conjectures about a client's stories (Peterson, 2011, p. 196). The therapist and client together fashion a new narratively organized self-model for the client that adequately captures and reformulates experience that was previously hidden.

In recent decades, psychological approaches have placed greater emphasis on the role of narrative construction as an operative component of mental life in and beyond therapeutic scenarios (Bruner, 1991; Hermans, 1999; Sarbin, 1986; White & Epston, 1990). The pioneering work of Jerome Bruner and Theodore Sarbin explores the role of story making, storytelling, and story comprehension in contextualized (rather than mechanistic) approaches to human psychology. Narrative is a root metaphor for understanding how humans make sense of the world and understand our motives and actions (Sarbin, 1986). Characterized as "an instrument of mind in the construction of reality" (Bruner, 1991, p. 6), narratives are stories, scripts, or schemas that contain

information that is meaningful and relevant to human life (Bruner, 1991). Narratives may consist of explicit, language-based stories of remembered events that we literally “tell” ourselves, or they may be less overtly articulated behavioral and emotional rules, guidelines, and expectations. Bruner (1991) suggests that certain domains of human knowledge—namely language, social beliefs, and social procedures—are particularly embedded in narrative meanings. Narratives constitute a cultural toolkit of principles and procedures that structure the “rich and messy domain of human interaction” (Bruner, 1991, p. 4). Individuals develop narratives based on patterns of social activity that define for us what it means to be an individual in relation to our environment. We construct “reality” and decide how to act based on expectations and cues contained in personal and cultural narratives (White & Epston, 1990). Although narratives are derived in interaction with a social world, narratives are internalized in the individual psyche. On an individual level, narratives help to incorporate the remembered past with present perceptions and the imagined future in a meaningful sequence (Pennebaker & Seagal, 1999).

The fictional novel *Push* (Sapphire, 1996), illustrates the impact of internalized narratives on the psyche. Told from the first-person perspective of Claireece Precious Jones (“Precious”), the novel portrays Precious’s evolving mental landscape as she transitions from a state of dependency, isolation, and physical and psychological turmoil to a stance of self-assertion, connection, and personal direction. The narratives that dominate Precious’s inner dialogue at the outset of the story comprise a conflicting jumble of abusive, hateful insults and threats from her parents; the insults of strangers on her appearance; memories of unexpected kindness from hospital workers; her inner fantasies of beauty and recognition (or simply personal visibility); her idolization of

Louis Farrakhan Muhammad (“Farrakhan”); and her resistance to the way that popular media and the traditional educational and social welfare systems depict her identity (as Black, overweight, welfare-dependent, poorly educated, and prematurely sexually active). When Precious takes the placement test at Each One Teach One, she recognizes that judgments of her value by conventional standards are wrong and superficial:

The tesses [tests] paint a picture of me wif no brain. The tesses paint a picture of me an’ my muver—my whole family, we more than dumb, we invisible (. . .) I big, I talk, I eats, I cooks, I laugh, watch TV, do what my muver say. But I can see when the picture come back I don’t exist. Don’t nobody want me. I know who I am. I know who they say I am—vampire sucking the system’s blood. Ugly black grease to be wipe away, punish, kilt, changed, finded a job for. I wanna say I’m somebody. I watch myself disappear in their eyes, their tesses. I talk loud but still I don’t exist [*sic*]. (Sapphire, 1996, p. 31)

Precious refuses to accept her situation, but prior to entering Each One Teach One she has little recourse but to escape through daydreams and misanthropic, self-protective behavior. She swears at her teachers, avoids participating in much of school, and has little social involvement outside of her home.

The physical narratives of Precious’s life share an equal stage with the verbal narratives. Her corporeal experiences of repeated rape and sexual violation, physical attack, child and adolescent pregnancy, urinating herself in school as a child, and compulsive eating also shape how she consciously experiences the world. Memories of physical pain, pleasure, or disengagement, and the confusing emotions attached to those memories, frequently interrupt Precious’s immediate sense of the present world.

Although Precious absorbs some of the negative narratives about her body, her awareness of her body as a life force propels her through periods of self-deprecation:

I stand in the tub sometime, look my body, it stretch marks, ripples. I try to hide myself, then I try to show myself (....) What it take for my muver to see me?

Sometimes I wish I was not alive. But I don't know how to die. 'N no matter how bad I feel my heart don't stop beating and my eyes open in the morning (....) I don't care now what anybody see. I see something, somebody [*sic*]. (Sapphire, 1996, p. 32-33)

Precious's narratives gradually expand and shift throughout the novel as she encounters different ways to view herself, her situation, and the world. Through her interactions with her teacher and fellow students in an "alternative" literacy program, Precious connects with a supportive community that shares her resistance to dominant frameworks and also teaches her to be less prejudiced against difference. She begins to express her own voice in a journal and out loud in class and to absorb the voices of others in the books she reads for class. Her love for her babies, her determination to succeed in school, and her desire for independence from her family and the welfare system replace the old narratives that once dominated her consciousness. As Precious increasingly creates, absorbs, and shares counter-narratives, she begins to experience the world differently and pursue activities that support her goals for life and love.

From the perspective of narrative, consciousness constitutes a multitude of more or less structured stories that tell us about our surroundings and about ourselves.

Consciousness depends on the contextual narratives of social meanings, rules, and expectations that we internalize, reproduce, and manipulate. As the novel *Push*

demonstrates, and as I explore further in Chapter 5, the narrative model informs the present investigation because written narrative is thought to help re-shape conscious mental patterns to promote healthier self-concepts and adaptive engagement in the world.

### **Listening**

Psychological frameworks for consciousness also theorize that humans build knowledge of the self and world through continual acts of *listening*. Listening entails investing mental attention in a sound or other communicative production, forming a dialogic relationship, and being emotionally or empathetically “attuned” (Hermans, 1999; Teich, 1994, p. 145). In Western psychological models, listening is indispensable to the development and transformation of consciousness. Traditional Freudian theory maintains that unconscious repression interrupts the ability to directly observe much of our mental activity; hence, the therapist is required to listen to and interpret the client’s stories to bring repressed content into consciousness. Freud’s (1900/1998) recounting and interpretation of his own dreams illustrate the listening process that he adopts in therapeutic situations. In one episode, Freud (1900/1998) recalls a decontextualized sentence fragment that had slipped into his consciousness: “That has an *erzefilisch* influence on the sexual emotions” (p. 145). He proceeds to describe his mental associations with other words and ideas, including “educational,” “syphilis,” and “governess,” which eventually lead to a “logical” conclusion as to the origin of the isolated sentence: He feared that his previous conversation with a governess may have had a deleterious effect on her sexual emotional life (Freud, 1900/1998, p. 145). In his self-analysis, Freud applies an attentive, thoughtful, and creative dialogue to his own

mind-scape. He listens to the “verbal malformations” in his dreams that he suspects lend clues to his conscious existence (Freud, 1900/1998, p. 145).

Narrative approaches also emphasize listening as the source of dialogic story-construction between the self and the world. Stories do not exist in a contextual vacuum. The notion of a *story* assumes a *teller* and a *listener* to invent, assimilate, and share the knowledge contained in the story (Hermans, 1999). Storytelling is a relationship-building activity that connects tellers and listeners in a bond of shared ideas and, often, shared emotion. Listening also adds the dimension of *time* to the constructive narrative process. A narrative has a beginning, middle, and end; listening happens over time (Penn, 2001). Attention must be sustained as a story unfolds. Narratives also persist in memory over time and space, and so retelling may connect people to each other across vast distances. Maisha Fisher’s (2004) study of African American literacy practices, which blend “orality” with reading and writing, demonstrates the interdependency of storytelling, history, and diasporic community. Fisher (2004) interviews contemporary African American poets and authors who see themselves as part of an historical “continuum of poets, writers, readers, musicians, and activists” participating in like-minded communities and passing along shared traditions (p. 301). Fisher argues that literacy and orality share a legacy of galvanizing African American mobilization for cultural uplift and social action. The perpetuation of a common African American historical consciousness depends on groups of active, attentive readers and listeners whose stories persist over time. Community-based African American literary clubs and journals operating from the 1830s to the 1940s supported the oral and literary traditions of people of African descent into the twentieth century. These grassroots efforts laid the foundation

for the spread of broader arts and literary movements and independent Black institutions in the latter half of the century (Fisher, 2004, p. 292). Present-day participants in open mics, writing groups, anthologies of poetry and prose, and other communal literary events associate themselves with this history and seek continued connection with audiences. Dynamic exchanges between performers and listeners reinforce bonds of emotion and history that perpetuate ties and activism within African American communities (Fisher, 2004).

Although the psychoanalytic and narrative models stress the literal acts of telling and listening to stories, the popular metaphoric injunctions to “listen to the body” (e.g., to know when one is hurt) or “listen to your heart” (e.g., to make a difficult decision) suggest that listening does not necessarily entail verbal communication. Attention, dialogical engagement, and emotional attunement can occur with many types of communication that occur over time. In later chapters, I examine how the listening metaphor applies to processes of writing and reading.

### **Consciousness in a Socio-Cultural Context**

Human physiological and psychological life develops in constant rapport with a socio-cultural milieu; therefore, “we cannot take as our unit of analysis the isolated individual operating ‘inside his or her own skin’ in a cultural vacuum” (Bruner, 1991, p. 20). Social theorists argue that cultural institutions and practices (supported by religious, ethical, legal, aesthetic, scientific, and other bodies of knowledge) concretize and disseminate particular historical meanings, or ways to interpret, the self and world. Critical perspectives cast light on how the distribution of meanings supports an *unequal* distribution of power and resources. In this section I explore arguments from critical race

theory and from postmodern, materialist (Marxist), and feminist views on socio-cultural knowledge of the self and world. The concepts of *identity* and *discourse* offer frameworks for understanding how social meanings affect conscious perception, interpretation, and action and the distribution of power in relationships. Theorists assert that socially-derived meanings attached to the self and world construct and are constructed by individual consciousness and have material consequences for lived experience.

### **Identity**

The abundance of social theories of identity suggests that a primary preoccupation of conscious (and unconscious) activity is to locate the individual in relation to others in a community. The concept of *identity* is one means to describe how individuals organize social meanings on the level of interpersonal and inter-cultural relationships to achieve that goal. From a contemporary social-psychological perspective, identity is defined as “the sets of meanings people hold for themselves that define ‘what it means’ to be who they are as *persons*, as *role occupants*, and as *group members*” (Burke, 2004, p. 5, emphasis mine). From a socio-cultural perspective, Sutherland (2005) defines identity as “how an individual thinks about herself” (p. 369). Identity entails sets of rules or standards that place individuals into relationships with other people (and institutions). Identity is not a fixed entity but rather the product of continual social comparisons, negotiated in ongoing, multifaceted, and sometimes contradictory dialogues with culturally available meanings (Sutherland, 2005). Identity relationships may be based on personal characteristics, the performance of complimentary roles, or the maintenance of similar group affiliations (Burke, 2004; Hitlin, 2003). Identity also implies difference

from (and often opposition to) those who do not share common traits, whose roles compete with each other, and who inhabit different group networks. To codify identity standards, identity meanings often are attached to symbolic markers and verbal labels that designate culturally-available identity categories such as “Black,” “adolescent,” “woman,” “Jewish,” or “conservative” (Sutherland, 2005, p.367).

Identity functions on a societal scale to establish standard meanings (i.e., narratives, beliefs, values, Truths, etc.) about personal, role, and group categories. Burke (2004) and Shields (2002) argue that identity meanings shape individual consciousness through the process of self-authentication. Individuals authenticate their self-conception, or self-verify, based on identity standards and beliefs. Identity control theory posits that people seek to mutually reinforce identity standards for themselves and others and to oppose or neutralize discrepancies between expectations and perceptions of identity (Burke, 2004). In other words, members of a social group use beliefs about identity to *endorse* and *police* their own and others’ self-expression. As I mentioned in discussing emotions, feminist scholars argue that a major task of identifying the self is identifying a *gendered* self (Brown & Goozé, 1995; Shields, 2002). The authenticity of gender identity is a core component of the authenticity of the self in a social context (Shields, 2002). Shields (2002) theorizes that core beliefs (also called “folk theory,” social schemas, scripts, or narratives) about men and women shape the active, relational negotiation and performance of one’s gender identity in social situations. We “do gender” by enacting the appearance and behaviors believed and expected of a particular gender category (Shields, 2002). We strive for authenticity in our designated social roles by learning and using the appropriate meanings relevant to our (gendered) identity.<sup>4</sup>

Identity standards or meanings locate individuals in relation to one another with the goal to mediate the distribution of power in social relationships; identities designate positions in a social order that dictates resource flows among groups and individuals (Burke, 2004; Hitlin, 2003; Shields, 2002). When people act to verify (or subvert) identities, they also verify/subvert the distribution of power and resources within the social structure (Burke, 2004, p. 8). For those who seek to change the distribution of power, becoming newly aware of one's identity or shaping alternative, conscious identity meanings can be powerful tools to propel individual and social transformation, as I explore in Chapters 4 and 5.

Critical analyses such as feminist and critical race theories contend that cultural meanings and categories, such as those that create identity, do not arise "naturally" or neutrally; hegemonic identity categories are perpetuated by dominant groups and serve to maintain an unequal social status quo. This perspective is influenced by the Marxian (1846/1998) idea that "the class which is the ruling *material* force of society, is at the same time its ruling *intellectual* force" (p. 253, emphasis in original). The groups and individuals that dominate the control of resources in a social structure may also dominate the construction and propagation of knowledge and meanings, and as a result partially control consciousness. Feminist philosopher Alison Jaggar (1989) specifies the internalized political consequences of the links between identity, power hierarchies, and hegemonic consciousness:

Within a hierarchical society, the norms and values that predominate tend to serve the interest of the dominant group. Within a capitalist, White supremacist, and male dominant society, the predominant values will tend to serve the interests of

rich White men (...) Whatever our color, we are likely to feel (...) “visceral racism”; whatever our sexual orientation, we are likely to be homophobic; whatever our class, we are likely to be at least somewhat ambitious and competitive; whatever our sex, we are likely to feel contempt for women. (p. 159)

From a critical vantage point, individual consciousness is always already steered by the priorities shaping the consciousness of a dominant social group. The thoughts, feelings, words, and gestures that members of a society use to interpret and communicate experience derive from those that are communicated by the groups and individuals with the greatest material and social power and influence.

Although hegemonic identity meanings have material political costs for subordinated groups, critical analyses assert that individual consciousness represents a “sphere of freedom” (Collins, 2009) where the subject can assert her agency and resist hegemonic consciousness. Critical theorists define *critical consciousness* as “challenging the underlying assumptions that work in the internal and external worlds to privilege some while disprivileging others” (Willis, et al., 2008, p. 5). In Chapter 4, I discuss in greater detail how constructing critical counter-narratives to hegemonic identity meanings can lead to a healed consciousness that invokes critical awareness and strives toward more equitable, tolerant, and peaceable personal and social outcomes.

### **Discourse as the Medium of Consciousness**

Related to and in some views inextricable from identity, the poststructural concept of *discourse* is a fundamental ingredient to many theories of consciousness in a socio-cultural context. In poststructural theory, pioneered by French philosophers Michel Foucault and Jacques Derrida and feminist theorists such as Luce Irigaray, Judith Butler,

and Sharon Marcus, consciousness is constituted in and through discourses. The primary means to communicate discourses is language. Foucault (1969/1998) describes discourses as the rules that define the relationship between words and things (p. 427). Discourse gives meaning to things that we name in a language. Anything that arises in language, including identity, comes into existence as part of an entire ensemble of meanings that pertain to particular historical conditions (Foucault, 1969/1998, p. 423, 425). Historical conditions encompass, for example, “configurations of textual, material, and social practices that are culturally recognizable as shaped by and signifying particular worldviews” (Burgess & Ivanič, 2010, p.236). Discourses evolve from recurring ways of thinking, valuing, and acting; using language and other semiotic resources; and using particular tools and technologies at particular times and in particular places (Burgess & Ivanič, 2010, pp. 236-237). They are the systems of meanings that shape our understanding of “reality” at any given time. Because discourses constitute our knowledge of “reality,” we cannot “know” anything outside of discourses. This means that consciousness, or knowledge of the self and world, also is constituted through discourses. Put another way, consciousness “sees” knowledge only through the lens of discourses. The power of discourses to shape subjective interpretations of the self and world has important consequences for the links between identity, discourse, and changed consciousness.

Foucault’s conception of discourses and consciousness is similar to Althusser’s (1968/1998) idea of the ideological recruitment or “interpellation” of subjects (p. 301). Consciousness is a site of the discursive interpellation of the subject: Individuals are “hailed” to discourses; by learning, accepting, and assimilating a discourse, the individual

becomes a subject of that discourse. The process of accepting or rejecting discourses is the process of constructing consciousness as we construct the self, the social identity of the self, and the perceived identities of others in relation to the self (Burgess & Ivanič, 2010). Identity is a function of the discourses that are available to a subject at any given historical moment. Making someone aware of a discourse invites that person to become a subject of the discourse, changes one's relative *subject position*, and shifts or reinterprets the meanings by which one constructs identity. Choosing a discourse, with its related languages, practices, and other "ways of being," usually is not a calculated, premeditated, logical process; rather, one's discursive subjectivity frequently is governed by an implicit, unarticulated sense of personal authenticity. In a world of multiple competing discourses, we adopt the discourses that make us *feel* authentic in relation to all of the other possible discourses available to us (Burke, 2004; Shields, 2002). The idea of critical consciousness-raising, however, contends that individuals can act consciously to install changes in the discursive field that make available new identities and new possibilities for subjective consciousness (Campbell, 1983; Carlson, 1992; McDonough, 2009).

An example from early American feminist agitators illustrates the relation among identity, discourses, changed consciousness, and political outcomes. Carlson (1992) details how members of the antebellum American Female Moral Reform Society (AFMRS) used rhetorical "stretching" to reconfigure public views on women, morality, prostitution, and male sexual transgression. As evidenced in the society's bi-weekly periodical *The Advocate*, the AFMRS pushed for a new view of women that reinterpreted the traditional White, middle-class feminine ideals of "piety, purity, domesticity, and submissiveness" to accommodate "prostitutes as sisters and radical women as

conservatives” (Carlson, 1992, p. 22). Although the reformers considered prostitution a sin, their arguments emphasize the guilt of male “libertines” who “make sport of destroying women” yet receive no social punishment (Carlson, 1992, p. 25). The *Advocate* construes women as kin in their shared victimization, appealing to readers’ pity and female identification. To challenge this victimization, the *Advocate* encourages women to take action (breaking traditional barriers of submissiveness) based on a feminine moral imperative to protect Christian society (Carlson, 1992). Women sympathizers of the movement responded to the appeals to their shared victimization and virtuous agency; they formed societies and circulated petitions to state legislature that eventually led to anti-seduction laws, which became precursors to modern statutory rape laws (Carlson, 1992). In this example, the discourse of moral reform expands women’s options for “authentic” self-expression. Women’s subject position shifts in relation to prostitutes, men, and each other as a result of the new discursive possibilities that the *Advocate* introduces. Women gain consciousness of themselves as both victims and agents of change. The new consciousness demands altered action in accordance with the prescriptions of an altered identity. Women who identify with the discourse of moral reform perform the role of the discursive subject through actions expressing “authentic” social outrage (along with purity and piety).

For Foucault, the circulation of power, knowledge, and discourse are inextricably related. Discourses shape knowledge, together with the social practices, forms of subjectivity, and power relations inherent to knowledge (McCann & Kim, 2010, p. 307, citing Weedon, 1997). Discourses function to “provide a way of seeing and interpreting information, categorize individuals and events, and justify power relations” (McBride &

Mazur, 2006, p. 229). Becoming a discursive subject is an act both of empowerment and of learning the rules of participation in the discourse. Knowledge, accessed through discourse, both empowers and disciplines its adherents to follow the rules of that knowledge. In Chapter 6, I explore how this dual function of discourse may impose limits on the healing potential of literacy practices.

### **Conclusion**

In this chapter I explored understandings of consciousness from multiple perspectives that I categorize in physiological, psychological, and socio-cultural domains. I demonstrated how theories and research in these areas describe the components, functions, and potentialities for transformations of consciousness. A basic premise of consciousness that connects the physiological, psychological, and social domains is that the achievement of consciousness depends on the subjective connection of knowledge of the self with knowledge of the surrounding world. In the physiological domain, consciousness is seen as the product of cellular and chemical processes that produce integrated mental representations of the self and the perceived environment. Emotion links internal and external perceptions to the meanings associated with an ongoing physical and mental sense of a “me.” In the psychological domain, theories of non-conscious mental life, the organizing role of narratives, and the process of listening suggest that personal and cultural stories influence one’s self-knowledge and everyday experience. In the socio-cultural domain, the concepts of identity and discourse help to unpack the ways that subjective knowledge is constituted relationally through social interactions. Making someone aware of an identity or discourse of which they were not

previously aware gives that person access to different forms of knowledge/power and hence changes consciousness.

The overall goal of this project is to explore and critique from a feminist perspective changes in consciousness achieved through literacy practices, or reading and writing. My discussion in the next chapter explores more in depth how theorists have interpreted the relationship between language, literacy practices, and consciousness.

## Chapter Notes

<sup>1</sup> Because this project explores meta-content from a variety of disciplines, I use the language and concepts applicable in those disciplines in my analysis. This adoption of disparate disciplinary languages enables me to maintain the integrity of the authors' original works while incorporating my own organizational structure and arguments. In using cross-disciplinary terms, however, I risk deviating from my stated poststructural orientation on fundamental concepts such as the de-centered self. I define consciousness in the present paper as knowledge of the self and the world, but I do not intend to imply that the self or the world (or consciousness) represent essential, stable, or singular entities. In my view, the self is a fictional unifying principle for the "I" as experienced by the individual; the world is the subjective reality that the individual perceives based on her or his accumulated and ongoing store of knowledge. Consciousness is an invented term classifying certain states of experience. The purpose of this project, however, is not to engage in philosophical inquiry on meanings but rather to explore how scholars apply these concepts toward the goal to heal women's traumatized consciousness through literacy practices. I present a range of voices and levy a critique that addresses real-world concerns and provides practical solutions. I consider my work to contribute to an ongoing, broader dialogue on women's experience and pathways to healing.

<sup>2</sup> Rational, verbal thought often is associated with the concept of *cognition*, a mental "meaning-making" activity that involves the conscious manipulation of language-based representations (Boals et al., 2011; Jordi, 2011). Although Western science often divides cognitive from emotive mental states, cognition is one of the numerous mental processes regulated by emotions (Brand, 2000; Damasio, 1994; Jordi, 2011; Siegel 2001).

<sup>3</sup> Carl Jung's theory of archetypes as an organizing principle of the psyche also influences current work in trauma counseling and psychology and feminist explorations of the female psyche (Singh & Hofsess, 2011). *Archetypes* are defined as universal, unconscious "prototypes" of thought and action (Singh & Hofsess, 2011, p. 43). Feminists have credited Jung with recognizing the Feminine in mythology and psychology and theorizing a model of the human psyche that incorporates both Feminine and Masculine elements regardless of biological sex (Griessel & Kotze, 2009). Jungian archetype psychology incorporates mythology and storytelling in models of healing self-discovery (through exploring one's unconscious archetypes); however, I do not examine Jungian approaches in the present project because these models are not prominent in the research on women's literacy practices that I surveyed.

<sup>4</sup> Shields' (2002) social constructivist approach to identity draws on Judith Butler's theory of the *performativity* of gender, but Shields focuses on the performative effects of social meanings rather than on the philosophy of meaning itself. Butler (1997/2010) defines gender as an identity tenuously and temporally constituted through the stylized repetition of corporeal acts. It is the *act* – the temporal physical embodiment – that "constitutes meaning and through which meaning is performed or enacted" (Butler, 1997/2010, p. 420). The gendered body is both continually realized through time and "a set of possibilities to be continually realized" (Butler, 1997/2010, p. 420). Gender identity

is the materialization of social fictions that construct possibilities for reproducing gender through performative acts. Butler (1997/2010) claims that all concepts of identity including gender identity are “naturalized” social illusions that are publicly regulated and sanctioned. From this perspective, self-verification and authenticity are necessary only if we believe in the fiction of identity. In contrast, Shields’ (2002) approach does not dispute the legitimacy of identity as an organizing construct; Shields exposes and challenges the performative effects of identity meanings without deconstructing identity itself.

## CHAPTER 3

### LITERACY PRACTICES AND CHANGED CONSCIOUSNESS

In this chapter I address the questions, what are literacy practices and how do literacy practices change consciousness? I begin by defining the basic components of literacy practices – reading and writing.<sup>1</sup> I then elaborate on how literacy practices incorporate a wide and dynamic range of physical/mental, social/interpersonal, historical/material elements. I draw on empirical psychological research, critical social theory, and feminist arguments to explore the interplay between individual perception, social relationships, material conditions, and the knowledge conveyed in texts. I then discuss explanations for why and by what means reading and writing may become change agents of consciousness, or knowledge of the self and world (as I explored in Chapter 2). I argue that despite the static appearance of words in texts, reading and writing produce “open systems” of continual discovery, reformulation, and assimilation of meanings in consciousness (Ong, 1977). My discussion of the embodied components of literacy practices and the relationship of literacy practices to changed consciousness lays the groundwork for my later exploration of writing, reading, and healing.

Researchers have linked personal and social healing to transformed consciousness; literacy practices, as change agents of consciousness, also serve as healing agents.

#### **Definitions of Writing and Reading**

Literacy practices are reading and writing, the processes by which subjects compose and engage with meaningful texts. I am deliberately vague in using the word “text.” Text can denote nearly anything that is perceived and interpreted (i.e., read), from a landscape to a human body to a work of art. For the present essay I am interested in

verbal texts, but I want to leave open the possibility that the arguments surveyed in this project could be applied across other mediums. Literacy practices involve the translation and materialization of ideas into a communicable symbolic language (in writing) and the subsequent (and often concurrent) re-absorption of those ideas into consciousness (through reading). The term “literacy practices” highlights the interdependency between acts of reading and writing (Burgess & Ivanič, 2010; Fisher, 2004; Sutherland, 2005). Reading and writing are conceptually inseparable activities because they occur in continual, recursive interchange with each other. Writing depends on “being read,” even if the only reader is the writer herself, and reading depends on the existence of something “written.”

In fact, defining literacy practices as writing and reading is in some ways redundant because the writing process alone subsumes reading. Authors and scholars have segmented the act of writing into serial stages involving writing, reading, thinking, and evaluating. For example, one three-phased model defines writing in terms of what an author does to a text: “Prewriting” is collecting, connecting, and rehearsing; “writing” is drafting; and “rewriting” is developing, clarifying, and editing (Gallehr, 1994, p. 23). Another model prescribes a more general action plan for authors: “collect, focus, order, develop, and clarify” (Gallehr, 1994, p. 23). These two models depict a relatively literal representation of the various thoughts and actions involved in writing. A more metaphoric model, “Madman, Architect, Carpenter, and Judge,” captures the mental orientation (and perhaps emotional states) of authors in relation to phases of writing (Gallehr, 1994, p. 23). All of these models include multiple stages of problem-solving, physical activity, and emotional perception within acts of textual composition, and all of

these models presuppose continual reading and rereading. The writing process depicted here also is not necessarily linear, as each phase may occur multiple times.

Broadly defined, reading entails the internal absorption of ideas external to the self. During composition, an author may shift repeatedly to and from the “reader” position (Elbow, 1994, p. 13). The construction of a text depends on the author’s ability to “read” her own thoughts by envisioning, selecting, and translating inner sensations and ideas into verbal representations (Burgess & Ivanič, 2010). In evaluating and editing, the author repeatedly steps back from the text to perceive her narrative voice “speaking” back to her and to evaluate the message the voice communicates. The author may change the words to better match her desired emotional and informational content and then repeat the reading process. The re-absorption and evaluation of a message through reading taps a writer’s intellectual and emotional abilities. Not only might a writer check for grammatical and syntactical errors, but the writer also “draws upon [her] values, beliefs, interests, expectations, and sense of relative status” to construct an emotional relationship with the written message (Burgess & Ivanič, 2010, p. 250). This emotional relationship involves empathetic connection between the self and the ideas in a text.

Postmodern psychological and pedagogical theory places empathy at the forefront of the ability to learn, engage emotionally with, and incorporate into our awareness meanings that we might otherwise consider “other” to us. Drawing on definitions from psychotherapy and composition studies, Teich (1994) defines empathy as “tuning our emotions to the thoughts and feelings of other individuals as well as rationally understanding and articulating those thoughts and feelings” (p. 145). Psychoanalyst Heinz Kohut defines empathy as “the expansion of the self to include the other” (as cited

in Teich, 1994, p. 146). Empathy is fundamental to reading because empathy allows meanings to be shared, absorbed, and reformulated across distances of time and space between readers and writers. In bridging the difference between one's own world and the world of another, empathy enables readers to productively navigate the distance between a text and one's own mindset. Comprehension and empathetic connection demand paying active, sustained attention to the external message. The act of reading, either silently or orally, with attentive concentration and reflection creates space for a new relationship, a bond of "intimacy between the knower and the object of knowing" (Thomas, 1994, p. 102). This relationship can be seen as linking the self, or one's subjective consciousness, to an "other," the meanings conveyed to the self in the text. When a text is disseminated to audiences beyond the creator, new, non-authorial readers apply an interpretive process similar to the writer's. Each individual reads the work through the lens of her own unique emotional and intellectual abilities, predispositions, interests, worldviews, and sense of relative authoritativeness and agency (Burgess & Ivanič, 2010). The self-other connection enabled through reading is a critical component of the interaction between literacy practices and consciousness, which I explain in the second half of this chapter.

The next section explores various physical, mental, social, and material elements that converge to shape writing and reading in any given context. Just as consciousness operates across disparate subjective domains (physical, psychological, social), literacy practices depend on and influence many facets of human experience.

### **The Embodied Components of Literacy Practices**

The embodied processes associated with imagining, inscribing, reading, editing, and sharing texts are complex, multifaceted, and often entirely hidden from view unless

explicitly spotlighted (Ferrari, 2010; Hughes, Uhlmann, & Pennebaker, 1994; Miller, 1994). Some authors call the totality of these sensations the “felt-sense” of the text or the felt-text (Ferrari, 2010; Jordi, 2011; Miller, 1994). The felt-text is external to the written words but is, paradoxically, the site of much if not all of the textual meaning, as well as a range of auxiliary meanings. The array of lived emotions, physical actions, imaginings, and memories that populate the psyche intermingle to build meanings represented in texts and languages. Brazilian educator Paulo Freire observed that life, not language, brings intelligibility to texts. A proponent of understanding literacy as contextually constructed and dependent, Freire (1997) asserts that “it is impossible to access meaning simply through reading words. One must first read the world in which these words exist” (p. 304). Part of this “world” that gives text significance is located in the body. A complex physical and emotional substrate imparts meaning, coherence, and motivation to subjective textual experience (Fleckenstein, 1994; Miller, 1994). In particular, studies on integrated neural functions and the visual, kinesthetic, and autonomic aspects of writing and reading reveal the close interoperation of multiple physical and mental systems in literacy processes.

### **Brain Function**

Reading and writing engage the brain’s multiple capacities in uniquely integrated ways (Brand & Graves, 1994; Jacobs, 2010; Smyth, 1998). I use the term “integration” in its technical sense referring to the linkage of differentiated neural domains or regions in the brain (Siegel, 2009, p. 144). For example, the middle prefrontal cortex is an integrative area in the brain that links the cortex, limbic area, brainstem, and “interoceptive” input from the body (allowing us to perceive the interior world, such as

breathing) (Siegel, 2009, p. 144). Neural integration is a key determinant of an individual's experience of consciousness. The connections among the brain's various structures and regions enable us to acquire, associate, and assess perceived internal and external information. Literacy practices are also integrative in that they link together disparate perceptive mechanisms and mental processes (Jacobs, 2010).

Literacy practices require the coordination of linguistic, visual, kinesthetic, and emotional abilities as well as autonomic responses. Neuroscience since the 1880's has located language functions such as grammar, syntax, and phonology in the prefrontal cortex, specifically a region called "Broca's area" (Grodinsky, 2000; Novick, Trueswell, & Thompson-Schill, 2010). Language processing alone is useless, however, without the corresponding capacities to perceive, reproduce, organize, and analyze texts. Reading and writing require visual and spatial awareness to decipher linguistic symbols, convert language into pictorial (or tactile, as in Braille) images, and coordinate fine motor skills to produce these images in material form (Jacobs, 2011, p. 26). Connecting written symbols to meaning requires memory and emotion to mentally link words to whole messages and associate the message with one's social, discursive context (Brand & Graves, 1994). Sharing, critiquing, and revising texts engage our interpersonal abilities, empathy, and self-reflexive inner dialogue (e.g., Golz, 2011; Thomas, 1994). Aside from their obvious linguistic properties, literacy practices engage a multitude of non-verbal, non-cognitive, and non-rational ways of knowing and learning.

### **Visual Imagery and Emotion**

Visual imagery is a primary mode through which we experience external perceptions, emotional activity, bodily sensations, and thoughts in consciousness

(Damasio, 1994). In literacy practices, neural representations in consciousness often form mental “pictures” or images, rather than (or prior to becoming) words (Miller, 1994). These images incite and sustain emotional responses that affect our experience of texts. Miller’s (1994) study of the relationship between imagery and emotion illuminates the role of mental imagery in writer motivation, interest, distraction, and/or avoidance of writing. Participants received a writing task during which they were interrupted periodically to complete thought-sampling questionnaires that captured thoughts happening concurrently with the writing activity. Miller found that fully half of the random thought samples contained visual material either alone or accompanied by verbal activity. The self-reported imagery peaked midway through the samples and then receded to its former level, and the majority of images were vividly detailed. In extensive, standardized interviews following the writing sessions, students described their writing history, general attitudes and habits, and thought-sample and post-sample questionnaire responses. Miller found images to be a critical entry point to the writing process for many participants. Images link verbal texts to emotions and often also to memories, even if the images and emotions never appear in the text (Miller, 1994, p. 119). For some participants, images brought clarity, substance, and feeling to an otherwise remote and indistinct topic. Many students envisioned their subject matter in a dynamic first-person reenactment, or mental dramatization. Their internal, first-person performance “engaged [students] emotionally with embodied ideas” (Miller, 1994, p. 120). Strong images tended to recur and for some writers grant a sense of purpose and satisfaction in writing. For other writers, however, a strong visual and emotional experience profoundly distracted, angered, or saddened them so that verbal expression became difficult. Even

for a highly verbally-oriented student, the emergence of an emotionally-charged imagined scene temporarily obliterated her flow of words (Miller, 1994, p. 124).

Although literacy may appear a product of wordsmith-ing alone, Miller's example reveals that other mental capacities heavily influence the outcome of writing efforts.

A similar study examined more specifically imagery and emotion in the literacy practices of underprepared writers. Fleckenstein (1994) investigated the correlation between the ability of underprepared writers to evoke vivid mental images and the degree to which they engaged with texts by connecting emotionally with the subject and incorporating personal goals. Fleckenstein (1994) suggests that because imagery is a powerful anchor for ideas, plans, and information from disparate forms of knowledge including emotions (p. 126), increased visualization may assist in overcoming the anxiety, weak analytical thinking, and sporadic progress that often plague underprepared student writers (p. 125). Students completed questionnaires assessing their writing history and mental imagery abilities and then wrote personal journal entries that were assessed for emotional engagement. As expected, the study found that highly engaged writers (those that connected emotionally with the subject and incorporated their own goals in the task) showed higher imagery and emotion and were more likely to undertake frequent, self-initiated writing. High engagers who were high imagers also produced more elaborate self-reflective reports, whereas low engagers who were low imagers tended to provide few details. Unexpectedly, among some relatively low engagers, an increase in the strength and frequency of imagery caused engagement to decrease. This pattern was true especially for students who displayed strong imagery across a full range of sensory modalities. These results mirror Miller's (1994) observation that imagery and

emotion can be overwhelming and obstructive to the writing process in some circumstances. Fleckenstein (1994) suggests that the intensity with which these students mentally “re-live” an experience may drive them to disengage from writing because of emotional distress, fear of personal revelation, or heightened inability to match feelings to words (p. 130). Both Miller (1994) and Fleckenstein (1994) reveal links among literacy practices, mental imagery, and emotions that suggest a primary rather than peripheral role for the felt-text in writing and reading. For other writers, the visual component of literacy may work together with other embodied sensory processes such as touch and movement.

### **Kinesthetic and Spatial Components**

Although imagery may help to channel thoughts and emotions into meaningful linguistic patterns, for some individuals, imagistic (and verbal) mental processes fail to capture meaning sufficiently to translate ideas into a coherent written form. Instead, ideas sometimes find expression in kinetic (movement-based), spatial, and tactile forms (Ferrari, 2010; Klein & Hecker, 1994). Klein and Hecker (1994) experiment with using three- and four-dimensional representations of written tasks to help students organize and manipulate their thoughts prior to writing. Evidence suggests that these techniques are especially beneficial for individuals with Attention Deficit Disorder or who are strongly associational rather than sequential in their thinking (Klein & Hecker, 1994, p. 96). For these individuals, “holding or touching an object or moving our bodies through space appears to stimulate the flow of language” (Klein & Hecker, 1994, p. 90), which otherwise might remain halted, disorganized, and inexpressible as merely flat words. Students transpose verbal ideas either onto a tactile model (with blocks or pipe cleaners) or into a sequenced path that the student can physically walk. Using these techniques, a

once abstract, impalpable, and cluttered barrage of words can find concrete form; “ideas can’t ‘fly away,’” and students can literally see and feel how the pieces interrelate (Klein & Hecker, 1994, p. 97).

These investigations across diverse perceptive forms suggest that the logic and relationships among words entail varied perceptive and interpretive capabilities. Writing and reading incorporate functions from multiple physical and mental inputs to consciousness. We experience language and literacy not as merely verbal, static, or linear, but as multi-dimensional and dynamic visual, emotional, and physical events. In addition to conscious sensory processes, literacy practices also involve automatic, subconscious bodily responses that affect our most basic experience of texts.

### **Autonomic Reactions**

The integrative function of writing and reading extends to the unconscious processes that regulate our most basic, instinctual sensations. The processes of the autonomic nervous system usually operate “under the hood” of consciousness, as we have little to no volitional control over them, but autonomic reactions are no less influential in our experience of the world and in literacy practices. The responses of the autonomic nervous system guide our low-level sense of calm or excitement in experiencing a text. A study conducted by Hughes et al. (1994) evidences unconscious physiological changes that accompany the conscious imaginings and calculations of a writer. The study measured skin conductance level (SCL) and heart rate in writers on a word-by-word and phrase-by-phrase basis. SCL especially is associated with the biology of autonomic arousal, in which the brain supplies information *directly* to the body for behavioral, nervous, and chemical responses (Brand, 2000, p. 208). Mental imagery,

emotions, or perceived external stimuli can provoke autonomic responses that rouse or relax the body. Hughes et al. (1994) found that the great majority of participants showed significant changes in SCL correlated with particular aspects of writing, while very few participants showed a significant relationship with heart rate. SCL tended to decrease within each sentence, decrease when using positive emotion words, and increase when using negative emotion words. SCL also overwhelmingly decreased when subjects referred to an effect on themselves or significant others (Hughes et al., 1994, p. 578). Increases and decreases in SCL occurred at nearly equal rates for phrases containing insights or introspection, attributions of causes, or assessments of consequences, indicating a range of autonomic efforts entailed in these mental tasks. The participants were not aware of SCL changes, but the strong correlations indicate that the body's unconscious mechanisms actively shape and respond to literacy practices.

Verbal, visual, and spatial reasoning, motor activity, emotion, and autonomic arousal interact in complex relationships to produce and react to meaning in literacy practices. Evidence collectively reveals that reading and writing interact with physical and mental components that may remain entirely hidden from view and of which we may not even ourselves be aware. Through textual expression, the embodied, "felt" world that shapes a text enters the external world and connects with the social structures and beliefs that govern our embodied, subjective experience of reality.

### **The Social Relationality of Literacy Practices**

The previous discussion demonstrates that the author/reader's embodied physical and mental states affect a text, but the interpersonal contexts surrounding the text also shape writing and reading. Literacy practices occur in accordance with the material and

social conditions available to authors and readers in a given context, and often those conditions align authors and readers with particular personal and social identities (Burgess & Ivanič, 2010). Texts are socially embedded artifacts created and consumed by socially embedded subjects. By linking together readers and authors (and excluding non-readers and non-authors), literacy practices connect subjects in a web of social relationships and create new and shifting identities for those subjects. For example, the subject position of an author of a personal narrative constructs a social location replete with relational meanings and opportunities for the subject. The author of a personal narrative may identify as

someone whose experiences are worth recounting and reading; someone whose interpretations give meaning to mere events; someone who deserves a response; someone who is preserved into the future through written artifacts; someone who can be imagined, interpreted, and even revered through readings by others as well as the self. (Daiute & Buteau, 2002, p. 57)

This description suggests that the authorial subject position creates new social identities previously unavailable to the subject. These potential identities represent the author's access to new discursive possibilities. Recalling from my discussion of the socio-cultural domain in Chapter 2, discourses convey socially relevant meanings that shape consciousness. Literacy practices are means by which subjects access discourses and interact with discursively held knowledge and power.

The social power transmitted through discourses, shaping consciousness and one's sense of identity, also influences literacy practices. Discursively conveyed power may affect one's feeling of personal agency and access to resources within a society,

which in turn mediate interactions with discursive devices such as texts. Because texts are authored by individuals and groups with particular power and status positions, the knowledge and meanings conveyed in textual artifacts may reflect and possibly also mediate those positions. Readers who are differentially located within social status hierarchies may react differently to the power relationships communicated in textual messages and construct their own messages in alternative ways. Research on women's literacy practices makes visible some discursive discrepancies theorized to relate to multi-layered social positioning. For example, Karlyn Campbell's (1973; 1983; 2002) studies of nineteenth and twentieth century American feminist rhetoric have identified several unique characteristics of feminist women's writing and reading that she links to women's relative lack of personal and social power. The rhetoric of women's liberation diverges from traditional rhetorical practice in its concern for "personal exigences [*sic*] and private, concrete experience" and its aim for "particular autonomous action by individuals" (Campbell, 1973, p. 85). Farideh Goldin (2009) describes in detail the effect of Iranian Jewish women's doubly oppressed status on the form and content of their literary creations and reading practices (until recently almost exclusively achieved through oral tradition). Felicity Hand's (2011) exploration of writings by and about East African Asian emigrants during British colonialism similarly highlights the layered marginalization of women's voices:

Diaspora narratives have been almost totally concerned with men's exploits (...)  
If little has been written about the [East African Asian] as an individual, even less  
has been recorded about his wife's, mother's, daughters', or sisters' experiences,  
hopes, fears, or expectations in the diaspora. (Hand, 2011, p. 105)

Even subtle or temporary differences in one's sense of relative power, such as for composition students who consider themselves inferior writers, can influence one's engagement reading and writing. Burgess and Ivanič (2010) found that adults enrolled in college literacy classes often felt uncomfortable with the "student" identity, leading to outcomes in writing from timidity to hyper-exaggeration. These examples illustrate that social positioning (and identification with or resistance to one's positioning) influences literacy practices (Burgess & Ivanič, 2010, p. 232); gender intersects with ethnicity, class, religion, and other social status markers to shape textual artifacts and practices. The next section addresses a range of material conditions that shape literacy practices on broader cultural, geographic, and historical levels.

### **Literacy Practices and Material Conditions**

Saying that literacy practices are fully embodied implies that they depend on the situation or circumstances that the body (or bodies) partaking in literacy practices encounter. On both individual and social levels, reading and writing rely on the linguistic technologies environmentally and culturally available to authors and readers (Ong, 1977). Writers and readers must at least partially share the mutual systems of meanings that match words and symbols to definitions. Localized, historically specific standards, guidelines and techniques structure the message and medium of texts and ensure that the meanings are locally interpretable. For example, African and African American traditions emphasize the textual interrelation of oral, percussive, and artistic modes of language (Fisher, 2004; Wiredu 2009). Western traditions (since the European Renaissance) tend to emphasize the en masse reproduction and diffusion of mechanically printed texts and private contemplation of content (Ong, 1977). The modern emphasis on silent reading is

a relatively new phenomenon. Prior to the expansion of written literacy, the predominant modes of sharing texts were pictorial and architectural. Public gathering places and private homes housed paintings, sculptures, and other visual art forms that depicted shared cultural, moral, and political images and stories (Saenger, 1997).

The material conditions available to an author also include multiple writing preferences, such as times, places, speeds, rhythms, tools, and technologies; desired conditions such as noise and light; and ways of collaborating or working independently. Textual factors include length of continuous composition, familiar genres, ways of dividing text and phrases, selection of vocabulary, grammar, and syntax, and capitalization and punctuation practices (Burgess & Ivanič, 2010). Personal and cultural norms differentially shape these intimate details for authors depending on the material cultural context. Black feminist author bell hooks (1989) notes that Black women's fiction displays some similarities in "subject, geographical location, use of language, character formation and style" (p. 145) possibly owing to a number of contextual and individual factors. hooks (1989) suggests that Black women face similar experiences of sexism and racism that influence their writing; they may pattern work after writers who have successfully made a living from writing; and they may prefer to write what has so far proved acceptable to the reading public (p. 145). In response to these observations hooks seeks to challenge the confining cultural conventions that appear to limit Black women's (and other groups of writers') creative productions. She encourages Black women to continue to write to express their authentic voices despite discrimination and "even when we are worried sick about finances and job pressures" (hooks, 1989, p. 147). hooks (1989) also observes that the material issue of *time* impinges on the writing process and

product; “having time to write, time to wait through silences, time to go to the pen and paper or typewriter when the breakthrough finally comes, affects the type of work that is written” (p. 145). Time is often an outcome of the author’s financial security and allotted physical space. hooks (1989) admits that she was most freely able to mature as a writer when she lived at home and her family supported her economically and relieved her of domestic chores (p. 144). Similarly, Virginia Woolf’s (1929/1998) landmark work *A Room of One’s Own* argues for women’s economic liberation as a pathway to their intellectual production:

Intellectual freedom depends upon material things. Poetry depends upon intellectual freedom. And women have always been poor, not for two hundred years merely, but from the beginning of time. Women have had less intellectual freedom than the sons of Athenian slaves. Women, then, have not had a dog’s chance of writing poetry. That is why I have laid so much stress on money and a room of one’s own.... (p. 141)

In Woolf’s view, women’s economic security and intellectual growth ultimately benefit the intellectual voice of humanity by expanding the range of voices that contribute to the literary “I.”

hooks also seeks to uplift under-represented voices, but she argues that as women gain the economic and physical conditions conducive to writing, women bear the responsibility to express authentic voices, even if their voices challenge hegemonic prescriptions. hooks (1989) enjoins Black women to move their own perspectives from the margins to the center of feminist discourse, explaining that “the language we choose to use declares who it is we place at the center of our discourse” (p. 15). If Black women

consider their audience (Black men, White women, White men, etc.) to have a position of higher social authority, they will speak with non-authentic fear and deference (hooks, 1989, p. 15). hooks (1989) illustrates her argument with a personal example of transforming “consciousness and being” (p. 15). When seeking to publish her major work *Ain't I A Woman*, hooks confronted the question of power in her own linguistic choices and authorial stance. Her internal struggle and reconsideration of her authorial identity ultimately enabled her to re-write and publish *Ain't I A Woman* with an authentic, empowered voice. Woolf's and hooks' arguments illustrate some of the ways that material cultural conditions influence how diversely identified women authors may inscribe and share knowledge and meanings through texts.

### **Literacy Practices as Change Agents of Consciousness**

The first part of this chapter explored several dimensions of experience – physical, mental, sensory, interpersonal, and historical – that converge in instances of reading and writing. Literacy practices draw on all of the interconnected knowledges that shape a person's subjective view of reality, “mediat[ing] between the writer's inner self and the world the self inhabits” (Allen, 2000, p. 283). Acts of reading and writing also constitute artifacts of the material and cultural ingredients that shape one's ability to produce, comprehend, and share textual creations (Brand & Graves, 1994; Burgess & Ivanič, 2010; Ferrari, 2010). These observations put literacy practices in direct correspondence with the factors that influence consciousness. Although I have already suggested some contours of the relationship between consciousness and literacy practices, in this section I explore how literacy practices serve as change agents of consciousness. The scholarship that I present in this section identifies two forces that

underpin the dynamic interplay between literacy practices and consciousness: *distance* that enables experimentation and *identification* or *assimilation* that enables new connections to form. Written artifacts remain discursively “alive” in continual cycles of separation, absorption, and renegotiation of meaning in consciousness and textual production (Ong, 1977). The purpose of this section is to lay the groundwork for my later arguments on healing change outcomes.

### **Distance and Experimentation**

Writing pushes consciousness into a liminal, transitional space where an author can observe the fruits of her mental labor from a critical distance (Allen, 2000; Nye, 2000; Warnock, 2000). Although consciousness is not captured fully within any textual artifact, writing separates and systematizes conscious thought from its “unconscious roots,” allowing us to “park” knowledge outside the body and present sensibility (Ong, 1977). The term “heterochronous” describes material objects that link events and processes taking place on different timescales (Burgess & Ivanič, 2010, p. 233). Most written texts are heterochronous because they have the capacity to persist in time far beyond the act of creation. The writer manipulates words to fit her moment-to-moment intentions, but the final product endures beyond its conception, allowing words to “stay behind” as the author’s thoughts and experience continually evolve. Once cleaved from her mental soup, an author may examine the written production across a new physical and temporal distance. This separation grants the author time for emotional and intellectual consideration of voiced and hidden thoughts. The author may be able to confront, (temporarily) possess, and build on previously inexplicit, unarticulated experience (Ong, 1977, p. 212). As a result of neural links between the prefrontal cortex

(the seat of conscious awareness) and the brain's memory structures, texts may remain active in a reader's consciousness over days or a lifetime. Events in a text may trigger memories of life events just as real experiences may trigger memories of textually encountered scenarios. Even as the words remain immutably printed, glue hardens, and pages yellow, the act of reading always brings a text into the present moment and into contact with all of the intersecting factors that construct consciousness in that moment, enabling a continual recirculation and reconsideration of thoughts and ideas.

The distancing and revisiting of a text allowed through the insertion of time and space provokes changes in conscious experience. Writers and readers acquire new knowledge by beholding, interpreting, and manipulating the representations that they construct in writing (Nye, 2000). Written artifacts may closely correspond to one's imagined ideas, or they may surprise, disappoint, or confuse the reader. No matter how one responds to a text, how familiar or far-fetched its meanings appear in relation to one's reality, engagement with the text allows writers and readers to see both their distance from and potential connection to external knowledges. They can assess and choose what to discard and what to keep. In some views, writing and reading permit engagement in an experimental form of reality; Warnock (2000) suggests optimistically that writing and reading challenge individuals to "live other lives and try things out symbolically, so that we can make better decisions about what we value and do" (p. 51). On paper, writers and readers see that "perceptions and actions are changeable, as words are revisable" (Warnock, 2000, p. 47). Composing, considering, rewriting, and discarding possible standpoints in symbolic space is an ongoing process of learning new ways of being and acting in the physical and social worlds. In some cases, authors suggest that

this cleavage may help us to “see life differently and hence act differently” (Warnock, 2000, p. 47).

Writing also creates a space to experiment with possible variations of identity within a social and cultural context. In literacy practices, representations of identity literally are penned, examined, and revised; unwanted pieces are excised; and new, unexpected components emerge. Experience and ideas are projected into a transitional, dynamic, and even “playful” place (Allen, 2000). Stepping into this space of flux and uncertainty requires risking the loss of a previous conception of identity, but the losses are “neither inevitable nor irreversible” (Anderson, Holt, & McGady, 2000, p. 61). In naming, inscribing, telling, and retelling stories, the writer’s formulations of self and the world gain depth, complexity, and fluidity as authors “chip away at the excess and fill the empty spaces and explore the silences” between words and meanings (Anderson et al., 2000, p. 62). All of this change and revision is made possible by the physical and symbolic distance that writing interposes between consciousness and its written representations.

### **Identification and Reformulation**

Although literacy practices insert distance between the author and a textual artifact, reading and writing also promote dialogic interaction and new connections. Kenneth Burke, a literary critic and philosopher throughout the mid to late twentieth century, pioneered the idea that reading and writing promote *identification* among authors, ideas, and audiences. “Identification” in Burke’s view is a process of emotional attachment or engagement that (at least, temporarily) bridges the distance between the text and the reader. According to Burke (1976) “we come to ‘identify ourselves’ with

various groups, movements, relationships” through our interactions with the symbol systems, including language, that impart meaning to those identities (p. 65). Texts convey meanings with which readers positively or negatively identify, or connect emotionally. Readers relate meaning in a text to their own experience and evaluate ideas from within their realms of understanding. Burke uses the term “rhetoric” to capture the connection between emotion, identification, and meaning in literacy practices. For Burke (1976), a text is rhetorical if it provokes an emotional response leading to reader identification (or dis-identification) with the meanings contained in the text. Writing, as rhetorical, *persuades* audiences to engage with a text by tapping into some facet of the reader’s experience and presenting ideas with which the reader can at least partially relate emotionally (Warnock, 2000).

Feminist scholar Elspeth Probyn (2005) considers the felt, bodily components of emotional identification or rhetoric. Probyn (2005) describes the relation between writing and reading as a process provoking a concrete, bodily change that “makes us feel, write, think, and act in different ways” (p. 137). The purpose of writing is to *interest* the reader, to provoke an emotional stimulation that alters the reader beyond the cerebral sphere of language and thoughts. Not all *interesting* writing provokes enjoyable responses, however. Probyn acknowledges her own physical and mental exhaustion from the pain of drafting a book on shame, including a chapter on shame and writing. Probyn (2005) argues, “Writing affects bodies. Writing takes a toll on the body that writes and the bodies that read or listen” (p. 140); this toll is the source of interest and meaning in texts.

Burke (1976) and Probyn (2005) emphasize that emotional engagement provides a framework to understand the negotiation and assimilation of knowledge and meaning

across the border between the self and the world. Because (as I explored in Chapter 2) consciousness is “situated” and specific to individuals and cultures, any narrative rendition no matter how “objective” will convey a historically and contextually biased viewpoint and message. Texts inherently contain gaps between the author and the subject matter, the knower and the known. Even in giving an account of one’s own life – a first-person report that would appear to have all the experiential “facts” – the authorial “I” cannot fully tell one’s own story (Butler, 2001). The narrative voice is always already partial, unfinished, and fallible because it is restricted within an embodied subjectivity (Goltz, 2011). As I mentioned in the first section of this chapter, the act of reading entails making an empathetic connection that bridges the gap between the self and an “other.” Identification is a name for this bridging process. Once released into the social sphere, the story of an “I” becomes also the story of the friends, colleagues, and critics who interpret the text through the lens of their own experience (Goltz, 2011). The text pulls them in, invites them to understand, identify with, and apply ideas to their own worlds. As Probyn (2005) suggests, a text may deeply penetrate bodies and minds to provoke profound outward changes as a result of inner affect. Maya Angelou (1969/1997) alludes to the idea of deep affective identification when she praises the words of Black authors who captured and transmitted the sentiment of African American experiences through time and collective memory:

Oh, Black known and unknown poets, how often have your auctioned pains sustained us? Who will compute the lonely nights made less lonely by your songs, or the empty pots made less tragic by your tales? (...) We might raise monuments and sacrifice to the memories of our poets.... It may be enough, however, to have

it said that we survive in exact relationship to the dedication of our poets (include preachers, musicians, and blues singers). (p. 180)

For Angelou (1969/1997), the ability to identify with a community of ideas through verbal poetry does not just create a feeling; the affective bonds in literacy practices sustain lives.

Identification is not a totalizing act, but rather a process of selective absorption, assimilation, reformulation, and/or rejection of ideas. Neither the author's nor the reader's identification with a text can be absolute or final, but the text must provoke some degree of association in order to be understood. It is in this incomplete connection, this space of uncertainty and negotiation, wherein lies the possibility for the reformulation and evolution of meanings (Burgess & Ivanič, 2010). The interaction of a reader with a text creates an emotionally charged space of potentiality in which reader consciousness shifts and fluctuates in response to the emotional pull of the text. Probyn (2005) exhorts the reader and writer, "Let yourself go!... You will come out metamorphosed, filled with questions... and more human" (p. 136, citing Tobie Nathan). By provoking connection and assimilation between individual awareness and externally held meanings, literacy practices allow consciousness not only to "read" meanings, but also to participate in the social evolution of those meanings.

The co-evolution of texts and meanings occurs in literacy practices through the production and circulation of "living" artifacts of consciousness (Freire, 1997). Although written words may not alter over time, the particular circumstances that lead to their creation change constantly, and the subject positions of the "self" that reads a text shift in relation to ongoing experience. Writing and reading operate in a dynamic space of flux

and possibility that incorporates processes of both separation and re-incorporation. Putting a message into writing creates the possibility for confrontation, dialogic interaction, and reintegration. The persistence of texts across time and space also presents unique potentialities for widespread social reception and reformulation of meaning. The evolution of meaning is a transformation of consciousness because it is a transformation of the ideas that govern our experience of “reality.”

### **Conclusion**

In this section I have defined literacy practices – reading and writing – as complex and integrative physical, mental, social, and material processes. Literacy practices integrate multiple ways of knowing and learning, interlacing the brain, body, and mental circuitry in complex ways. Literacy practices also depend on the specific social and historical circumstances in which they occur. Reading and writing enable individual consciousness to participate in the production, assimilation, and evolution of meaning in texts. Texts remain alive in the continual interaction and renegotiation of meanings across spaces of difference, and consciousness expands and shifts to accommodate new patterns and possibilities of being. Literacy practices function as an entry, outlet, and transformative tool for consciousness.

The goal of this chapter was to establish a detailed understanding of writing and reading as dynamic, transformative processes distinct from non-literary modes of communication. In following chapters, I develop a model of healing and explore accounts of women’s healing literacy practices within the tripartite conception of consciousness

## Chapter Notes

<sup>1</sup> Some authors include *speaking* in the definition of literacy practices (Fisher, 2004; Sutherland, 2005), but in the present project I limit my focus to Burgess & Ivanič's (2010) narrower definition comprising reading and writing. I view speaking as a communicative form that may or may not arise from literacy practices. In conditions where speaking indicates what hooks (1989) calls "gaining voice," speaking represents an outgrowth of literacy practices.

## CHAPTER 4

### A MODEL OF HEALED CONSCIOUSNESS

This chapter examines healing in response to a model of traumatized consciousness. Drawing from the recent surge of interest in trauma and trauma theory in the humanities and social sciences, I determine a definition of trauma that serves as the basis for a concomitant model of healing. The interdependent components of my model of healed consciousness include building *connections* and alleviating self-other antagonisms, being *open* to change and dialogic interaction, and cultivating a sense of *agency* to catalyze change. I show how these themes circulate in feminist scholarship and activism, and then I explore how these same themes arise in models of healing across the physiological, psychological, and socio-cultural domains of consciousness. My discussion serves as the basis for an investigation in Chapter 5 of the ways in which literacy practices are thought to heal traumatized consciousness.

#### Defining Trauma and Healing

The term “trauma theory” was coined by Cathy Caruth in her 1996 monograph *Unclaimed Experience: Trauma, Narrative, and History*, which, along with her edited collection *Trauma: Explorations in Memory*, is now considered a seminal text of trauma research in the humanities and social sciences (Radstone, 2007, p. 10). Judith Herman’s *Trauma and Recovery* (1997) and Felman and Laub’s *Testimony: Crises of Witnessing in Literature, Psychoanalysis, and History* (1992) provided additional theoretical fuel to stoke a movement in trauma-informed explorations of consciousness, particularly in literary criticism and writing pedagogy. Poets, authors, historians, literary critics, and teachers of writing produced a frenzy of full-length books and collections on trauma,

healing, and the writing process including *Writing as a Way of Healing: How Telling Our Stories Transforms Our Lives* (DeSalvo, 2000), *Writing and Healing: Towards an Informed Practice* (Anderson & MacCurdy, 2000), and *Writing History, Writing Trauma* (LaCapra, 2000). Feminist authors embraced the trauma metaphor to explore the experiences of women and oppressed groups in works such as *Signifying Pain: Constructing and Healing the Self* (Harris, 2003) and *Shattered Subjects: Trauma and Testimony in Women's Life-Writing* (Henke, 2000). Trauma theory arose within an academic context heavily influenced by deconstruction, poststructuralism, and psychoanalysis, as well as U.S.-based clinical work with survivors of events designated as “traumatic” (Radstone, 2007, p. 10). The Holocaust stands at the forefront as the “paradigmatic event of unspeakable human suffering” of the twentieth century (Miller & Tougaw, 2002, p. 3), and much trauma-based work derives from studies concerning the Holocaust. Beyond this foundation, however, trauma theory in the humanities and social sciences seeks to explore how understandings of traumatic occurrences may apply across a broad range of personal and cultural contexts. According to one definition, trauma theory includes “both work around the experience of survivors of (...) catastrophic personal and collective experiences and the theoretical and methodological innovations that might be derived from this work and applied more generally to film and literary studies” (Radstone, 2007, p. 11). Relevant to my interest in consciousness and healing, trauma theory has proved useful in exploring interrelated ideas of representability and rupture, the role of testimony and witness, the function and types of memory, and the structure of the mind and potential for transformations of awareness (e.g., Fiandt, 2006;

Johnson, 2000; MacCurdy, 2000; Miller & Tougaw, 2007; Obourn, 2005; Penn, 2001; Quiney, 2007; Tougaw, 2007).

### **Trauma and Women's Studies**

In the decades following the Vietnam War and the second-wave feminist movement in the United States, outspoken protest against violence that women face at home and in public places has elevated interest in understanding the effects of many forms of violence from women's and feminist perspectives. As Herman (1992) explains,

Only after 1980, when the efforts of combat veterans had legitimized the concept of posttraumatic stress disorder, did it become clear that the psychological syndrome seen in survivors of rape, domestic battery, and incest was essentially the same as the syndrome seen in survivors of war. (p. 32)

The 1993 United Nations (UN) Declaration on the Elimination of Violence against Women, the passage of the U.S. federal Violence Against Women Act in 1994, and the prioritization of ending violence against women and girls at the 1995 UN Fourth World Conference on Women (UN, 1995) buttressed a surge of U.S.-based and international scholarship on women and violence across many disciplines. This new interest coincided with the growth of psychological trauma research and theory. Correspondingly, trauma became a major entry point for research across many avenues of feminist scholarship, including transnational feminism, feminist psychology and therapy, feminist law and policy studies, and feminist arts and literature. Inger Agger's work takes a social sciences approach to addressing trauma in the lives of vulnerable populations such as women refugees and victims of war and state terrorism. Agger's (1994) interdisciplinary, ethnographic study *The Blue Room: Trauma and Testimony Among Refugee Women: A*

*Psycho-Social Exploration* explores trauma and treatment through data collected in interviews with refugee women from the Middle East and Latin America.

### **Trauma Criticism**

Along with the rising application of trauma theory have come criticisms of trauma theory's failings. Critical work highlights that trauma research is not immune to the ethical ambiguities and political biases inherent in intellectual endeavors generally. A "complex interweaving of scholarly, academic, political and psychical imperatives" (Radstone, 2007, p. 25) drives the allocation of priorities and resources which in turn may affect research outcomes. Characterizations of trauma, its inclusions and exclusions (i.e., which subjects and situations are labeled "traumatic" and which are neglected), and the distribution of power in trauma recovery scenarios (conferring substantial power to the "empathetic listener" and receptive community) are just a few points of controversy against the rising popularity of applied trauma theory (Miller & Tougaw, 2002; Obourn, 2005; Quiney, 2007; Radstone, 2007). In Chapter 6, I make my own contribution to critiques of trauma discourses, but nonetheless, the framework of psychological trauma has such widespread academic and cultural recognition that it remains useful for constructing definitions of healing and well-being, as I do in the present chapter.

### **A Working Definition of Trauma**

The evolving and controversial arena of trauma research necessitates a brief introduction to develop a working definition of trauma. The relatively recent birth of "trauma" in psychiatric literature since the Vietnam War and its continued and contested expansion to other academic arenas and in popular culture attests to the socially mediated nature of trauma as a concept. Trauma is a socially constructed attribution to an event that

is expected or observed to inflict certain effects on individuals and societies. Any definition of trauma must be seen as an approximation at best and must be considered along with the context of who is providing the definition with what motivation. As Burstow (2003) illustrates, feminist efforts have significantly altered understandings of trauma by integrating the impact of social location, including traumatized groups previously excluded, reframing “symptoms” as “coping skills,” emphasizing the role of witnessing and *testimonio*, and critiquing androcentric psychiatric models (p. 1295). It is beyond the scope of this paper to elaborate the multiple controversies and political struggles surrounding trauma definitions. Rather, I draw from a sampling of definitions currently in use that I determine capture the primary aspects of the subjective experience of trauma. The understanding of trauma that I present here evolves from my acknowledgment of the political implications at stake in laying out a definition of trauma, my desire to remain faithful to definitions currently used in the humanities and social sciences (and particularly Women’s Studies), and my primary aim to provide a definition sufficient to lay the groundwork for my continuing discussion on healing. I take the position that trauma occurs both on an individual level and at the level of communities, including global and ecological communities (of which humans are part). My definition is based on the subjective implications of trauma but refrains from narrowly delimiting the source of trauma’s effects.<sup>1</sup>

To begin, trauma is based in the experience of the subject. Briere and Scott (2012) make this point in their intentionally simple working definition of trauma. They define an experience as traumatic if it is “extremely upsetting and at least temporarily overwhelms the individual’s internal resources” (Briere & Scott, 2012 p. 4). Trauma can result from

an experience that is emotionally painful, distressful, or shocking and which may result in lasting physiological, psychological, and social effects; however, what puts one at risk for experiencing trauma is not necessarily the nature of the threat itself, but rather the inadequacy of one's internal and external resources to cope with the experience (Briere & Scott 2012; MacCurdy, 2000; Mejía, 2005). I highlight this distinction as part of the political project of this paper. A feminist approach seeks not to place blame or responsibility on the "traumatized" subject but rather to maximize the variety of causes and circumstances that may contribute to the experience of trauma and to maximize the possibilities for mitigating trauma's effects across the physiological, psychological, and socio-cultural realms.

Primary aspects of the experience of trauma as identified by feminist researchers in the humanities and social sciences include a sense of rupture, breakage, and alienation; a shutting down, closure, or obstruction of forward movement; and a feeling of helplessness and loss of control. These characteristics do not arise in isolation of one another but interact in complex ways for each individual. For example, Quiney (2007) describes the experience of motherhood as a traumatic "site of feminine wounding and loss" that is "unrepresentable" in the context of anti-feminist, neoliberal, Reaganite America (p. 32). Mothers face "intense, infantile helplessness and ambivalence, (...) loss of social status, isolation," and the inability to express their experience within a supportive community (Quiney, 2007, p. 36). Miller and Tougaw (2007) describe trauma as "something that breaks through the subject's protective shield" (p. 7), surpassing or shattering the boundaries of consciousness. The trauma is an "overwhelming, incomprehensible, and formless" intruder, occupying consciousness in a seemingly

inexpressible form (Miller & Tougaw, 2007, p. 7). Emphasizing the stripping of subjective power inflicted by trauma, Herman (1997) asserts, “Psychological trauma is an affliction of the powerless (. . . .) Traumatic events overwhelm the ordinary symptoms of care that give people a sense of control, connection, and meaning” (Herman, 1997, p. 33). In her genealogy of trauma, Ruth Leys notes the “gap or aporia in consciousness and representation” (p. 266) apparent in scholarly characterizations of trauma.

Based on these descriptions of trauma across the humanities and social sciences, my model of trauma comprises an experience of profound *rupture and loss*, enforced *closure and stasis*, and a feeling of *helplessness and vulnerability*. In circumstances producing trauma, consciousness is shattered or overwhelmed by an external force that is perceived to be an immitigable threat to the self and/or the world of the self. The result of this breakdown is a silencing and sequestering of the self or parts of the self. The themes of rupture, closure, and powerlessness that characterize trauma provide a backdrop for the model of healing that I outline in the next section and then explore across the three domains of consciousness.

### **A Model for Healing**

In response to a picture of trauma comprising rupture, closure, and powerlessness, an antidote to trauma includes *connection* and wholeness, *openness* to interaction and movement, and renewed *personal agency*. Characterizations of trauma resilience in feminist scholarship in the humanities and social sciences identify these three components and capture some of the complex interactions among them.

Connection is defined in a holistic sense as “a personal and collective or communal wholeness” (Nye, 2000, p. 391) characterized by a deep sense of unity,

integrity, and compassionate humanity (Fiandt, 2006). Openness, leading to the literal and metaphoric breaking of silences, enhances both connection and agency (Fiandt, 2006; Penn, 2001; Quiney, 2007). Anderson and MacCurdy (2000) define healing as the transformation from a rigid, silent, and isolated self “to a more fluid, more narratively able, more socially integrated self” (p. 7). Penn (2001) posits the restoration of one’s voice(s) in dialogue with a receptive “other.” Similarly, Quiney (2007) describes the idea of “struggling to rearticulate herself as a subject (...) to restore the silenced mother to discourse” (p. 35). Fiandt (2006) describes healing in women’s activist narratives as “a lifelong search for wholeness” that coincides with an “awakening of socio-political consciousness” (p. 569), linking motion to connection to agency. Viewing the self as continually in construction and therefore “revisable” inspires greater self-confidence, acceptance of difference, and a greater sense of control (Warnock, 2000). Processes of healing also involve the confrontation and assimilation of that which was psychically barred by trauma, usually a source of profound fear or hatred. Gilbert (2002) describes her need to confront her greatest fear “precisely because in order to stand the pain of my loss I had to strive to stand *up* to the pain and loss, strive to *withstand* them by looking at them” (p. 265, emphasis in original).

From an alternative perspective, individuals who more readily may deflect or recover from trauma display characteristics mirroring the model for healing. Herman (1997) shows that in studies of diverse populations “stress-resistant individuals appear to be those with high sociability [connection], a thoughtful and active coping style [open to change], and a strong perception of their ability to control their destiny [agency]” (Mejía, 2005, p. 31, citing Herman, 1997).

In this section I have outlined models of trauma and healing based (primarily) on feminist scholarship in the humanities and social sciences specifically related to trauma and trauma theory. In the following sections, I elaborate and validate the model of healing by exploring perspectives from outside of trauma theory – first, from diverse feminist frameworks and, second, from physiological, psychological, and socio-cultural research spanning the domains of consciousness. I show how the coordinates of healing – connection, openness, and agency – arise consistently throughout multiple disciplines, even outside of trauma studies. These coordinates also mark the relation between literacy practices and healed consciousness, the subject of Chapter 5.

### **Feminist Trauma and Healed Consciousness**

Feminism in the United States exists amid a storied history of the conflicts, fracturing, repair, and renewal of a community striving to unite in its diversity. Emblematic of the tensions within feminism, the consciousness-raising groups that arose during the second-wave feminist movement faced criticism for their tendency to divide women as much as bring them together. Despite their widespread success as an experiment in radical democracy, consciousness-raising groups sometimes overemphasized unity and downplayed power and status differences among women. Consciousness-raising groups tended to exclude (arguably a majority of) women who were not White, affluent, highly educated, and heterosexual (Dever, 2004; Keating, 2005). Reveling in a newfound “sisterhood” based on ideals of unity and equality, women in consciousness-raising groups sometimes failed to engage in critical self-examination of how *women*, not only men, are complicit in the oppression of women (Dever, 2004). Neglecting to challenge power hierarchies among women caused rifts and

wounds in the feminist movement that exposed the need for new, more inclusive approaches to feminist consciousness and practices.<sup>2</sup>

Feminist models of changed consciousness responding to second-wave consciousness-raising groups illustrate how a healing process within individuals intersects with the healing and uplift of a community in resistance to both internal and external traumas. The critiques of women-of-color feminists, post-colonial feminisms, and queer theory addressed many of the insufficiencies of second-wave consciousness-raising and introduced new models for healing personal and social divisions with a more inclusive focus. In the following sections I explore a few examples from feminist thought regarding modes and pathways to achieving empathetic connection, openness to embrace change, and increased agency to achieve change in individuals and communities. In the context of feminist identification and activism, healing represents a journey toward self-valuation, self-definition, and personal and collective self-assertion. A changed sense of self and identity is a necessary birthplace of empowered communities.

### **Black Feminist Consciousness**

Consciousness is a critical component of Patricia Collins' (2009) exploration of Black women's struggle for personal and social freedom. Collins examines how Black women's consciousness can be a source of liberation, comfort, and motivation against conditions that aim to confine them. Collins' analysis weaves together themes of connection to and love of the self, dialogic engagement, and personal agency as threads in a mutually dependent and reinforcing pattern for positive change. Black women's journeys toward self-discovery and empowerment are part of the struggle to "make a way out of no way" (123), to replace internalized oppression with a liberated, self-defined

consciousness. Although changed consciousness at a collective level can encourage people to visibly change the conditions of their lives, Collins (2009) asserts that change that occurs “in the private, personal space of an individual woman’s consciousness” is not only possible, but indispensable to personal and communal survival:

Any individual Black woman who is forced to remain “motionless on the outside,” can develop the “inside” of a changed consciousness as a sphere of freedom. Becoming personally empowered through self-knowledge, even within conditions that severely limit one’s ability to act, is essential. (p. 129)

The conscious mind can be a sanctuary of freedom, especially when all other conditions are beyond one’s power to alter. Under a matrix of intersecting oppressions, a silent, internal sphere of resistance constituting the assertion of the self may be a woman’s sole site of healing transformation.

The journey toward personal healing, freedom, and empowerment begins with the connection established with the self through dialogic interchange, internally and with the world. Collins distinguishes between dialectic and dialogic relationships in her examination of pathways to change. In a *dialectic* relation, two opposing positions are bound together in a mutually co-dependent struggle against each other as counter-forces; in a *dialogic* relation, entities are mutually supportive and work together to grow and inform one another (Collins, 2009, p. 25, 34). Collins’ model of transformed consciousness depends on a *dialectic* relationship between oppression and the internal struggle of thought and feeling that initiates a personal journey toward activism. Oppression is the counter-force against which the self must define its path.

I am more concerned with the internal dialogue that enables that self-definition. I use the term “dialogue” in the sense of a conversation or exchange of ideas that leads to mutual understanding; dialogue is possible even between opposed parties if the will and means are present and conducive. Dialogue describes how one’s knowledge of the self and world changes as a result of ongoing experience. One’s internal dialogue, constantly interpreting the self and the world, shapes our internal relationship with the self, which in turn shapes how we operate in the world. Dialogue enables the creative generation, honest evaluation, and also the “letting go” of ever-shifting knowledge. According to Collins (2009), a Black woman’s capacity to change her situation begins in private reflection and developing individual self-knowledge. A woman’s internal judgment can consider the disparities and contradictions between the controlling images surrounding her and the reality of her life experiences. Through dialogic questions and answers in consciousness, she can rearticulate her situation, put a name to the face of her oppressors, and shape a new identity using a self-constructed framework that resists external control.

In Collins’ view, dialogue is a means to connect to the self to others, and these new connections encourage new personal agency. Given the opportunity, Black women construct additional safe spaces beyond individual consciousness to express themselves and foster personal and collective empowerment. Collins (2009) identifies the spaces of relationships with other Black women, blues music, and Black women’s writing as arenas for self-definition that persist outside of the self. These shared spaces can activate and strengthen transformations of consciousness, but Collins (2009) also stipulates that the existence of these outlets depends first on the internal desires of the participants. “A critical mass of individuals with a changed consciousness can in turn foster Black

women's collective empowerment" (Collins, 2009, p. 129); however, the reverse may also be true that if too few women seek a self-derived standpoint, then collective action will be ineffective or even nonexistent. Internal recognition of oppression and self-definition in opposition to dominant forces are critical first steps.

New meanings and interpretations to resist oppression arise in consciousness even when one's options for external expression are limited. When socially constructed barriers aligned with gender, race, class status, and other facets of identity impose a seemingly crushing web of oppressive forces, Collins' argument allows for healing and freedom to exist in individual consciousness. The processes of inner connection, self-valuation, and self-definition allow women to psychologically transcend the traumas imposed by dominant, oppressive ideologies and controlling structures.

### **Mestiza Consciousness**

Gloria Anzaldúa's concept of *mestiza consciousness* represents a powerful model for healing that proposes embracing multiplicity and indeterminacy in consciousness. The experience of the *mestiza* is to receive multiple, often opposing messages, which cause an internal "cultural collision" (Anzaldúa, 1987/2010). The collision leads to a defensive counter-stance that refuses to accept the simultaneous existence of both (or many) cultural worlds. *Mestiza consciousness* is a remedy for the stalled and reactive trap of the defensive counter-stance. On a personal level, mestiza consciousness represents a state of confluence and fluid transference among multiple cultural and spiritual ways of being; on a cultural level, this new consciousness represents seeing clearly the relationship between the oppressor and the oppressed, revealing and detaching oneself from the fictions that

allow social oppression and domination to persist (Anzaldúa, 1987/2010). The *mestiza* makes a

conscious rupture with all oppressive traditions of all cultures and religions (...)

She strengthens her tolerance (and intolerance) for ambiguity. She is willing to share, to make herself vulnerable to foreign ways of seeing and thinking. She surrenders all notions of safety, of the familiar. (Anzaldúa, 1987/2010, p. 258)

Mestiza consciousness surpasses artificially imposed dualities and dichotomous (mis)representations, turning contradictions into a new, generative space (Anzaldúa, 1987/2010; Licona, 2005). The *mestiza* brings together the “splintered and disowned parts” of an identity, (Anzaldúa, 1987/2010, p. 261); she embraces with open arms the messy multiplicity of all of the parts that make up the individual and communal selves without denying or dissolving difference.

From the perspective of the *mestiza*, consciousness is full of unnatural borders—discursive borders that we create for ourselves and impose on others and that shape people’s lived experience (Anzaldúa, 1999). These borders encompass notions of a single, essential “self” defined in opposition to a single, essential “other.” Central to an understanding of healing from Anzaldúa’s feminist viewpoint, then, is the expansion or liberation of consciousness from the confines of a falsely dichotomous, broken construction of the self and the world. In the historic and contemporary United States, these confines include constructions of Whiteness, heterosexuality, U.S. citizenship, Christianity, middle class status, and male gender, among others, as the default norm or “self” against which “others” are defined (Jaggar, 1989; Rowe, 2005). Healing from the ruptures created by these borders begins with subjective consciousness loosening its grip

on the need for one “True” version of “reality” and fearlessly exploring the plurality beneath the unifying façade. The mestiza “learns to transform the small ‘I’ into the total Self” (Anzaldúa, 1987/2010, p. 258) by breaking down paradigms, straddling borders, and synthesizing without erasing (p. 256).

### **Coalitional Consciousness**

Drawing inspiration from *mestiza consciousness*, the theory and practice of coalitional consciousness constructs a system of healed feminist consciousness based on engaging whole-heartedly with difference. *Coalitional consciousness-building* is a process to honestly acknowledge, navigate, and build on diversity as a source of strength for progressive personal and collective transformation (Keating, 2005). Coalitional consciousness arises in awareness of the impermanence, ambiguities, and contradictions within and beyond hegemonic conceptions of identity and a valorization of difference (Rowe, 2005). Aimee Rowe (2005) argues for a new conception of identity as relational, shifting, and based on one’s connections and sense of belonging, rather than on some externally imposed definition. The path to healing in a coalitional sense entails engaging in literal and figurative “bridgework” connecting across differences of place, experience, and consciousness (Malhotra & Perez, 2005, p. 48). Engaging in bridgework does not necessarily mean that the boundaries between the “self” and “other” dissolve completely, only that a space for empathetic connection and acceptance is at least temporarily consciously carved and occupied (Malhotra & Perez, 2005).

Coalitional consciousness is a form of healed consciousness that enables feminists to broaden the scope of their transformational work to engage women in vastly different circumstances. As Keating (2005) explains, feminist activism after the second wave

confronts the challenge to overcome the individualism and segregation of U.S. society to work toward inclusive change. Working for social change across lines of difference requires a conscious stance that, like the *mestiza*, recognizes and values the messy multiplicity of the self and in others. Individual coalitional consciousness enables groups to form what Maria Lugones calls “deep coalitions” or relationships that “challenge us to align our own self-understandings, interests, and goals with other oppressed groups” (Keating, 2005, p. 86). Keating (2005) identifies three steps to building coalitional consciousness:

- (1) locating experiences: sharing experiences related to a theme in a way that pays close attention to the national, racial, and class and other relevant contexts and histories in which the experiences being articulated are being played out;
- (2) seeing resistance to multiple oppressions: examining the experiences with an eye for the multiple relations examining the experiences with an eye for the multiple relations of oppression and resistance at play;
- (3) coalitional risk-taking: exploring the barriers to, and possibilities for, coalitional action with regard to the experiences. (p. 94)

In the model of coalitional consciousness-building, difference is always present and must be addressed openly and honestly. The goal of addressing dissimilar perspectives is not to eliminate or overcome difference but rather to build solidarity across recognized divergences based on similarities that also exist. In response to Anzaldúa’s (1987/2010) warning that “nothing happens in the ‘real’ world unless it first happens in the images in our heads” (p. 261), coalitional consciousness-building provides a model for collectively addressing the need to alter inner awareness before changing external behavior.

Coalitional consciousness and mestiza consciousness represent approaches to healed feminist consciousness that incorporate the components of connection, dialogue, and personal agency. Creating a consciousness in which difference is openly addressed, negotiated, and respected without resorting to a self-other power struggle relies on individual openness to change, engagement in dialogue across borders, and access to new forms of knowledge and action. Opening oneself to the possibility of multiplicity and non-uniformity of identity enables new dialogic engagement across self-other divides. Dialogue is the means by which subjects traverse and form new empathetic connections across difference. Through dialogic connection, subjects enter spaces previously considered unsafe and/or unknown, and challenge prior modes of thinking and acting. Agency blossoms as we “grow to embody [the consciousness] that we initially needed a bridge to access” (Malhotra & Perez, 2005, p. 54).

The ways that feminists interpret healing on individual, cultural, and interpersonal levels translate into changed lives through changing women’s perceptions of reality, identity, and behavior. I have provided only a few examples of feminist theory and practice that incorporate the healing model of connection, openness, and agency, but these examples highlight major trends in U.S. (and increasingly global) feminism. In the sections that follow, I survey predominant conceptions of healing across the domains of consciousness that I outlined in Chapter 2.

### **Perspectives on Healing Across the Domains of Consciousness**

The model of healing comprised of connection, openness, and agency spans research across the physiological, psychological, and socio-cultural domains of

consciousness. Contemporary theories of trauma have infiltrated much of this research in recent decades, but I intend to examine healing paradigms not directly linked to trauma discourse. I aim to show the persistent recurrence of the themes of connection, openness, and agency in these ideas.

### **Physiological Domain**

Research connecting neurophysiological patterns with mental and physical health has ballooned in recent decades with the rise of brain imaging technology and the influx of interest in Eastern healing traditions as alternative or accessory to Western practice. U.S.-based scholars and clinicians such as Daniel Goleman (who pioneered the theory of emotional intelligence), Louis Cozolino (who coined the term “social synapse”), Daniel Siegel (founder of interpersonal neurobiology), and Elizabeth Wilson (a feminist neuroscientist) have explored the intersections between brain, body, mind, and social behavior. These researchers concentrate on the physiological changes induced by activating or strengthening connections in the brain and body. Some research suggests that neural connectivity and integration underlie much of our susceptibility to traumatic affliction (Fishbane, 2007). Concurrently, pathways to recovery involve methods of changing the brain. Influenced by studies of the extraordinary mental capacities of practitioners of Buddhist meditative practices, a growing community of researchers has embraced mindfulness-based therapies or practices as effective means to induce physiological healing (Brody & Park, 2009; Ekman, Davidson, Ricard, & Alan, 2005; Siegel, 2009; for reviews see Chiesa & Serretti, 2009; Hofman, Sawyer, Witt, & Oh, 2010; and Melbourne Academic Mindfulness Institute, 2006). Feminist scholars and clinicians have signaled the commonalities between ethical and epistemological stances

of mindfulness and the concerns of feminism (González-López, 2011; Klein, 1994; Koppedray, 2007; Orr, 2002; Tomm, 1995); however, feminists also critique the essentialist and sexist tendencies of neuroscience and the ethics of reducing trauma and trauma recovery to biology and brain patterns (Brown, 2004; Knudson-Martin, 2012; Miller, 2010; Roy, 2012). In this section I explain a physiological approach to optimal brain development and to mental healing. This approach is grounded in the idea that the tremendous plasticity of the brain offers the potential for changed emotional and cognitive patterns in consciousness (e.g., Siegel, 2001). Change towards greater integration of brain connections leads to more adaptive ways of understanding the self and the world and coping with affliction. I discuss the overlap between this paradigm and the model of healing based on connection, openness, and personal agency. I also identify intersections and divergences with feminist theory and practice.

In discussing the physiological components of consciousness, I explained that subjective knowledge has a physical manifestation in the patterning of neural circuits in the brain. These neural circuits form in response to stimuli from both the body and the external world, and they create representations that are “knowable” to us. These representations communicate across the various regions of the brain, connecting “neurons, groups of neurons, and clusters of groups of neurons that form specific pathways and systems of the brain” (Siegel, 2001, p. 69). This linking is known as *neural integration* and allows humans to perform life tasks (Siegel, 2001). The middle prefrontal cortex has been found to be a center for integration of multiple brain regions and functions (Miller & Cohen, 2001). The extent and particular patterns of neural integration differ widely among individuals because of differences in our genetically encoded neural

substrate at birth and the plasticity of the brain to shape itself in response to life experience. Throughout development, neural connections, or synapses, are created, maintained, strengthened, weakened, or in some cases eliminated (Siegel, 2001). These synaptic changes produce learning (or unlearning).

Theoretical models for neurophysiological well-being draw on attachment theory and mindfulness-based therapies, claiming that optimal neural development (resulting in strong neural integration) during childhood and in adult life occurs within secure, emotionally reciprocal, caring relationships (Fishbane, 2007; Siegel, 2001; Siegel, 2009). Positive attachments are associated with a range of functions considered “optimal mental health”: body regulation, attuned interpersonal communication, emotional balance, fear modulation, flexibility, self-awareness, empathy, morality, and intuition (Siegel, 2009). Siegel also considers these functions “middle prefrontal processes,” governed by the operation of the middle prefrontal cortex. Mindfulness practices and mindfulness-based therapies are invoked, often in conjunction with traditional client-therapist models, as a means to stimulate middle prefrontal neural integration that enhances one’s self-awareness and ability to relate adaptively to others (Hofman et al., 2010; Kabat-Zinn, 1990; Melbourne Academic Mindfulness Institute, 2006; Siegel, 2009).

The concept of mindfulness aims to capture the essence of well-being of consciousness, seen as the entirety of mental processes (mind, memory, emotion, sensory perception, etc.) that contribute to our “knowledge” of the present moment (Ekman et al., 2005; Kabat-Zinn, 1990). Mindfulness, as explained by Kabat-Zinn (1990), is “moment-to-moment awareness,” devoting one’s full attention to the present moment with all of its experiential complexity (p. 11). The key to mindfulness lies in an orientation of openness

or receptiveness, curiosity, and non-judgment toward one's bodily signals and the surrounding environment. Feminist philosopher Winnie Tamm (1995) embraces mindfulness as a way to understand how each person's perception constructs reality in a given moment and how gaining a sense of embodied awareness opens opportunities for changing perception and action. An attitude of mindfulness breaks down divisive responses of fear and self-loss when interacting with others, valuing instead the relational, interdependent nature of identity (Tamm, 1995, p. 18). For Tamm (1995), a mindful orientation is central to developing feminist consciousness and action toward social justice because mindfulness promotes compassionate connections, increased openness to change (or non-attachment), and greater personal agency rooted in a deep-set sense of security. Although Tamm (1995) does not delve into the physiology of mindfulness, her focus on embodied, contextualized knowledge locates healing in the interplay between the physical body and the socially constructed world. Consciousness cannot be extracted or abstracted from the body, and emotions cannot be separated from other mental states of awareness. In this sense, the view of mindfulness echoes the views of feminist philosopher of science and consciousness Donna Haraway (1988/2010) and "body studies" theorists Susan Bordo (1987) and Alison Jaggar (1989).

In contrast to feminist spiritual and philosophical approaches to physiological healing, Elizabeth Wilson (2004) inserts feminism into neurophysiology at the level of cellular and chemical reactions. She provides a unique counterargument to feminist criticisms of biological reductionism in neuroscience by revealing the ways that activity in the central and peripheral nervous systems affects sexuality, emotional states, thinking, desire, and the function of other organs. Wilson (2004) uses accounts of depression,

sexuality, and emotion to argue that feminists should not discount the complex holistic relationship among neural and chemical pathways, bodily systems, and conscious experience as a potential transformative site.

Other feminist scholars have greeted neuroscience, attachment theory, and mindfulness with ambivalence, citing the positive emphasis on embodied knowledge and caring relationships while offering an array of critiques for incorporating feminist paradigms. The emphasis on bodily-based knowledge from emotions and intuition coincides with feminist epistemologies that privilege embodied, gendered experience over culturally pre-defined ways of knowing (Bordo, 1987; Haraway, 1988; Jaggar, 1989; Tomm, 1995). Despite this epistemological concurrence, feminists argue that therapeutic approaches must take into account the social-structural factors that feminists see as fundamental to consciousness (Brown, 2004; Knudson-Martin, 2012; Miller, 2010; Roy, 2012). Rather than focusing solely on enhancing the connectivity and function of the brain, “a feminist approach expands the lens outward to include the influence of societal power processes and socio-cultural norms and expectations” (Knudson-Martin, 2012, p. 302). A feminist approach also includes the goal to develop *feminist consciousness* as integral to treatment (Brown, 1994). Part of healing consciousness includes the “awareness that one’s own suffering arises not from individual deficits but rather from the ways in which one has been systemically invalidated, excluded, and silenced because of one’s status as a member of a nondominant group in the culture” (Brown, 2004, p. 464). Also, although feminist theories drawing on Eastern spirituality claim to forge a path of acceptance and inclusiveness, Gwyn Kirk (1997) and Rainey and Johnson (2009) point out that the tendency of feminist spirituality to focus on gender over race and class

has precluded its expansion beyond mainly small groups of elite, White feminists.<sup>3</sup> Mindfulness is a useful integrative approach to understanding healing body-mind systems, but mindfulness takes a universalizing stance on identity that downplays differences crucial to feminist transformation.

### **Psychological Domain**

As I discussed in Chapter 2, the major psychological frameworks that inform contemporary understandings of consciousness relative to literacy practices represent a mix of Freudian psychoanalysis and narrative constructionism, emphasizing the concepts of the unconscious or unarticulated mind, the narrative construction of knowledge, and the assimilation of knowledge through empathetic, listening relationships. In this section I explore how various interpretations of healing based on these concepts relate to the healing model that I have proposed comprising connection, openness, and agency. Psychological explanations share the common theory that we construct knowledge of the self and the world out of a fluid array of experiential fragments; healing involves connecting fragments in a coherent way, becoming open to the continual generation of new fragments, and taking agency over one's own his/her-stories.

Contemporary theorists and clinicians drawing on the traditional psychoanalytic "talking cure" maintain that accessing and integrating fragments of knowledge that were previously "forgotten," obscured, and dissociated is curative (Berman & Schiff, 2000; Freud & Breuer, 1895/2004; Lepore & Smyth, 2002; Peterson, 2011). Sequestering or "inhibiting" traumatic memories away from present, verbalized consciousness causes adverse mental and physical effects because the experience has not been adequately released and confronted (Lepore & Smyth, 2002). Left unarticulated and unshared, the

“sensory perceptions, obsessional ruminations, or behavioral reenactments” of a stressful experience inflict persistent mental and physical strain (Smyth, 1998, p. 180). James Pennebaker’s research on expressive writing (which I detail in Chapter 5) focuses on the *physical* effects of relieving this strain; however, the goal to liberate subliminal, unarticulated knowledge also influences healing models concerned with the *psyche*. Stress from an inhibited or minimally understood experience may cause a subject to feel socially isolated, insecure, and helpless (Florence, 2000; Nye, 2000; Penn, 2001). Putting one’s remembered and ongoing mental and emotional life into words promotes the ability to more accurately assess and challenge the burden of past wounds on daily existence (Allen, 2000; Berman & Schiff, 2000; Freud, 1920/1998). By delving into sites of “disorganization” and confusion in one’s self narrative, the subject engages in the risky yet rewarding endeavor to “form islands of consistency” and bring order to the chaos of her own consciousness (Allen, 2000, p. 283, citing Kay, 1996).

An example of healing attributed to exposing and re-living (through narrating) painful events is one student’s account of how writing about her abusive father triggered realizations not touched in regular therapy. “Kofie” describes her healing process as a painful confrontation with a messy emotional past that leads to integration, relief, and forward momentum:

When I worked on my stories for the course, I started crying and I cried every day for two years after that (...) I remember feeling really driven to put to paper the scenes that were the most painful (...) Through all that labor, I relived those scenes. It was the first time I realized I had really been harmed—even though I already had the labels: physical abuse; emotional abuse (...) For me, writing

those stories stopped all the circling that goes on in the head (....) Before I wrote those stories, I needed to think about those scenes and remember them. Now I have forgotten them. (Allen, 2000, p. 273-274)

Kofie's account exemplifies the conception of healing from a psychoanalytic focus on the unconscious. By thoroughly and systematically re-engaging with a past, un-confronted trauma, Kofie makes new discoveries about her experience that enable her to regain control of her life and psychologically transcend the obstruction.

In addition to psychoanalysis, narrative therapy also influences views on psychological healing. Narrative therapy draws on psychoanalysis but incorporates a constructionist view of storytelling in the psyche. Narratives contain the contextually-derived meanings that shape subjective relationships and lived experience (Bruner, 1991). Verbalization of the self in narrative form grants the individual conscious access to previously unacknowledged self-stories and generates new, more adaptive (or socially acceptable) approaches to thinking and behaving (Bruner, 1991; Sarbin, 1986; White & Epston, 1990). Because stories have a beginning (or a history), a middle (or a present), and an ending (or a future), individuals and societies rely on stories to impart order, security, and predictability to our daily lives (White & Epston, 1990, p. 10). Narratives introduce coherence, efficiency, and controllability into the fragmented stream of experience (Nye, 2000; Penn, 2001). Using self-narratives in therapy allows individuals to observe, revise, assimilate, or even discard maladaptive stories as needed (Hermans, 1999; Pennebaker & Seagal, 1999). Drawing on the postmodern conception of a multi-voiced and dialogic self, narrative therapy also emphasizes the capacity to fluidly shift

among many interpretive standpoints coexisting in consciousness (Daiute & Buteau, 2002; Hermans, 1999; Penn, 2001; White & Epston, 1990).

White and Epston's (1990) seminal work on narrative therapy explains ailing and healing in terms of the coincidence between dominant narratives and lived experience. People experience problems (for which they seek psychotherapy) "when the narratives in which they are 'storying' their experience, and/or in which they are having their experience 'storied' by others, do not sufficiently represent their lived experience" (White & Epston, 1990, p. 14). The disjunction or conflict between dominant narratives and lived experience causes a sense of "unhelpful, unsatisfying, and dead-ended" meanings that trap the self in stasis and solitude (White & Epston, 1990, p. 14). The goal of healing is to identify or generate "alternative stories" that enable the individual to perform new "more helpful, satisfying, and open-ended" meanings (White & Epston, 1990, p. 15). Because a single, dominant story never can encapsulate the rich complexity of life, the therapeutic aim is to resurrect and re-author meanings that more adequately match our existence and orient us to achieve our goals (White & Epston, 1990).

Feminist approaches to narrative therapy emphasize that a primary source for the generation or re-generation of alternative stories is the corpus of lived experience that occurs *outside* dominant narratives (Brown, Weber, & Ali, 2008; Lee, 1997). The notion that narratives may be dominant or subordinated suggests that narratives are not power-neutral. Stories impose "order" in social relationships that have a stake in granting or revoking personal power and agency. Feminist therapists gravitate to narrative theory because it disrupts the assumption of an objective truth and delves into fields of knowledge beyond dominant perspectives (Gremillion, 2004; Lee, 1997). Feminist

scholars apply narrative therapy to “explore how aspects of stories have been disqualified or rendered invisible” (Brown et al., 2008, p. 96). Resurrecting subjugated knowledges that reject dominant “truths” about women’s experience is a primary goal of feminist narrative approaches (Brown et al., 2008; Gremillion, 2004; Lee, 1997; Maarof, Hashim, Yusof, & Mydin, 2012). Feminist work locates and revives voices that androcentric narratives de-legitimize and silence.

Psychoanalysis and narrative therapy both incorporate the role of an empathetic listener and interpreter of the story, whether the listener is a therapist or the author herself. The act of listening, like reading, is a process of absorbing knowledge (or meanings) into the psyche, which can make possible the production of new knowledge. As Trudelle Thomas (1994) argues, listening coexists with voice in narrative healing processes. *Voice* is a metaphor for embodied knowledge and the ability to take ownership and responsibility for one’s point of view (Penn, 2001; Thomas, 1994). Peggy Penn’s (2001) description of healing related to personal narratives of chronic illness illustrates the interoperation of storytelling, voice, and listening in practice. Penn (2001) observes that the families of people with chronic ailments often suffer damage to their own health and relationships because they lose the ability to converse freely. The loss of conversation signals a stasis in thinking, connection, and action that breaks down the relational bonds that might otherwise provide support through strenuous experience (Penn, 2001, p. 37). Regaining the ability to speak, to express an authentic voice of the self, even if the self is chaotic, deteriorating, or “damaged,” situates the teller in relation to others, offers an opening to conversation, and constitutes an assertion of the self (Penn, 2001). Gaining a new voice in conversation also can enable the speaker to become not

just a creator but also a responsive listener to the voice (Penn, 2001, p. 41). Responsive listening with others is therapeutic because “releasing a part of oneself to the other” creates a emotional bond and makes the person speaking feel understood, respected, and “morally worthwhile” (Penn, 2001, p. 44).

Psychotherapeutic formulas based on psychoanalysis and narrative therapy treat trauma and healing in ways that reiterate the model of connection, openness, and personal agency. Major themes emphasize the ability to connect to and liberate unconscious perturbations, to generate an integrated yet open-ended personal narrative, and to respond empathetically to the self and others. This framework shapes a body of research (which I explore in Chapter 5) that connects women’s literacy practices to psychological healing.

### **Socio-Cultural Domain**

The socio-cultural domain of consciousness comprises the shared meanings that construct social relationships. Language is central to this domain; shared meanings reside in the contextual relation between words and things, which enables societies to name aspects of the self and world and create standards and norms for social existence (Scott, 1988). In Western postmodern and poststructural theory, language and its meanings have the power to change the way subjects think, feel, and act in a social context. The contextually derived meanings attributed to words shape all social phenomena, including the scripts or narratives that structure who we think we are and how we relate to our surroundings (Scott, 1988). Identity and discourse are two major concepts that describe the relation between language and meanings in the socio-cultural domain. In this section I discuss meanings-based theories of change, beginning with postmodern understandings of language, and provide examples to illustrate how transforming identity and discourse

aligns with the healing model of connection, dialogic openness, and agency. Arguments for healing focus on changing identity scripts, altering the discursive field, and building new discursively identified communities. Healing constitutes the ability to use language to deconstruct and navigate self-other difference, to open new possibilities of thought and identity, and to engage in empowered action based on new discursive meanings.

Postmodern critiques of Enlightenment (modern) thought laid the foundation for contemporary theories of changing consciousness through changing meanings. The Enlightenment, or Age of Reason, posited that the self and the world are knowable through objective (non-socially constructed, non-political) reasoning. Postmodernism (broadly defined) rejects the Enlightenment ideals of a stable self, universal truth, and power-neutral thinking (Tong, 2009, p. 273). Postmodernism encompasses a wide variety of evolving modes of thought but maintains the influence of French philosophers Derrida, Foucault, Helene Cixous, Luce Irigaray, and Julia Kristeva and U.S.-based philosopher Judith Butler. Psychoanalysis and Lacanian models influence postmodern theory in conceptualizing the relational identification of the self in language. Linguistic and cultural theorists such as Mikhail Bakhtin and Slavoj Žižek and Marxist philosopher Louis Althusser also contributed the idea that language acquires meaning only when a subject adapts language to her intentions.

The postmodern perspective supports the ability of individuals to recognize tensions between their experience and the available means of articulating experience. Healing with regard to meanings and language comes from the notion that individual consciousness arises in the midst of a plurality of meanings that subjects selectively adapt to their own intentions. The internal assimilation of meaning is an ongoing, dialogic

process that is continually open to the creative possibilities supplied by diverse contexts and interactions. The individual through her experience and education has the capacity to perceive (become conscious of) the instability of meanings in language and use this plasticity toward personal and social empowerment. Personal and social healing occurs through shifts in the elements of meaning that define one's view of reality. Jaggar's (1989) theory of "outlaw emotions" aligns with the postmodern idea of locating identity among felt or experienced meanings. Jaggar (1989) argues that subordinated groups are likely to feel "outlaw emotions" that arise from the contradiction between external messages about how to feel/identify and the individual's actual "felt" internal states (p. 160). The shared expression of incongruous experience within and among individuals may provide the foundation for constructing new identities and building subversive communities (Jaggar, 1989). Jaggar's argument suggests that the dominant social order does not entirely eclipse consciousness; meanings continually evolve in response to human interpretation and construction of experience.

Scholars using a poststructural postmodern lens explore healing through changed meanings in relation to identity and discourse. Because identities structure social relationships, the meanings attached to an identity can promote peaceful, reciprocally beneficial relations or can lead to social discord. Gaining awareness of one's identity in a new context or constructing an alternative identity standard can propel individual and social transformation by creating different relational patterns of self and community. For example, Gunaratnam and Lewis (2001) examine the wounds inflicted by dominant racialized identities and practices among women social workers. The authors observe that women in racially diverse social service organizations experience anxiety and

ambivalence in their working relationships due to internalized, racial self-other splitting. Wounding occurs on a micro-political level among individuals and on an organizational level in the allocation of tasks and service provision among workers. Racially divided identities create emotional schisms between workers that (re)produce larger structural inequalities. Gunaratnam and Lewis (2001) argue that racial self-other splitting is a psychic defense mechanism that projects the undesired, negative qualities of the self (or “us”) onto an “othered” group (or “them”). Healing in this situation entails “coming to terms with and integrating positive and negative experience and feeling, rather than splitting” (Gunaratnam & Lewis, 2001, p. 143). The goal is to change the way that people identify interpersonally, within and among groups, and in individual consciousness. The self and other must become capable of discursively containing both “good” and “bad” and containing each other in an integrated relationship. Gunaratnam and Lewis (2001) stress that moving toward “wholeness and constructive relationships” requires the “creation of a moral and social economy capable of accepting and valorizing difference” (p. 144). For Gunaratnam and Lewis, the key to altering patterns of identification is to collectively confront the emotional cues of anger, guilt, and shame that accompany defensive anxiety. As in Jaggar’s (1989) argument, this approach relies on critically addressing one’s embodied, emotional experience to compel healing changes in identity. Transforming the *meanings* attached to identities challenges the “felt” bodily source of divisive relationships.

Identities (and consciousness) form and re-form in continually evolving discursive fields comprised of textual, material, and social practices. Some scholars aim to change meanings at the discursive level to fundamentally alter patterns of thought and

action connected to identities. Sharon Marcus (1992) uses the poststructural tactic of deconstruction to expand the realm of discursive possibilities regarding rape and female subjectivity. Marcus (1992) argues that the physical and discursive violence against women perpetrated by the dominant U.S. “rape script” can be countered by a renegotiation of the meanings attached to rape. Rape is a scripted performance regulated by a “gendered grammar of violence” that “generally predicates men as legitimate perpetrators of sexual violence against women” (Marcus, 1992, p. 436). Marcus deconstructs this grammar to expose its holes and inaccuracies. For example, she notes that “even though women in fact are neither the sole objects of sexual violence nor the most likely targets of violent crimes, women constitute the majority of fearful subjects” (Marcus, 1992, p. 437). Marcus (1992) rejects dominant assumptions that allow men to perpetrate rape against passive, feminized “subjects of fear”; instead, she argues for a new discourse that defines rape as an act committed against a subject of *violence* – “someone whom the would-be rapist assumes would attempt to fight back” (p. 439). Women’s sexuality is not inherently a sanctified object, property, or inner space; rather, rape forcibly *creates* female sexuality as a thing that is destroyed, stolen, or penetrated (Marcus, 1992, p. 442). Destabilizing the pillars of the rape script allows Marcus to establish space to create a new way of thinking, feeling, and acting regarding sexual violence against women. Her argument lays the groundwork for women to identify in new ways – as subjects of violence instead of fear and more broadly as activists against sexist oppression.

Women’s identification with a discourse of female agency is the first step to creating discursively-identified communities of resistance and social transformation. In

the decades since Marcus's essay, rape crisis centers in the United States have expanded and become more formalized (Evans, 2003), assault prevention courses involving physical self-defense have become more available to women (Brecklin, 2008), and empirical evidence increasingly supports self-defense effectiveness against rape (Ullman, 2007). These cultural changes support the notion that a new discourse of rape (to which Marcus contributed) enabled communities of women and some men to think, speak, and act in new ways to prevent rape. The emergence of a community of discursive subjects can support healing on individual and broader socio-cultural levels by bringing people together across difference, opening space for dialogic negotiation of meaning, and promoting new forms of action and interaction.

### **Conclusion**

In this chapter I examined models of trauma and healing based on feminist work in the humanities and social sciences. The model of healing is characterized by the principles of connection, openness, and agency. Connection is a function of empathy and compassion for the "other" that enables identification across perceived boundaries. Openness refers to the willingness to engage in dialogue and accept difference and shifting perspectives. Personal agency is a sense of sovereignty over some portion of consciousness and capacity to enact change in one's experience. I then showed how approaches to healing across diverse feminist perspectives and the three domains of consciousness that I presented in Chapter 2 similarly invoke the coordinates of connection, openness, and personal agency. My purpose in this discussion was to lay the groundwork for presenting the ways that literacy practices heal consciousness by transforming its physiological, psychological, and socio-cultural elements.

## Chapter Notes

<sup>1</sup> The American Psychiatric Association (APA) defines trauma as the following: direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one's physical integrity; or witnessing an event that involves death, injury, or a threat to the physical integrity of another person; or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate (Criterion A1). The person's response to the event must involve intense fear, helplessness, or horror (or in children, the response must involve disorganized or agitated behavior) (Criterion A2). (APA, 2000, p. 463). For my purposes, I do not consider the APA definition to be adequate or accurate.

<sup>2</sup> There is disagreement as to the extent of the divisions among feminists. Many White, middle class, heterosexual, second-wave feminists were theorizing difference and involved in and/or supportive of the Civil Rights and Black Power (and other nationalist) movements, socialist labor politics, and lesbian rights. Nancy Hewitt's (2010) edited anthology, *No Permanent Waves*, and Stephanie Gilmore and Sara Evans' (2008) edited anthology, *Feminist Coalitions: Historical Perspectives on Second Wave Feminism in the United States*, provide critiques of the constructed nature of the concept of distinct waves of feminism, especially with regard to issues of difference and privilege based on difference. Both of these works represent a new historiography of the second wave which interrogates the process whereby the most progressive and inclusive aspects of the feminist movement have been erased from the dominant discourse, which often boils down the movement to Betty Friedan and the National Organization for Women (NOW).

<sup>3</sup> Kirk (1997) and Rainey and Johnson (2009) explore how integrative feminist spirituality intersects with and diverges from activist efforts in the environmental justice movement.

## CHAPTER 5

### LITERACY PRACTICES AND HEALED CONSCIOUSNESS

In this chapter I consider how research in psychology, writing pedagogy, literary studies, and social theory and activism investigates reading and writing to promote women's healing. I use the definition of healing that I developed in Chapter 4, comprising a personal and social orientation of caring connection, openness to change, and personal agency across the three domains of consciousness. The goal of healing is to promote progressive individual and social outcomes for women. Clinical, academic, and social activist perspectives illustrate the ways that women's literacy practices, especially with autobiographical texts,<sup>1</sup> offer the potential to induce mental and interpersonal connections, openness to personal revision and dialogue, and a sense of control motivating action. The current chapter provides the lines of reasoning against which I construct a counterargument in Chapter 6 regarding the limits of literacy practices as healing agents.

#### Literacy Practices and Physiological Healing in

#### Expressive Disclosure Writing

In this section, I explore evidence from empirical studies that explore writing as an integrative process for the physiological components of consciousness – neural connections and chemical-emotional responses. The studies use an empirical model for psychotherapeutic research called *experimental disclosure*. In experimental disclosure, participants compose emotion-focused personal narratives (oral or written) about traumatic or stressful experiences, and researchers attempt to systematically observe and quantify health-related outcomes. An experimental disclosure method using *expressive*

*writing* (rather than oral expression) was developed by a team of psychologists in the 1980s and has since spawned over 200 related studies across student, clinical, and non-clinical community populations (Poon & Danoff-Burg, 2011). Because of its connection to the lead originator James Pennebaker, the expressive writing method of experimental disclosure often is called the Pennebaker paradigm.<sup>2</sup> Generally, experimental group participants write essays disclosing their deepest thoughts and feelings about a distressing or traumatic experience, while control group participants write about non-emotional topics. Participants write for 20 to 30 minutes on three or four separate days, with testing of health indicators occurring directly before and within a few weeks or months after the intervention (Pennebaker & Beall, 1986). Although definitive conclusions remain elusive, results demonstrating modest physical, psychological, and social improvements continue to drive interest in expressive writing as an inexpensive alternative or addition to traditional therapies (see Frattaroli, 2006, and Smyth, 1998, for reviews). Researchers promote the use of expressive writing interventions for populations that might not otherwise desire, have access to, or be able to afford more expensive treatment options, as clients may complete writing tasks at home at a nominal cost (Henry, Schlegel, Talley, Molix, & Bettencourt, 2010; L'Abate & Kern, 2002). Writing entails minimal physical and economic requirements and also decreases the social risk of expressing disturbing experiences (Lepore & Smyth, 2002).

With regard to my present focus on women, expressive disclosure studies of student and non-student populations of women have focused primarily on patients and survivors of breast cancer (Gellaitry, Peters, Bloomfield, & Horne., 2010; Henry et al., 2010; Laccetti, 2007; Schwartz & David, 2002; Stanton & Danoff-Burg, 2002) and

women who have experienced rape, domestic violence, or sexual abuse (Brown & Heimberg, 2001; Holmes et al., 2007; Koopman et al., 2005). One study (Lewis et al., 2005) focused on lesbian-identified women, and one preliminary study (East, Startup, Roberts, & Schmidt, 2010) examined distress related to anorexia nervosa in a non-clinical population. Generally, however, studies following the Pennebaker paradigm, especially with student populations, pay little attention to gender in population sampling or reporting of results (Range & Jenkins, 2010). The problematic treatment of gender and lack of concern for structural inequality (which I discuss in Chapter 6) complicate an analysis of expressive writing studies from a feminist perspective; nonetheless, the proposed underlying mechanisms and targeted outcomes of the expressive writing approach align with the theories of physiological consciousness and healing that I identified in Chapter 4.

### **Frameworks for Healing – Emotional and Cognitive Processing and Self-Regulation**

Expressive disclosure research emphasizes the need for participants to regain integrated bodily, neurological, and emotional functioning after traumatic disruption (Lepore et al., 2002; Lutgendorf & Ullrich, 2002). The fragmented emotional and perceptual “encoding” of traumatic memories in the brain is thought to inflict stresses on the body including hyperreactivity and intrusive thoughts associated with traumatic memories (Smyth, 1998). Posttraumatic stress inflicts a variety of autonomic, neuro-hormonal, neuro-anatomical, and immunological consequences, including changes in blood pressure, hormone levels, inflammation, and cell-mediated immune responses that disrupt typical functioning (Booth & Petrie, 2002; Lutgendorf & Ullrich, 2002; van der Kolk, 1994). These physical responses combine with disjointed, avoidant, and inhibited

thinking about the experience that further exacerbates the toxic effects of the traumatic memory (Klein, 2002; King, 2002; Lepore et al., 2002). Researchers theorize that expressive writing provides a “safe” medium to engage with a traumatic experience that may attenuate physiological responses and improve mental and social well-being (Booth & Petrie, 2002; Brown & Heimberg, 2001; East et al., 2010; Holmes et al., 2007; Laccetti, 2007; Lepore et al., 2002).

Across experimental disclosure research, healing constitutes connecting buried or avoided memories, sensations, and thoughts in awareness; initiating changed patterns of thinking and feeling about a traumatic experience; and gaining control of one’s perceptions and reactions. These changes are enmeshed in the concepts of emotional and cognitive “processing” and self-regulation, which researchers operationalize using a variety of physical and psychological measures. *Emotional processing* includes freely exploring the range of positive and/or negative emotions related to major psychological events with the goal to confront and assimilate emotional disturbances to decrease stress on the body (Murray & Segal, 1994; Pennebaker, 2002). The release of previously unshared or unexpressed thoughts and feelings is hypothesized to reduce inhibition and ease cumulative distress, which may lower blood pressure, improve immune function, and alleviate other stress-related physical ailments (Davidson et al., 2002; Laccetti, 2007; Stanton & Danoff-Burg, 2002). The relaxation of emotional disturbance also enables problem resolution and adaptive reframing of the experience (East et al., 2010; Laccetti, 2007). The construct of *cognitive processing* in expressive disclosure research is defined as “changes in stress-related thoughts and appraisals” regarding one’s internal states or memories and external, environmental factors (Lepore et al., 202, p. 108). Cognitive-

processing theory posits that expressive writing helps participants to make sense of, gain insight about, and organize and integrate upsetting experiences into a “self-schema,” or one’s internal self-image (Range & Jenkins, 2010, p. 152). Researchers often measure cognitive processing by counting and analyzing trends in the use of “causal” and “insight” words in experimental disclosure essays such as *because*, *reason*, *realize*, and *understand* (Holmes et al., 2007; Pennebaker, 1994). Changing perspectives, exploring the experience flexibly from multiple angles, and making new connections are considered beneficial forms of cognitive processing (East et al., 2010; Laccetti, 2007). Pennebaker (1997) found that cognitive changes coinciding with emotional expression reliably predicted improved physical health across data from six separate studies.

Emotional and cognitive processing in experimental disclosure leads to a more integrated awareness of the fragmented memories and sensations of a trauma or stressor and reduced physical symptoms of traumatic or chronic stress (Smyth, 1998). An integrated consciousness in turn may enable perceived “mastery” and transcendence of the experience (Lepore et al., 2002, p. 111). The idea of “mastery” draws from self-regulation theory, which links healing to gaining a sense of personal control, especially over negative emotions (King, 2002). Observing oneself expressing and taking ownership of emotions and reactions “may give people a new or stronger self-efficacy for emotional regulation” (Range & Jenkins, 2010, p. 157). When people perceive stressors to be more controllable, they experience less fear and anxiety, decreased autonomic arousal, and more effective immune responses, all of which enable them to feel more internally and interpersonally connected, open to changed perspectives, and able to function adaptively (East et al., 2010; Gellaitry et al., 2010; Lepore et al., 2002; Lutgendorf & Ullrich, 2002).

In the last decade, a handful of researchers have begun to address the intersections between therapeutic expressive writing and mindfulness-based practices (as adapted in Western medicine). Brody and Park (2004) explore the overlapping theories and frameworks for studying conscious awareness, narrative writing, and mindfulness. They argue that increasing nonjudgmental attention to one's thoughts, feelings, and responses through expressive writing may assist individuals to diminish experiential avoidance, make new connections between verbal, non-verbal, and previously unrelated past and present experiences, and become less inhibited to express their experiences (Brody and Park, 2004, p. 148). Recent research has incorporated mindfulness as a variable in expressive disclosure outcomes, examining the linguistic predictors of mindfulness in expressive writing (Moore & Brody, 2009); the association between mindfulness, experiential avoidance, and mental health (Moore, Brody, & Dierberger, 2009); and the effect of mindfulness as a moderator of expressive writing health outcomes (Poon & Danoff-Burg, 2011). Studies find that higher overall mindfulness and increasing mindfulness through the course of the study predict greater physical and psychological benefits from expressive writing (Moore et al., 2009; Poon & Danoff-Burg, 2011). Increases in cognitive processing words and present tense words significantly increase two measures of mindfulness: nonjudgmental acceptance of present-moment experiences, and observing and describing present stimuli (Moore & Brody, 2009). The incorporation of mindfulness may bring expressive writing research in line with neuroscientific and feminist trends toward holistic, integrative models of physiological healing; however, this research is still in its infancy. Extant mindfulness and expressive writing studies have yet

to include clinical populations, and gender-sensitive research is scarce. None of the studies investigating mindfulness and writing has expressly targeted women.

In the sections that follow, I examine more closely the findings of expressive writing studies on various populations of women according to the healing frameworks of emotional and cognitive processing and self-regulation. Authors of expressive writing studies seldom publish the texts of participant narratives, but I include excerpts of women's essays where possible to keep women's voices at the forefront.

### **Women's Healing and the Pennebaker Expressive Writing Paradigm**

Expressive disclosure studies with women often pre-identify a targeted trauma and modify the writing paradigm to fit researcher and participant circumstances and goals related to the trauma. For example, researchers suggest that women who are in treatment or recuperating from breast cancer might glean more benefit from writing about the positive aspects of the traumatic experience (such as changed life perspectives) (Henry et al., 2010; Stanton & Danoff-Burg, 2002), whereas women who have experienced physical and sexual violence may need more assistance to confront inhibited emotions and piece together the fragmented details of a buried or avoided experience (Brown & Heimberg, 2001; Holmes et al., 2007). Researchers predict that emotional and cognitive changes together promote holistic health benefits for women across measures such as depression and mood states, physical pain and other symptoms, medical visits for cancer-related morbidities, perceived emotional support, quality of life, upper respiratory (common cold) symptoms, stress, empathy, and self-consciousness (Brown & Heimberg, 2001; East et al., 2010; Gellaitry et al., 2010; Henry et al., 2010; Holmes et al., 2007; Koopman et al., 2005; Laccetti, 2007; Lewis et al., 2005; Stanton & Danoff-Burg, 2002).

Studies of breast cancer patients are the most common type of expressive writing experiments targeting women, and these studies frequently incorporate writing about positive outcomes and future plans along with emotional expression. Henry et al. (2010) focus entirely on positive thoughts, experiences, and feelings about breast cancer. Participants wrote only one essay and completed physical and psychological health indicators at baseline and two follow-up intervals. Despite the briefness and singular focus of the task, women reacted positively to the writing opportunity. Comments included, “I had never put my feelings in writing before. I felt it was a great tool to express my feelings concerning my cancer. Thank you!” and “It felt really good. Thanks for convincing me to think about it all” (Henry et al., 2010, p. 753). Completing the writing task significantly decreased physical and depressive symptoms at the three-month follow up, but these improvements were not sustained after nine months. Henry et al. (2010) suggest that patients periodically repeat the exercise to aid in coping with the “emotional ups and downs of the cancer experience” (p. 755). Stanton and Danoff-Burg (2002) incorporate both the benefit-finding model and traditional expressive writing in a comparative analysis. They found that women who wrote about the benefits of their cancer-related experience during four writing sessions experienced health improvements similar to women who wrote about their painful thoughts and feelings (in the traditional expressive writing format). Both the benefit-finding group and the expressive writing group significantly decreased their cancer-related medical visits, and the benefit-finding group evidenced more positive attitudes about the writing task. One woman in the expressive disclosure group wrote about confronting questions and fears about her treatment and recovery:

When I was in the waiting room waiting to go for surgery, it all kind of hit me. Was there going to be more than they thought? Are they going to have to remove my breast? Am I going to have to undergo chemotherapy? (...) Now every little thing has me petrified! Any ache means the cancer is back ... but then I worry that if part of my mind still believes the cancer will come back, maybe it will. Just trying to think positively can cause stress. I think the hardest part of this week has been the sense of loss I've felt being finished with treatment (...) How do I pick up the pieces? (Stanton & Danoff-Burg, 2002, p. 42)

Although the above essay reveals the potential for benefit-focused writing (“thinking positively”) to cause increased tension, a woman in the benefit-finding group seemed to enjoy the opportunity to express the positive side of her experience:

I have learned to be more patient and take some time for people and things. I still find myself getting hurried and upset at things. Then I stop and realize, “This is not important, slow down, focus on the important things in life.” It is great to have this new perspective on life in general (...) I have found that I think I am an even better friend. (Stanton & Danoff-Burg, 2002, p. 42)

Other women described the benefit-finding condition as a surprising and refreshing break from their negative thoughts. Despite these positive reviews, Stanton and Danoff-Burg (2002) caution against focusing exclusively on benefit-finding or promoting benefit-finding too early in the cancer treatment experience. They propose instead to use a balanced, patient-centered emotional approach to avoid the “tyranny of positive thinking” (Stanton & Danoff-Burg, 2002, p. 44). The content of the women’s essays also suggests

the need for a multi-pronged approach to allow women to express a broader range of responses depending on their individual experiences.

Gellaitry et al. (2010) addressed women's diverse experiences with a varied series of writing tasks. The experimental essays combined a range of objectives including emotional disclosure (expressing one's deepest thoughts and feelings), cognitive appraisal (making sense of the illness), benefit finding (exploring a changed outlook or priorities), and future plans (considering coping strategies or sharing with others). The study selected women who were approaching the end of radiotherapy treatment for breast cancer, and the essays were designed to guide participants through an integrated healing process exploring the experience from multiple angles (Gellaitry et al., 2010). A similar multi-pronged approach incorporating painful memories, positive insights, and future plans was successful in previous studies (King, 2002; Lange, Schoutrop, Schrieken, & van de Ven, 2002) but had not been tested with women breast cancer patients. Gellaitry et al. found that women who completed the expressive writing series were more satisfied with the level of emotional support that they received following breast cancer treatment and were better able to maintain their supportive relationships after six months. This study did not find correlations between writing and physical improvements (measured by healthcare visits), but the authors indicate that levels of perceived emotional support are instrumental in alleviating distress in adjusting to cancer (Gellaitry et al., 2010).

Laccetti (2007) followed a more traditional (negative) expressive writing approach instructing participants to write about "experiences with metastatic breast cancer, thoughts and feelings related to not fully recovering from cancer and facing death, and any other traumatic and upsetting experiences in life that may or may not

relate to breast cancer” (p. 1021). Despite the downbeat tone of the instructions, women still reacted positively to the writing opportunity. One woman wrote:

I would never have done this if you hadn't asked me. Now that I'm done, I see how great an experience it was, (...) I've learned that writing helps, and I will do it more in the future. Thank you for letting me have this wonderful opportunity.  
(Laccetti, 2007, p. 1022)

Laccetti's (2007) results indicated that women who used more positive emotion words evidenced greater emotional well-being in areas including self-consciousness, worry, stress, and contentment. She reasons that a more optimistic outlook may enhance cognitive reframing and reintegration of the traumatic experience, boosting these women's emotional resilience (Laccetti, 2007, p. 1022).

Women who have endured physical violence and rape evidence more mixed results from expressive writing than breast cancer patients, which suggests the limitations of approaching trauma from a reductive, over-generalized stance. One study (Koopman et al., 2005) found that among women who have endured intimate partner violence (IPV), only those with higher levels of depressive symptoms showed a significant reduction in depression following the expressive writing intervention. In another study (Holmes et al., 2007), nearly all participants wrote about abuse that occurred in their adult lives, and over half of the participants wrote about childhood abuse. Holmes et al. (2007) found that participants who used more negative emotion words reported increased physical pain symptoms (which was expected). Unexpectedly, and contradictory to studies of breast cancer survivors, increased use of positive emotion words also correlated with increased pain symptoms. Holmes et al. (2007) suggest that increased positive emotions might

indicate a tendency for IPV survivors to “fail to actively confront their traumatic experiences” (p. 1200). Holmes et al. (2007) do not suggest why this population may be more prone to avoid openness about their experiences, but the study cautions modestly that “overemphasis and expression of negative emotion in trauma narratives may have negative consequences for an IPV survivor’s physical health” (p. 1200). Holmes et al. (2007) disregarded a variety of emotional factors that may contribute to women’s difficulty in processing IPV through writing, including shame, lack of confidence, distrust of the research situation, and anxiety over physical safety, and (unlike studies of breast cancer patients) Holmes et al. (2007) failed to interview participants about their writing experiences, leaving the results open to speculation (and stereotyping).

A study of rape survivors (Brown & Heimberg, 2001) indicated that a single session of expressive writing about the rape reduced depression and social anxiety only for participants with a lower overall tendency to conceal personal information. Women who used more total words in the written narrative also were more likely to tell someone else about the rape during the one-month follow-up period (Brown & Heimberg, 2001). Brown and Heimberg (2001) suggest that to gain benefits from expressive writing, women who have experienced rape must first be *willing* to divulge their stories. For some populations, then, the desired outcomes of emotional and cognitive integration and self-regulation are not achieved through expressive writing alone; healing requires a state of mind already conducive to the exercise.

A study of lesbian-identified women (Lewis et al., 2005) further illustrates the importance of contextual life factors in the efficacy of expressive writing to reduce trauma-related symptoms. The expressive writing instructions specifically evoked

“stressful and traumatic experiences and/or recurring problems related to sexual orientation” (Lewis et al., 2005, p. 153). Lewis et al. (2005) discovered no effect on physical (upper respiratory) symptoms but found that lesbians who reported being less open about their sexual orientation (on an Outness Inventory) evidenced decreased confusion and lower perceived stress following the expressive writing task. Participants who were more “out” however, reported *more* confusion and distress at follow-up. An analysis of essay content revealed that lesbians who are more open experienced “different types of stressors (e.g., violence, discrimination, rejection), (...) in more arenas (work, family, friends) and with greater intensity” than those who were less open (Lewis et al., 2005, p. 155). For example, one woman wrote about the painful experience of being separated from a child she had helped raise:

Trying to see her without the mother’s permission would have only further traumatized all of us. The mother wouldn’t let me see the child because her new partner wouldn’t permit it... it is now many years later and I am still deeply affected by this. (Lewis et al., 2005, p. 155)

In contrast, a woman who was less “out” wrote about troubles with her immediate family:

I have a hard time being open with my family. Only one side of the family knows I am gay. My brother at Christmas several years ago “outed” me in front of them. It was horrible (...). Ever since that time there has been tremendous tension for me with my family. (Lewis et al., 2005, p. 155)

Whereas lesbians who are less open may develop new private coping mechanisms through expressive writing, lesbians who are out and confronting the consequences of social stigmatization may find personal narrative less ameliorating for their concerns.

The theoretical basis for expressive writing studies aligns with my model of healed consciousness in the physiological domain. Therapeutic interventions use the Pennebaker paradigm to help women gain integrated awareness of scattered memories, sensations, and thoughts; initiate changed patterns of thinking and feeling; and assert control over their perceptions and actions. These changes sometimes lead to decreased stress and improved physiological health; however, the wide variation in outcomes among breast cancer patients, survivors of IPV and rape, and lesbian-identified women suggest limitations to the expressive writing approach. The factors that shape how women interpret knowledge of the self and world constitute a more complex assembly than measures of physical and mental health may encompass. In Chapter 6, I critique the methodological and conceptual deficiencies of expressive disclosure research on women using feminist analyses of social research, gender, and emotion.

### **Literacy Practices and Psychological Healing in**

#### **Literary Writing**

In this section, I discuss how the psychological concepts of the unconscious, narrative, and listening construct understandings of healing literacy practices for women in formal academic and other adult learning settings and in private (individual and familial) contexts. In this realm of consciousness my interest moves from physical, symptomatic changes to more descriptive, mentalistic changes in the psyche. I draw my sample from research on writing and reading in the liberal arts and humanities rather than psychology. Authors describe and champion the use of personal narrative writing and storytelling for personal relief, emotional skill-building and cultural empowerment for women. Developing empathetic connections, greater receptivity to change and multiple

perspectives, and increased personal agency occur through processes of divulging unconsciously-held experiences, (re)constructing the self (or selves) in narrative form, and collaborating with supportive listeners. Although not all authors in my sample explicitly self-identify as feminist, they express concern for social inequities and a desire to use literacy practices to compel both individual and broader social changes.

### **The Unconscious: “Forming” the Intangible**

The psychoanalytic idea that non-conscious, unarticulated mental and bodily processes affect conscious functions is a key component for many authors in explaining the benefits of literacy practices for women. In her memoir *These are My Sisters: A Journal from the Inside of Insanity*, Lara Jefferson (1974) evokes the empowering potential of putting intangible experience into words:

The very fact that a thing—anything—can be fitted into a meaning built up of words, small black words that can be written with one hand and the stub of a pencil, means it is not big enough to be overwhelming. It is the vast, formless, unknown and unknowable things we fear. (p. 25)

Gabriele Rico, scholar of writing and creativity and author of the popular books *Writing the Natural Way* and *Pain and Possibility: Writing Your Way through Personal Crisis* (which is influential in popular work on writing and healing), suggests that in writing, an author can acknowledge parts of experience that she has fearfully attempted to avoid. Citing Alice Walker, Rico (1994) explains that internal walls that women build against pain provide only a temporary refuge that, in the long run, prevents growth and creates barriers to understanding oneself and connecting with others (p. 203-204). Attempting not to feel pain distorts and dims awareness, and repressed feelings may take new,

pernicious form in the unconscious. Unacknowledged pain and fear lead to the traumatic outcomes of disconnection and isolation, closure and stagnancy, and perceived helplessness, which women may express in personally and outwardly destructive ways.

Writing and reading are tools to help “mediate our unease, uncertainty, sadness, imbalance” (Rico, 1994, p. 200) and bear the painful events that inevitably populate a life. Releasing and shaping the unknown into a “known” form requires courage to breach unfamiliar territory, confront one’s assumptions, and manifest the “constructed realities” of consciousness into something the author (and readers or listeners) can analyze and revise (Florence, 2000, p. 431). In taking the risk to explore buried experiences in writing, the author may find that her vulnerability to pain does not produce helplessness, but rather is the source of healing and growth. Andrea Sandke, an English Master’s degree student of Gabriele Rico describes how writing and reflecting on her own work brought an old assumption to light:

In my *Writing the Natural Way* notebook, one recurring image is that of hands (...). How was I before? “Closed, small fingers,” “thumb bending inward,” “opening only to crouch”—I was frightened, closed away. Why did I close? “Because the hand never comes.” The hand is the hand of my mother (...).

Through my writing, I became aware of an assumption made long ago and acted upon ever since. I verbalize this assumption, and suddenly I can question its validity. (Rico, 1994, p. 207)

Another student, Lakiba Pittman, used writing to help restore a personal and public voice that was stifled after she was raped by two men. She explained that after the incident, she was no longer able to sing to express herself. For Lakiba, the act of “doodling” shapes

and “writing vignettes to go with the shapes” provided an alternative expressive form that eventually led her to regain her singing voice and the ability to tell her story publicly (Rico, 1994, p. 211). Lakiba’s poem “Wondrous Ride” describes a beautiful, unpredictable journey made possible by embracing “Polarities of heart / and mind” that “free the soul / from certainty, / from definition / from stagnation” (Rico, 1994, p. 211). Lakiba uses art and writing to step into the formless gray space between polarities and accept the unknown as her source of freedom, growth and, ultimately, healed voice. Sharing her story aloud and leading the writing class in an African chant represented a transformational experience in Lakiba’s healing process.

Outside of the university setting, writing instructor Sandra Florence (2000) reveals how tapping the unconscious in literacy practices can help women who face multiple personal and social barriers regain a sense of relatedness, receptivity, and transformative potential. Florence formed a writing group at Las Madres, a social services organization for “at risk” women and their children. Most of the women in her group were referred to Las Madres through the courts or Child Protective Services, had substance abuse and addiction problems, had a history of abusive relationships with men, and may have abused or abandoned their children (Florence, 2000, p. 418). Although the women occasionally had been required to write reflectively when they had broken program rules, Florence (2000) wanted the writing group to be a separate, peaceful time when the women could “simply focus on themselves” and be with each other in a supportive and nonthreatening space (p. 417-418).

The activities that Florence describes focus on creative, honest self-expression and within-group reading and listening. One activity, called the Soul Map, involved

drawing a visual representation of one's current state of life, selecting a thematic word or phrase, and describing (in writing) the word in relation to the drawing. Florence (2000) observes that (similar to Lakiba's experience above) the drawing activity helped the women initially to shake off heavy cloaks of silence. The women moved past fear and reluctance to name some of their burdens and desires. Their words included *frustration*, *isolation*, *loneliness*, *obstacles*, *life*, *nature*, and *family*. Cynthia, an African American mother of three who suffered from alcohol problems drew a bleak desert island with a coconut tree. (Cynthia hated coconuts.) She also drew a roller coaster that ended abruptly with a drop of blood and explained, "I feel sometimes like just going over the edge" (Florence, 2000, p. 421). Despite the focus on problems and struggles, the drawing, writing, and discussion activities elevated the energy and mood in the group, and the women that day became eager to create and share their texts (Florence, 2000, p. 422).

In sessions following this initial image-to-words activity, Florence perceived a heightened desire among the women to articulate their lives. Exchanging feelings and perspectives with other women in the group enabled the participants to recognize patterns in the themes that they described. In particular, many of the women shared experiences of obsessive, abusive relationships with men and destructive consequences for themselves and their children. Giving voice to their struggles and weaknesses also stirred a sense of communal endurance and survival that enabled them to begin to see their lives as journeys in process and pictures that they might re-imagine (Florence, 2000, p. 423). Over subsequent sessions, Florence observed that Cynthia's writing and speaking became less choppy, less unfinished, and less hesitant. The change from fragments to sentences was emblematic for Florence of the intersections between language, life, and changed

consciousness. Writing and sharing their words aloud brought form, meaning, and brief transcendence of “parts of [the women’s] lives that have been shut off before” (Florence, 2000, p. 417). Having breeched unconscious barriers, the women began to individually and collectively move beyond “crisis narratives” into new forms of writing and new modes of critical action (Florence, 2000, p. 436-437).

Poet and scholar Judith Harris (2003) takes an explicitly feminist psychoanalytic perspective in her exploration of women’s confessional writing in published literary works and creative writing classrooms. Citing poets Silvia Plath, Anne Sexton, Sharon Olds, and Linda McCarriston, Harris (2003) defines confessional writing as writing that inscribes a personal chronicle of suffering, resistance, reconciliation, and healing (p. 1). Harris (2003) argues that transferring bodily pain into symbolic space allows the writer to expose and shape the repressed, raw material of experience. In verbally “signifying” pain, the writer takes ownership of her relationship to pain and is able to discard the burdens of guilt and shame that had enforced her silence (Harris, 2003). Harris cites Charlotte Perkins Gilman’s “The Yellow Wallpaper” to illustrate women’s use of confessional writing for individual and social healing. “The Yellow Wallpaper” is a fictionalized portrayal of Gilman’s attempt to follow a prescribed “rest cure” for her own bouts with “melancholia” and nervous breakdown (Harris, 2003, p. 37). Although the narrator of “The Yellow Wallpaper” descends into insanity, Gilman (1913) unapologetically decided to “cast the noted specialist’s advice to the winds.” Gilman returned to her work of writing and both escaped the misguided medical “treatment” and overcame the traumas that had initially caused her depression (Harris, 2003, p. 38). In exposing the terrors of women’s physical and psychological entrapment, “The Yellow Wallpaper” defies a

misogynistic medical tradition and seeks to save other women from Gilman's narrowly avoided path to madness. In this example, women's confessional writing is an active, self-assertive process that uses voice to construct a self that refutes victimhood.

Transforming fragmented, unarticulated experience into words to manipulate on a page stimulates reconnection to the self and others, openness to changed ways of being, and renewed self-empowerment. As Harris (2003), Florence (2000), and Rico (1994) demonstrate, women's self-discovery and exposure through literacy practices also inspire other women to follow similar healing paths.

### **Narrative: "Storying" Life**

Throughout the 1980s, developmental psychologist Jerome Bruner elaborated a theory of narrative as an "instrument in the construction of reality" (Bruner, 1991, p. 6). Bruner hypothesized that humans capture and represent knowledge of the self and world in the form of stories that shape how we interpret our immediate experience, remembered past, and anticipated future. Feminist authors and researchers, particularly women-of-color, "Third World," and postcolonial feminists, have explored the healing function of women's stories as tools of shared coping and connection and vehicles for feminist uplift (Collins, 2009; Minh-ha, 1989; Radner, 1993). Trinh Mihn-ha (1989) describes how healing for present generations of women often relies on establishing a connection with the "long thread" of narratives from past mothers, grandmothers, and great-grandmothers:

Each woman, like each people, has her own way of unrolling the ties that bind.

Storytelling, the oldest form of building historical consciousness in community constitutes a rich oral legacy, (...) especially in the context of writings by women of color. She who works at unlearning the dominant language of "civilized"

missionaries also has to learn how to un-write and write anew. And she often does so by re-establishing contact with her foremothers. (p. 148)

Speaking, writing, and maintaining connection to women's histories through stories transfers the healing power of self-definition to a collective historical consciousness. For example, Collins (2009) stresses that in African American culture and for Black women especially, the blues tradition is a site of healing self-definition and community connection (p. 116). The recordings of the classic blues singers of the 1920s, including Bessie Smith, Bessie Jackson, Billie Holiday, Nina Simone, and Esther Phillips, represent the first "documents" of working-class Black women's standpoint and have profoundly shaped Black women's evolving consciousness (Collins, 2009, p. 117). The messages contained in blues "texts" poetically defy the controlling images of White, patriarchal culture used to justify Black women's objectification and oppression (Collins, 2009, p. 117). Due to the historical restriction of literacy for most Black women, Black women's writing only recently has gained prominence in African American culture, and Collins (2009) notes that Black women's narratives frequently incorporate themes from the blues tradition (p. 120).

For marginalized women, oral storytelling is an essential component to individual and collective healing prior to and accompanying written literacy. In exploring the literacy practices of Iranian Jewish women, Goldin (2009) comments on the inter-generational healing that comes with *Dard-e del*, or "talking of the 'aching heart'" among small gatherings of women:

*Dard-e del* (...) served many functions. It worked as a healing tool, as a source of empowerment, as psychotherapy, and as a Middle Eastern version of a "support

group.” This custom also created a reservoir of stories that circulated among women before they were cognizant of the power of written words. Generations later, Iranian Jewish women would reach back to this collection of oral history to record their mothers’ stories, to go *beyond talking themselves free to writing themselves free*. (p. 93, emphasis mine)

Goldin (2009) includes herself in the group of women “writing themselves free.” She emphasizes that her desire to find “her story” among the lives of writers who came before her inspired her to search for Iranian Jewish women’s literary legacy (Goldin, 2009, p. 88). Uncovering a history of suppression, suffering, and silencing, Goldin’s journey becomes a personal healing journey of connection, voice, and empowerment. For centuries Jewish women of Iranian descent suffered the dual oppressions of sexism and anti-Semitism in a predominantly Muslim society (Goldin, 2009, p. 89). Their lack of access to financial security, education, freedom of movement, and freedom of speech stifled literary production but spawned a rich oral tradition from fables to wedding songs. Even when Iranian Jewish women began to write and publish poetry and prose, cultural taboos against writing personal histories stalled work in this genre until just the last decade. Goldin’s (2009) research recovers, reconstitutes, honors, and learns from the narratives of women who otherwise would pass away silently. Goldin (2009) also incorporates into her own memoir stories of previous generations of women “who had no lasting voices of their own” (p. 119), to weave herself and her daughter into a narrative stretching beyond their own lifetimes.

Autobiographical storytelling serves healing functions also in the context of contemporary writing classrooms. Karen Paley’s (2001) ethnographic study of the

process, philosophy, and outcomes of teaching first-person writing provides several examples of healing experiences for women students. Composing personal narrative (or expressive writing) essays that reflect the student's sense of herself and individual and cultural history enables the student to observe, connect, and reconstruct patterns of thought and behavior that shape consciousness. One student, Catherine, struggled to portray the ambivalent pain and anger she felt toward her abusive, alcoholic father, who had recently died (Paley, 2001). Through several sessions of sensitive yet structured critique by her teacher, Helena, Catherine moves through a process of internal digging, finding words, naming, renaming, scanning her feelings, and producing a story that feels authentic. The process is difficult, but Catherine also expresses a pleasure, an opening, in her thinking that encourages her to continue: "I guess I expected after writing it, to have kind of been done with it, and now I feel like, and this is good, I want to go back and re-work it and re-do it" (Paley, 2001, p. 98). Catherine revises the essay several times, re-examining the correspondence between her authentic feelings and the words that she had written, sometimes changing the words and sometimes feeling assured of their resonance. Working through her experience on paper and with the support of her teacher gives Catherine a sense of grounding and direction. Additionally, sharing her story connects her to Paley, who sat as a quietly active presence in the classroom and student-teacher meetings. Paley herself had written an essay on her experience with family alcoholism, and remembering that Catherine had expressed interest in reading it, she provides a copy to Catherine at the end of the semester (Paley, 2001, p. 104). Their exchange of unrelated-but-related narratives reveals what Minh-ha (1989) describes as the "long

thread” (p. 149) of stories that are “fragments of/in life, fragments that never stop interacting while being complete in themselves” (p. 143).

Other students in Paley’s ethnography experience healing in diverse ways. An African American student, Tanya, initially took the writing class to improve her grammar. She had low confidence in her writing because she previously had been criticized for her use of Black English (Paley, 2001, p. 152). Tanya’s hesitance dissolves, however, through honest conversations with her teacher, Debbie, and through exploring the topic of racism in writing that she shares with the class. Debbie identifies with Tanya’s discomfort at being a student of color in a majority White institution, and she encourages Tanya to focus first on ideas rather than grammar. Tanya “comes to voice” through writing and sharing essays that incorporate her experience with personal and institutional racism. Work-shopping the essays with her mostly White classmates gives Tanya the opportunity to be heard and also to listen – to generate dialogue – about a topic that deeply concerns her. Paley (2001) observes that “the experience of sharing some of what life is like for Black people to her White classmates and of having them listen with a combination of identification, respect, and discomfort enhanced [Tanya’s] self-confidence,” her love of writing, and her enthusiasm for teaching writing (p. 163). Another student, Janet, wrote about feeling unjustly abandoned by her grandmother due to a rift within the family over which she had no control. The essay was a piece that she had written in high school, and Janet appears more concerned with her grade on the project than the personal significance of the work (Paley, 2001, p. 61). While Janet’s writing appears unconnected to her personal healing journey, the project repairs a wound between Janet and her mother. Janet’s decision to read drafts of the revised essay to her

mother sparks new dialogue between the women that improves their mutual understanding of the event and each other's perspectives (Paley, 2001, p. 65). These classroom examples reveal that the healing capacity of narrative relates to its storytelling roots, sparking not only re-construction of past events but also new connection with the stories of others. Achieving this connection depends crucially on the practice of listening, which enables fully engaged reading to take place.

### **Listening “Generously”: The Quiet Side of the Story**

As I described in Chapter 3, empathetic listening (as a form of reading) in literacy practices is fundamental to changing consciousness because listening creates space for dialogue. Attentive and empathetic listening to a text empowers both authors and audiences to engage authentically with material that was once considered “other.” Texts alone, without entry into consciousness, cannot communicate pain, inspire identification, or instigate change (Harris, 2003, p. 21). In the previous examples in this section, writers and readers benefit from exposing the unconscious and constructing narratives because they take time to absorb and contemplate the textual product. Sometimes in a private setting, such as when a woman silently reads “The Yellow Wallpaper,” but often through the communal sharing and listening of an intimate group such as the *Dard-e del* or a student-teacher meeting, listening makes possible the emotional intimacy that develops through writing and reading.

In the case of writing classrooms, listening enables readers and writers to overcome fear and alienation by “using difference as a resource for building and strengthening our ongoing relationships with one another (...) and to strengthen the community we want to have with others” (Florence, 2000, p. 442). Composition

practitioner Trudelle Thomas (1994) advocates for a pedagogy of “generous listening” that cultivates temporary identification with and thoughtful consideration of foreign points of view (p. 101). Thomas (1994) draws on the concept of “connected knowing” developed by feminist scholars Mary Belenky and colleagues. “Connected knowing” stems from relationships of caring, interest, and empathy between the knower and the object (or subject) of knowing (Thomas, 1994, p. 101). Connected knowers gain access to knowledge by forming closely identified relationships and vicariously sharing others’ experiences. The women of Las Madres at first seemed to have little in common aside from their collocation in the writing group, but as they listened to, agreed with, and questioned each other’s voices, the women became a healing community even for Florence herself. Through listening to the women’s stories, Florence (2000) begins to see herself as not a teacher but “a mother, a daughter, a woman who has had addiction problems, struggled with her role as a young parent, been a bad parent at times, and even experienced domestic violence” (p. 436). Hearing the women’s narratives about their similar experiences enables Florence to reconnect with her own authentic story. In this example, listening in literacy practices is an act of compassion, humility, and communal support for change; to listen responsibly and responsively is to “reaffirm one another’s lives and the possibility of those lives changing” (Florence, 2000, p. 431).

Achieving an authentic narrative requires consciously listening to and incorporating the voices of others. Although one’s voice always develops in interaction with other voices, listening enables writers and readers to perceive and reflect on the common qualities of their perspectives. Anne Gere (2000) argues that moving from silence to “voice” entails putting one’s view in relationship to other views. Her process to

cultivate an authentic voice in literacy practices involves increasingly intimate sharing and listening. Gere (2000) develops her writing beyond school assignments and “locked diaries” by sharing her work with responsive friends and colleagues, and she eventually writes a book on communal literary sharing in early American women’s clubs (p. 29). Gere (2000) observes the *ethical* elements of listening and gaining voice, however, when she faces the task of speaking *for others*, namely, her aging mother and her daughter who had suffered neurological damage (p. 30). Gere recognizes that constructing an authentic voice that avoids colonizing the “other” requires intimate, attentive listening over time. Her own voice is partly a common voice that she shares with her mother, daughter, and many other individuals whose perspectives have influenced her perception. Gere’s “authentic” narrative leaves her not with a stable, authoritative “I,” but rather a fluid, relationally located “I” whose authenticity derives from human connection. Gere (2000) resists becoming “shapeless as mist,” but also resists hardening into what Virginia Woolf calls an “I” that casts an obliterating shadow over the landscape behind it (p. 32). A voice that is able to listen generously, identify with the other, and respond with empathy is a voice that “lets the subject speak” and avoids the “delusion of mastery” that debilitates fruitful dialogue (Thomas, 1994, p. 105).

The psychological concepts of releasing the unconscious, constructing a narrative, and listening with empathy shape how some women and feminist authors perceive the healing function of literacy practices for women. Writing and reading autobiographical narratives enables women connect to their histories and each other, become open to new ways of perceiving experience, and find motivation to enact changes. My critique in Chapter 6 identifies some critical omissions in these theorized changes, however, based

on the gendered influence of contrary emotions and rigid institutional spaces that hinder women's progressive change.

### **Literacy Practices and Socio-Cultural Healing in**

#### **Trauma Writing**

In this section, I examine how literacy practices heal women's traumatized consciousness on a socio-cultural level by influencing the construction of identity and the evolution of discourses. Using examples from women's and feminist scholarship on women's autobiographical writing, I explore how literacy practices shape new meanings for individual identities and broader cultural ways of being. I explored in Chapter 2 how identity and discourse frame understandings of consciousness in a socio-cultural context. Identity comprises sets of meanings that people hold for themselves that locate them in relation to other parts of their environment (Burke, 2004; Sutherland, 2005). Feminist scholarship sees identity as always already *gendered*: Identity is "the whole complex of factors contributing to the configuration of the gendered self as this self interacts with the world" (Brown & Goozé, 1995, p. xiv). Gender is a discursive construct that imposes social, cultural, and psychological meaning on biological sexual characteristics (Shields, 2002). Political stance, race, class, sexual orientation, nationality, and ethnicity are just a few of the socially salient factors that intersect with gender in the construction of identity. From a socio-cultural perspective, identity arises relationally or comparatively within a particular context; individual identity is not a static state that is "achieved" but rather a dynamic, fluid, multiple, and emergent process (Sutherland, 2005).

Meanings that create gendered identities are located within broader discursive fields that stipulate how subjects of a particular identity are supposed to think, value, and

act in a particular cultural and historical context (Sutherland, 2005). Discourse is defined as a confluence of textual, material, and social *practices* that are associated with particular worldviews and ways of being (Burgess & Ivanič, 2010). Discourses are lenses through which subjective consciousness perceives and interprets information, categorizes individuals and events, and justifies power relations (McBride & Mazur, 2006, p. 229). In the view of feminist Teresa de Lauretis (as cited in Sharpe, 1995), discourse constitutes the scope of interpretive possibilities for identity, even as the discursive field continually changes through the movement of history. Women interpret and reconstruct identity “within the horizon of meanings and knowledge available in the culture at a given historical moment” (Sharpe, 1995, p. 79).

Literacy practices are part of the textual, material, and social practices that constitute the historically evolving discursive field in which consciousness and identity form and re-form. Although consciousness “sees” through discourses, a subject may or may not be aware of the discourses that structure her consciousness (and her interpretation of her identity). Feminist scholars theorize that interpreting one’s identity in a new way and/or gaining access to different discourses through literacy practices constitute changes of consciousness that in some cases enable healing (e.g., Fryer, 2006; Julier, 1994; Sutherland, 2005). Women’s autobiographical trauma narratives create new discourses that radically expose wounded subjectivities that were previously suppressed or denied. The creation of new discourses enables new identities to emerge in dialogic interaction with a textual artifact. The emergence of an empathetic community that identifies with and supports the wounded subjectivity leads to greater cultural validation of the discourse and the creation of supportive institutional spaces. Fitting within the

model of healing that I outlined previously, the examples that follow illustrate how women's literacy practices of various forms enable empathetic connection and identification with new discourses, dialogic (re)formation of identity, and the growth of outlets for active responses.

### **From Discursive Shift to Public Activism: The Clothesline Project**

One of the most readily observable impacts of the second-wave feminist movement in the United States was to transform the way that American culture perceives violence and abuse against women and children. Second-wave feminists argued that the private sphere directly informs knowledge and action in the public sphere, and an important source of knowledge of the self and the world are experiences that lay outside the bounds of dominant patriarchal, masculinist discourses (Evans, 2003). This shift toward publicizing and politicizing the "personal" meant that women's stories of violence, abuse, harassment, and discrimination entered the public sphere with a new discursive frame and backed by a newly interested and supportive community. Sexual violence, previously considered "unnatural acts" and blamed on a women's moral failings, was re-constructed as violence perpetrated within an oppressive, patriarchal cultural regime and family structure (Payne, 2000, p. 124). Feminist, psychological, and anthropological discourses since the late 1970s have encouraged women's "breaking the silence" of abuse as a step toward both personal healing and treating a larger cultural ill (Payne, 2000, p. 124).

The explosion of published autobiographies and collections of abuse survivor narratives aimed at both scholarly and popular readership attests to women's (and men's) positive responses to the injunction to "be heard." Early anthologies include *I Never Told*

*Anyone: Writings by Women Survivors of Child Sexual Abuse* and *The Courage to Heal: A Guide for Women Survivors of Child Sexual Abuse*, which released its twentieth anniversary edition in 2008. The spreading popularity of survivor texts (and the cultural discourse linking “voice” to healing) continues in recent years and reflects the influence of feminist approaches to narrative psychotherapy. From clinically-focused guides such as *Narrative Therapy for Women Experiencing Domestic Violence: Supporting Women's Transitions from Abuse to Safety*, to the more popular “self-help” collections *Women Escaping Violence: Empowerment through Narrative* and *Real Rape, Real Pain: Help for Women Sexually Assaulted by Male Partners*, women’s experience serves as an entry point for cultural discourses on healing through “authentic” personal storytelling. Additionally, a host of less overtly gendered collections of survivor stories, such as *Taking Narrative Risk: The Empowerment of Abuse Survivors* and *Voices of Survivors: Silent No More... Survivors Speak Out*, evidences the growing awareness of abuse as a cultural phenomenon, not just a “women’s lib” issue.

Feminists interpret the impact of survivor narratives against a philosophical and political backdrop that accentuates publicizing the personal to spread social awareness and action for justice. In the early years of the second-wave movement, this discursive environment created fertile ground for the creation of new forms of public spaces and institutions, such as health clinics, shelters, bookstores, and coffeehouses, which specifically addressed women’s needs (Enke, 2007). Women also took part in new displays of personal and collective identity such as Take Back the Night, The Clothesline Project, The Vagina Monologues/V-Day, and, more recently, SlutWalk. These institutions and endeavors arise from private shifts in consciousness that lead to new

forms of thought, identification, collective acknowledgment, and social action. The literacy practices that accompany these shifts are both outcomes and seeds of change. In the case of the Clothesline Project, the acts of writing and reading *themselves* constitute part of the healing transformation.

The Clothesline Project is perhaps one of the best known examples of women's literacy practices offering personal and cultural healing at the level of meaning, identity, and discourse. Begun in 1990 by a women's organization in Cape Cod, MA, the project has spread across most U.S. states and to several other countries (Clothesline Project, 2013). On a canvas of t-shirts strung in public settings, the Clothesline Project creates a safe space of witnessing and solidarity for the victims and survivors of all types of violence against women *as women*. The idea is powerful in its multi-layered simplicity. Each woman tells her story in her own way, with words or artwork, on a shirt that she then hangs on a clothesline with the shirts of all of the other participants. Every new addition to every new clothesline around the world amplifies the community of voices calling for healing and transformation. The Clothesline Project Web site focuses mainly on the goal to bear witness and enable immediate, personal healing for survivors and victims of violence against women:

[The Clothesline Project] acts as an educational tool for those who come to view the Clothesline; it becomes a healing tool for anyone who make a shirt – by hanging the shirt on the line, survivors, friends and family can literally turn their back on some of that pain of their experience and walk away; finally it allows those who are still suffering in silence to understand that they are not alone.

(Clothesline Project, 2013)

Additionally, founder Rachel Carey-Harper and other writers stress the function of the project to extend healing on a “global scale” beyond the individuals who take part in particular installations (Carey-Harper & Goldstein, 1994). The text of the Clothesline Project intertwines personal healing with social activism, simultaneously relieving women’s silence and challenging the cultural forces that *keep* women silent and permit violence to continue. Laura Julier (1994; 2001) argues that the focus on “airing” stories that had been stifled, suppressed, or marginalized constitutes a *discursive* intervention. Working against the dominant discourse that constructs women’s experience as private and mute, the project defies discursive boundaries and allows hidden subjectivities and identities to emerge:

To define incest, for instance, or wife-battering as a private matter is to isolate the experience from the social structures and relationships which give rise to the violence (...). To go public (...) challenges existing power relations, by contesting the authority to name and define experience. To go public can open the interpreting of experience to many voices, to conversation, to question, to a dialectical negotiation as the individual is able to move into and explore different subject positions in naming her experience. (Julier, 1994, p. 254)

When a woman gains “control over what is said and how her experience is represented” (Julier, 2001, p. 361), she finds new ways to relate to herself and the world. When women *collectively* adopt an empowered subjectivity, and audiences collectively identify with that subjectivity, the project can transform the broader cultural “power relations within which the ‘text’ of their experience is voiced” (Julier, 2001, p. 361). The Clothesline Project constructs an intersection between private and public consciousness,

between personal and social healing, that opens channels for public conversation and acknowledgement of shared responsibility to fight violence against women. Women's "personal" problems are re-signified as part of "a socially produced conflict shared by many other women, and therefore subject to change through *collective* action" (Julier, 2001, p. 361). The ongoing discursive challenge enacted in writing and reading "texts" of the Clothesline Project dislodges and reforms consciousness at the socio-cultural level, the level of identity and discourse. A healing pattern of empathetic connection, openings to dialogue, and renewed agency emerges from women's literacy practices that change the discursive rules that structure identities and social relationships.

### **Feminist Critical Scholarship: Healing in Academic Pursuits**

The transformational influence of women's literacy practices pervades not only popular literature and community activism but also academic contexts. In this section I explore how scholarly work on women's autobiographical writing contributes to healing cycles of textual production, subjective identification, discursive shifts, and healing personal and social change. My examples illustrate the complex, non-linear relationship between women's authorship, scholarship, and healed consciousness.

Julie Fiandt's (2006) article on women's healing narratives investigates commonalities in the autobiographical writings of Aurora Levins Morales and Linda Hogan, two living, biracial feminist author/activists who seek to heal personal and cultural traumas by writing history from new perspectives. Both Morales and Hogan view history in its currently available forms as a cause of illness and rupture, "a wound in need of recognition and healing" (Fiandt, 2006, p. 570). Both authors also write from the view of what Fiandt (2006) calls "wounded women literary healers/activists" (p. 568). Morales

and Hogan define healing in terms of wholeness, inter- and intra-cultural dialogue, changed consciousness, and social agency. The stories of Latina, American Indian, and Anglo women healers constitute “undertold stories” whose discursive silencing leads to a dearth of knowledge crucial for cultural healing. Morales overtly aligns her task with feminism and stresses that her construct of healing is a political stance: “a politics of integrity (...) that sacrifices neither the global nor the personal impact on the lives of individual people” (as cited in Fiandt, 2006, p. 572). Hogan identifies less with feminism and more with a politics of cultural uplift. She locates personal and cultural wholeness in relation to political agency and the potential for “actions toward social change and history that are more inclusive of Native American people” (Fiandt, 2006, p. 580). Morales and Hogan emphasize that weaving their personal histories *as women* into the histories of their cultures creates new literary and discursive space for the “wounded woman healer.”

Seen separately, Morales and Hogan appear to have no connection other than to be prolific women authors who have written autobiographical texts. Fiandt’s scholarship, however, unifies Morales and Hogan under a shared political identity and connects their work to particular discourses of trauma, healing, and literacy practices with the goal to generate healing transformation. Literacy practices (and changed consciousness) occurring beyond Morales’ and Hogan’s original works brought their texts to Julie Fiandt and brought Fiandt’s work to me in my inspection of meta-content. Fiandt (2006) identifies her particular (academic) discursive field as “feminist autobiographical and postcolonial/U.S. Third-World feminist literary criticism” informed by interests in “Women’s Studies, literature, health, history, and spirituality” (p. 567). This self-location tells the reader some, but not nearly all, of the discourses and identities through which the

author interprets herself, the world, and women's writing. By naming these discursive identities, Fiandt participates in solidifying and perpetuating their existence, and she confers credibility to the identities that she ascribes to Morales and Hogan. Through her analysis, Fiandt constructs and defends the identity of wounded women literary healers with (feminist) activist intentions. Her construction gives meaning to the existence of such an identity and spreads its availability to readers (like me) who have not encountered the original texts of Morales and Hogan. I understand the article through my discursive lenses as (among many others) a feminist student of Women's Studies interested in women's literacy practices and healed consciousness. After reading the article, I might identify with the concept of a "wounded woman literary healer/activist," seek out those authors' works, and incorporate their discourses into my consciousness to help me to face the personal and cultural challenges that I experience. For many researchers, this sequence of literary creation, discursive construction, subjective identification, and personal and social action lies at the heart of the evolution of U.S. and global feminism (e.g., Aikau, Erickson, & Moore, 2003; Campbell, 1983; Campbell, 2002; Carlson, 1992; Gring-Pemble, 1998; Licona, 2005; Schaffer & Xianlin, 2007; Zobel, 2009). The existence of institutional Women's Studies programs, which often grew from the writing, reading, and teaching of feminist texts in English Departments (Astin & Parelman, 1973), provides continued space and support for the connections and identifications, dialogic interactions, and development of agency that women's literacy practices inspire.

The work of Fiandt, myself, and others interested in writing, reading, and healing as feminist political endeavors falls within a dynamic and continuing cycle of discursive

production, identification, and personal and cultural change related to scholarly pursuits. The following shorter examples illustrate some other contexts where feminist scholarship links healing literacy practices to a discursive view of changed consciousness.

Megan Obourn (2005) focuses on literary techniques that convey otherwise unrepresentable experience. Obourn (2005) argues that the “traumatic” aesthetics of Audre Lorde’s poetry serve a healing function for minoritarian identities and subjecthood trapped in the silencing discursive boundaries of American “liberal multiculturalism.” Obourn (2005) defines liberal multiculturalism as the “post-1960s hegemonic discourses of identity and difference” that resulted from the “incorporation of civil rights, Black power, second-wave feminism, and other powerful radical discourses of identity politics into liberal individualist thinking” (p. 240 n2). Obourn (2005) is not concerned with Lorde’s personal psychological trauma per se; rather, she takes the perspective that simply “being-in-the-world” for a woman of multiple intersecting minority identities can be traumatic when the dominant discourse fails to encapsulate her experience (p. 225). Obourn (2005) argues that in Lorde’s poetry, trauma is not literally “speechless”; trauma speaks a different language that abides by different rules and different meaning structures. Lorde’s lyrical combinations of visceral imagery, obscure symbolism, ambiguous pronouns, and flexibly plural meanings give the texts an expressive shape equal to the fragmentation, friction, and “irreconcilable multiplicity” associated with traumatized subjectivity (Obourn, 2005). In Obourn’s view, the purpose of conveying experience in a form that breaches hegemonic expressive norms is to provoke the reader to search beyond extant interpretive frames. This provocation has political consequences, compelling recognition of and identification with subjectivities “traumatized” and

suppressed by dominant discourse. From a socio-cultural perspective, Lorde's poetry contributes to healed consciousness as audiences loosen the binds of repressive ways of thinking, empathetically identify and connect with the discursively constituted "other," and resist convention with acts of "creative listening" (Obourn, 2005, p. 240).

Focusing on a more concrete form of trauma and misrepresentation, L. Fryer (2006) explores the stories of women in U.S. prisons as a counterpoint to the evils that she perceives in the U.S. criminal justice system and the U.S. political economic system more generally. Although Fryer (2006) does not use the poststructural terminology of "discourse" and "subjectivity," her argument clearly places the subjective stance of women prisoners (as observed in their autobiographical narratives) in direct opposition to the hegemonic discourses that unjustly silence and disenfranchise them. Fryer (2006) sees the women as victims of a system that "creates criminality" (p. 546) and has little interest in providing "justice" beyond positivist, Hobbesian punishment (p. 563). The women's narratives, "stories of identity formation, relatedness, and engagement" (Fryer, 2006, p. 549) reveal their overarching humanity and *lack* of difference from people on the outside. Fryer (2006) intends the women's narratives to "break through the stereotype of the prisoner" and enable the reader to empathetically identify with them (as Fryer admittedly does) across the discursive categories that construct prisoners and women of color as "other" (p. 549). Perceiving the women as mothers, grandmothers, peace activists, artists, students, and almost all survivors of abuse or neglect brings the women's lives into connection with the reader. Identification with the women spurs an opening of emotion and a desire for action. Fryer's (2006) solution comprises a discursive shift toward a more Aristotelian magisterial, or "teaching," justice system focused on social equity and

enabling compliance (p. 563). Literacy practices compelling changed consciousness to support a reformed justice system are integral to Fryer's pathway to socio-cultural healing.

The above examples illustrate how identity and discourse frame conceptions of women's healing literacy practices in the socio-cultural domain. Feminists emphasize the interlacing dynamics of women's active identity construction, the evolution of discourses in texts, and the ever-present opportunity for changed individual and collective consciousness. Reading and writing trauma texts promotes empathetic identification and connection, opens new conversations, and attains legitimacy and agency for wounded subjectivity. As discourses evolve and women continue to engage in self-reflective practices, healing (as I have defined it) of consciousness always is possible.

Overshadowing this rosy viewpoint, however, is an alternative perspective that I explore in Chapter 6 identifying the risks of discursive intervention and the limits of trauma discourse to interrupt and transform women's marginalized status in a patriarchal culture.

### **Conclusion**

In this chapter, I have used cross-disciplinary examples to illustrate how women's literacy practices promote healing in the physiological, psychological, and socio-cultural domains of consciousness. In the physiological domain, I surveyed studies that use a model of therapeutic expressive disclosure to test physical and emotional health outcomes related to personal writing. In the psychological domain, I explored how the concepts of the unconscious, narrative, and listening inform understandings of the healing capacity of literacy practices in non-therapeutic contexts. In the socio-cultural domain, I

examined how women's literacy practices in response to trauma construct identities and shape discourses that serve a healing function for individuals and societies.

In Chapter 6, I critique the ways that literacy practices have been associated with healing across all three domains of consciousness. Feminist understandings of gendered emotion, emotional labor, and discursive politics cast doubt on the physiological, psychological, and socio-cultural interventions that I have surveyed.

## Chapter Notes

<sup>1</sup> Paley's (2001) description of "expressive writing" captures the range of autobiographical literacy practices that my dataset covered. Paley (2001) defines expressive writing as a form that "takes the writer's own experience as its focus," uses "a narrational *I* that seems to be the actual voice of the person who writes," and "may isolate individual consciousness [or] represent the self in one or more social contexts" (p. 13). Mariolina Salvatori (as cited in Paley, 2001) calls this genre "the practices of the personal," which fall under several other names including "personal criticism, autobiographical criticism, narrative criticism, personal narrative, self-writing, life-writing, auto-graphy, confessional criticism, rhapsodic criticism" (p. 10).

<sup>2</sup> *Expressive writing* is not necessarily related to expressive disclosure experiments. (See note 1 above.)

## CHAPTER 6

### HEALING LITERACY PRACTICES: A FEMINIST CRITIQUE

In this chapter I present a series of critiques that expose limitations and omissions in the ways that scholars and authors have represented the healing potential of literacy practices for women across the three domains of consciousness. My critiques draw on critical feminist analyses of pathways to changed consciousness. The formula for healing grounded in caring connection, openness to dialogue, and fostering personal agency remains valid, but a lack of attention to structural inequalities related to gender and other identity categories weakens claims for healing in women. Because my dataset spans disparate disciplines and contexts, my critique draws on a range of perspectives that address the physiological, psychological, and socio-cultural elements relevant to women's literacy practices within each domain.

In the physiological domain, concerned with chemical and neural patterns, studies of women's expressive writing fail to acknowledge gender oppression as integral to women's emotional and cognitive responses to internal and external stimuli. Aside from the sexist methodological biases of androcentric research paradigms, feminist analyses also reveal major conceptual omissions in understandings of gender and emotions (Brody, 1999; Hochschild, 1979; Jaggar, 1989; Shields, 2002). In the psychological domain, the healing potential of releasing the unconscious, shaping a narrative, and listening attentively confront emotional and structural barriers to transforming consciousness. Critical scholarship on changed consciousness emphasizes the role of strong emotions – particularly shame and anger – in shaping the “work” of exposing and overcoming obstacles through narrative (Chavez, 2010; Goltz, 2011; Gunaratnam &

Lewis, 2001; McDonough, 2009; Probyn, 2005; Swiencicki, 2006). From a structural perspective, women's experiences in academia, from composition classes to higher education, illustrate ways that White patriarchal oppression hinders women's healing in institutional settings (Aikau et al., 2003; Davis, 1992). Constructions of healing in the socio-cultural domain often lack consideration of the capacity of discourse to segregate even as it unites. The proliferation of "traumatized" subject positions theoretically enables communal identification and empathy; however, the discourse of "trauma" is a discourse of subordinated *otherness* and *personal* wounding (Burstow, 2003; Miller & Tougaw, 2002; Payne, 2000; Quiney, 2007; Radstone, 2007). I examine the damaging political implications of trauma discourse for marginalized subjects.

In each section, I first review the arguments that I have presented regarding the particular components of consciousness, conceptions of healing, and women's literacy practices theorized to promote healing relevant to the given domain of consciousness. I then offer alternative views that cast doubt on some of the assumptions and approaches of the various arguments. My conclusions in the final chapter will suggest ways that future endeavors can remedy the deficiencies presented here.

### **Omission, Bias, and Misinformation in Physiological**

#### **Pathways to Healing**

According to recent theories in neuroscience, social psychology, and developmental psychiatry, one pathway to healing in the physiological domain is to stimulate neural connectivity and integrated body-mind feedback loops incorporating thought, memory, emotion, and sensory perception in present awareness (e.g., Fishbane, 2007; Kabat-Zinn, 1990; Siegel, 2006). Survivors of traumatic experiences may suffer

blockages to these feedback loops that impair their mental, physical, and interpersonal functioning. Cultivating a consciousness or mindset that openly and fully engages with ongoing experience reduces mental strain and physical tension, alleviating the suffering associated with internal and external stressors (Kabat-Zinn, 1990). As effective feedback loops enhance physiological functioning, they may also strengthen individual self-efficacy and ability to respond flexibly to negative emotions (Siegel, 2009). A sense of security and competence enhances one's capacity to maintain stable, emotionally reciprocal, and caring relationships with others (Siegel, 2001).

Research that examines the health effects of expressive writing captures the idea of integrative feedback loops using the concepts of “emotional and cognitive processing” and “self-regulation.” Authors theorize that expressive writing tasks bring one's full mental and emotional awareness to bear on a particular topic to relieve the strain of residual emotional disturbance, foster new, less threatening ways of conceptualizing the topic, and gain a sense of personal mastery (Booth & Petrie, 2002; Brown & Heimberg, 2001; Holmes et al., 2007; Lepore et al., 2002; Pennebaker, 1997). Expressive writing studies with women have shown health improvements for breast cancer patients and for some lesbian-identified women, but have shown contradictory results for survivors of intimate partner violence (IPV). (See Chapter 5 for summaries.)

Expressive writing studies warrant feminist critique from both methodological and conceptual angles. Methodologically, I identify the biases and deficiencies of the Pennebaker paradigm from a feminist perspective. Conceptually, I use feminist analyses of gendered emotion to consider the role of contextual power and status differences in shaping the physiological outcomes of women's expressive writing.

## **Methodological Critique**

By Pennebaker's (2002) own admission, the measures of the studies following his original paradigm are "terribly, terribly messy" (p. 285); ostensibly "objective" health indicators such as physician visits, immune markers, and self-reported mood or pain levels often provide biased and underpowered data, and the studies suffer from chronically non-representative sampling. A feminist critique of the Pennebaker paradigm expands on Pennebaker's assessment to highlight biases compounded by social privilege, androcentrism, and the limits of experimental methods for psychological research. Sampling inconsistencies skewed toward young, privileged White women (and students of psychology) systematically exclude people of other identity categories. Across the 146 studies surveyed in Frattaroli's (2006) meta-analysis, the average participant age was 29 years old, 66% of participants were female, 72% were Caucasian, 12% were Black or African American, 7% were Asian, and 5% were Hispanic or Latino; the mean level of education of study participants was some college (Frattaroli, 2006, p. 848). Median income is rarely if ever reported, but the disproportionate inclusion of college attendees likely slants the sample toward higher income groups. Although Frattaroli (2006) found that no participant variables moderated the effect size categories, studies do not often report means and standard deviations by gender (and even less often by race, class, ethnicity, or age), so even a large meta-analysis may be limited by small sample sizes for these variables. Sampling bias constrains the ability to generalize beyond a very limited population and promotes the silencing of marginalized groups. In a society where economic and cultural capital are dominated by a minority of economically privileged, White heterosexual men, the skewing of participant identities toward privileged White

women introduces many unanswered questions and certainly fails to attain generalizability beyond localized sample groups.

Feminist researchers also critique positivist, empirical methods in social research contending that the circumscribed and mechanistic nature of laboratory experiments creates a false sense of control and objectivity (Rienhartz, 1992, p. 96). The experimental method “leads to a particular blindness” with regard to the complexity of life experience beyond “measurable” variables (Rienhartz, 1992, p. 95). In attempting to systematically restrict the stimuli and variables that shape human behavior, expressive writing studies reveal the influence of researcher bias that leads to omission of relevant factors in women’s lives. For example, studies of women trauma survivors (such as breast cancer patients, survivors of IPV, or lesbian-identified women) do not acknowledge the fact that women are likely to experience multiple gender-based traumas aside from the trauma targeted in the expressive writing intervention. The *National Intimate Partner and Sexual Violence Survey 2010 Summary Report* concluded that more than one in five women have been raped and one out of every three women experiences violence by an intimate partner in her lifetime (Black et al., 2011). People of minority sexual orientation in the United States also are more likely to experience violence and traumatic events beginning in childhood than are heterosexual individuals (Roberts, Austin, Corliss, Vandermorris, & Koenen, 2010). Expressive writing researchers disregard these statistics entirely, assuming that only the trauma that the researcher has identified (e.g., cancer, rape, sexual discrimination) is the pertinent stressor. Pennebaker studies also lack data or discussion regarding participant histories of writing or journaling, which may affect participants’ levels of comfort with any type of writing and skew expressive writing results in favor of

confident writers. Some studies have analyzed personality characteristics such as emotional coping styles (Lumley, Tojek & Macklem, 2002; Stanton & Danoff-Burg, 2002), trait negative emotion (Hoyt & Yeater, 2011), and variables related to mindfulness (e.g., non-judgmental attitude, attentiveness, self-acceptance) (Moore et al., 2009), but attitudes toward written expression have not been considered important or have been inaccurately attributed to stereotypical gender differences.

By removing the research from the complexity of participants' lives, using non-representative sampling, and unsystematically cherry-picking variables, studies drawing on the Pennebaker model have amassed a wealth of descriptive data but achieved poor generalizability, reliability, and validity. The experimental environment is not a pure, power-neutral space, sanitized from the influence of culture, interpersonal relationships, and individual participant views and histories. My critique suggests that methodological paradigms that ignore these factors preclude researchers' ability to draw meaningful conclusions about women's lives and health.

### **Conceptual Critique**

The basic theory motivating the expressive writing paradigm is that writing (usually repeatedly) about one's "deepest thoughts and feelings" associated with a traumatic or stressful experience will prompt attenuated emotional reactions, more flexible ways of thinking, and more adaptive behavior patterns. A less painful emotional response and more coherent understanding of the event foster renewed self-confidence and capacity to change, which relieve physical symptoms associated with traumatic stress. In this model, the expression of emotion (positive and negative) is thought to mediate all of the healing effects, including physical, cognitive, and behavioral changes

(Laccetti, 2007; Lepore et al., 2002). From a critical feminist perspective, then, a major critique is that these studies fail to account for the personal and historical contextual factors that contribute to women's biochemical reactions and habitual expressive modes. Cultural misogyny and sexist oppression affect the physiological constitution of consciousness in addition to the traumatic events that may befall individual women (such as breast cancer, rape, and physical or verbal abuse). Patterns of thought, feeling, and behavior including literacy practices and their associated effects cannot be divorced from the countless other influences that shape women's lived experience.

The feminist argument for greater contextual attention is not new; feminists have levied demands for more socially informed and responsive concepts and tactics across many disciplines related to trauma and healing including neurobiology and neuroethics (Miller, 2010; Roy 2012), adult relationship therapy (Knudson-Martin, 2012), narrative therapy (Gremillion, 2004), trauma research (Brown, 2004; Burstow, 2003; Herman, 1997; Radstone, 2007), and research on gender and emotions (Brody, 1999; Hochschild, 1978; Shields, 2002). Knudson-Martin (2012) captures the feminist approach to contextualized emotion in reference to attachment theory:

[E]motions arise in particular social contexts. Sociocontextual emotion engages the neural system and thus serves as the interface between the individual and the outside world, thereby making it possible to communicate a shared relational experience. When emotion is conceptualized as the link between the individual and larger systems, feminist thought and attachment theory meet at the intersection of context and biology. (p. 300)

Although therapeutic expressive writing inhabits a conceptual field similar to other therapies, feminists have as yet paid little attention to expressive writing research. The few extant gender-sensitive analyses have been inadequate from a feminist perspective because they rely on essentialist views of gendered emotion and fail to interrogate the implications of cultural patriarchy and misogyny on women's physical and mental conditions. Feminist analyses of emotion, emotional expression, and health outcomes shed light on the shortcomings of expressive writing studies with regard to women in a patriarchal context.

Extant data on gender and physiological improvements from expressive writing are mixed, and attempts to explain and remedy deficiencies in gender-sensitive research fail to challenge sexist stereotypes. One study of college students (Manier & Olivares, 2005) found that men improved more over time than women, and a meta-analysis (Smyth, 1998) also suggested that male participants evidenced slightly greater health benefits; however, Frattaroli's (2006) much more extensive and recent meta-analysis found no correlation between health outcomes and participant variables including gender. In response to these ambiguities, a series of articles in a 2010 issue of *Sex Roles* critiqued the Pennebaker paradigm from a gender perspective, attempting to prescribe more systematic ways to evaluate gender's impact on expressive writing interventions (Bornstein, 2010; Langer, 2010; Range & Jenkins, 2010; Stickney, 2010). Although the critiques offer a nominally "feminist" perspective on the Pennebaker studies, a close reading reveals that they rely consistently on sexist stereotypes and essentializing assumptions that uphold rather than subvert gender-based inequalities, particularly in the depiction of men's and women's emotional needs and capabilities. I explore and critique

these gender-based analyses with the goal to expose the underlying misinformed assumptions regarding gendered emotion that influence expressive writing studies.

The gender critiques (and the experimental studies) uniformly and erroneously operationalize gender as equivalent to biological sex and do not acknowledge the possibility of gender identities outside of the masculine-feminine binary. This omission effectively silences the nearly one million U.S. adults who identify as transgender (Gates, 2011). The gender critiques also question some methodological problems such as reliance on self-reports (Bornstein, 2010) and the lack of thorough reporting of gender (Range & Jenkins, 2010), but they do not mention the biased sampling and inattention to participant histories, which I discussed above, that are pertinent to women's experience. Also, and most instructive for my argument, the gender critiques consistently present sexist explanations of gender differences in emotions that shape the expected benefits of the writing intervention. Range and Jenkins (2010) argue that men are more likely than women to benefit from expressive writing due to several male emotional *disadvantages*: According to gender schema theory, men exhibit greater emotional avoidance because of internalized masculine self-concepts; from gender role theory, men seek to adhere to masculine social expectations against emotional disclosure; and from the view of gender socialization, men learn more active, less introspective coping skills than women. Women are assumed to experience fewer barriers to intimate communication and have less need to verbalize their troubles in writing (Manier & Olivares, 2005). Additionally, observations about men's and women's communication styles and emotional expressiveness lead to unfounded conjectures about gender differences in the desire for personal agency. Range and Jenkins (2010) and Stickney (2010) both claim that because

the masculine paradigm emphasizes individual autonomy and control, the goals of self-regulation and personal agency apply disproportionately to men. Men would benefit more from instructions focusing on “mastery,” whereas women might benefit more from writing in a less assertive mode, in the “inward-focused, introspective style they are most comfortable with” (Stickney, 2010, p. 168).

The characterizations of male deficiencies falsely essentialize emotional and expressive tendencies based on biological sex and fail to account for gender-based power and status differences that disadvantage women. Feminist empiricist Leslie Brody (1999), who has researched at length how socialization and stereotypes affect gendered emotional expression, found that contrary to the common belief, there is no evidence that men have more desire than women for personal empowerment. Women and men do not differ in their levels of power motives, the conditions that elicit power, or their levels of interest in power (Brody, 1999, p. 206). Women and men may fulfill power needs differently, but their desires for personal agency and self-efficacy (as reflected in studies of power) appear comparable. Brody (1999) also finds that the personality characteristics of *communion* (being kind, affectionate, or nurturing) and *agency* (being goal-directed, independent, and worldly) contribute to the expression of many basic emotions significantly more than biological sex (p. 211). The nature and extent of emotional expression in expressive writing tasks may have more to do with communal or agentic personality traits than with participant sex.

Evidence also suggests that contextual and structural differences in power and status systematically affect emotional experience. Brody (1999) and other feminist researchers of emotion (e.g., Hochschild, 1978; Jaggar, 1989; Shields, 2002) argue that

beliefs about emotions and gendered performance of emotions relate in predictable ways to power and status imbalances between men and women. Shields (2002) and Jaggar (1989) add that differences in emotion also intersect with power and status differences based on race, class, ethnicity, sexual orientation, and other identity categories.

Especially relevant to expressive writing studies are observations on women's experience of fear, shame, and anger. Brody (1999) finds that women are more likely to assess situations as uncontrollable and risky and as a result feel more fearful and less confident (p. 214). Women also are more likely to feel guilt or shame if they achieve positions of power and more vulnerable to criticism of their power. Women's generally inferior power and social status also affect women's anger in predictable ways. Women's perception of power and status imbalances is likely to cause frustration and anger against the injustice, but women may feel less entitled than men to express their anger (Brody, 1999, p. 215). Fear to express anger may result in shame and low self-esteem over perceived personal weakness and the expression of distress instead of anger. Women also may hide their indignation beneath displays of physical appeal, charm, and innocence, aiming to minimize the potential for retaliation or competition while still achieving power motives (Brody, 1999, p. 216). Although women wield relational skills such as intimacy and expressiveness to increase their power in relationships, Brody (1999) suggests that these skills (which also carry the feminized term "soft skills") are not a strong source of power compared to men's physical, social, and material power (p. 216).

Relative social power and status also systematically relate to health outcomes. A comprehensive review (Bella & Doucet, 2003) found that poverty, economic and social inequality, and discrimination inflict detrimental intersectional effects on women's well-

being. Links between poverty and poor health are well documented, and women in the United States are more likely than men to be poor and to experience compounded racial, gender, and class-based discrimination. Poverty increases exposure to traumatic, uncontrollable life events that lead to feelings of fear, stress, and powerlessness, combined with chronic material deprivation (Bella & Doucet, 2003). Regarding social status, women who reported lower subjective social status reveal more chronic stress, negative affect, pessimism, and passive coping and less perceived personal agency, even after controlling for race, education, and income variables (Bella & Doucet, 2003, p. 104). Discrimination has been shown to disrupt reasoning skills and raise levels of stress, aggression, sadness, egotism, and anxiety, and sex discrimination has been correlated with increased depressive, somatic, and anxious symptoms in women (Bella & Doucet, 2003, p. 106). Bella and Doucet's (2003) findings demand a more socially conscientious approach to characterizing gender-based emotional experiences and therapeutic needs.

Corroborating this need with regard to trauma, Seng, Lopez, Sperlich, Hamama, and Meldrum (2012) investigate the impact of intersectional, marginalized identities on posttraumatic stress disorder (PTSD) symptoms and quality of life outcomes. An analysis of secondary data of a diverse sample of women expecting their first child found that contextual factors such as neighborhood crime rates and exposure to traumatic experiences explained nearly half of the variance in PTSD symptoms. Interpersonal discrimination based on gender, race, ethnicity, and pregnancy status accounted for about a quarter of the variance on PTSD symptoms and quality of life (Seng et al., 2012). Seng et al. (2012) also cite evidence that women are twice as likely as men to suffer from PTSD, and that while African American women are not more likely to develop PTSD,

they are much less likely to recover from it (p. 2439). Sexual minorities and people with disabilities also are more likely to suffer PTSD (Seng et al., 2012). Black women in Seng et al.'s sample were more likely to live in areas with high crime rates, report greater exposure to trauma, and evidence more PTSD symptoms and lower quality of life scores. Not surprisingly given these associations, a recent Centers for Disease Control and Prevention (CDC) study of U.S. depression rates revealed that the groups most likely to suffer major depression spanned an array of socially marginalized categories: women, Blacks, Hispanics, non-Hispanic persons of other races or multiple races, persons with less than a high school education, those previously married, individuals unable to work or unemployed, and persons without health insurance coverage (CDC, 2010).

The sexist, essentializing presumption that women's "emotional expressivity" and greater intimacy in personal relationships "naturally" offer women more opportunities for emotional and cognitive processing of stressors also appears untrue. Women participants in nearly all of the studies that I reviewed almost uniformly had not verbalized their emotions regarding their experiences with breast cancer or IPV, and many women remained reluctant to do so even in the "safe space" of personal writing. Women survivors of IPV especially evidenced little benefit from expressive writing, and the expression of emotion actually appeared harmful in some cases (Holmes et al., 2007).

Against a backdrop of mounting evidence that women and other socially marginalized groups are more likely to suffer mental and physical distress and have lower capacity to effectively mitigate their distress, the supposition that men would reap greater benefits from expressive writing appears premature and unfounded. These results suggest that, if anything, expressive writing is *insufficient* rather than redundant for assisting

women survivors of trauma. For lesbians writing about their stressful experiences related to sexual orientation, expressive writing correlated with increased confusion and distress for more open lesbians and decreased confusion and stress only for those who were less open about their sexuality (Lewis et al., 2005). This finding supports the inference that as women face the composite lived constraints of intersecting oppressions, emotional and cognitive processing in expressive writing proves a limited antidote. Women breast cancer patients exhibited the most consistent benefits across the studies in my review; however, breast cancer patient samples (when reported) tend to be older (with an average age in the late 50s), White, higher income, and married, which may decrease the burdens of social marginality experienced in less privileged female populations (Gellaitry et al., 2010; Henry et al., 2010; Laccetti, 2007). Because women face multiple potential stressors *as women*, theories and experimental assessments about women's healing should not ignore the factors in women's lives that may contribute physical and mental harm and healing. An analysis of emotion that considers gender stereotypes and structural power inequalities helps to explain why the expressive writing studies on women thus far have yielded such mixed and unsatisfactory results.

In sum, methodological and conceptual approaches in expressive writing studies lack attention to the environmental effects of patriarchy and misogyny that affect men's and women's physiological healing. Methodologically, the experimental paradigm and the techniques used in the majority of expressive writing studies (as revealed in meta-analyses) are too inconsistent to permit adequate or reliable measures of health outcomes. The studies also promote an insufficient, sanitized vision of women's experience and health factors. Conceptually, Pennebaker studies contain misinformed assumptions about

men's and women's emotional capabilities and needs that skew resulting observations. Researchers generally rely on groundless sexist stereotypes rather than real data about gendered emotional experiences. Focusing on the "problems" of male emotionality strengthens sexist oppression as it renders women's disproportionate suffering unexamined, denied, and effectively silenced. To remedy these flaws, a therapeutic expressive writing intervention for women must give attention to women's power and status differences and the potential impact of accumulated traumas on women's emotional expression.

### **Emotional and Institutional Barriers to Women's**

#### **Psychological Healing**

Arguments supporting the healing function of literacy practices in the psychological domain of consciousness highlight the merits of expelling unconscious burdens, coalescing experience into a coherent narrative, and engaging in empathetic listening to the self and others. These approaches stem from the conceptual and practical traditions of psychoanalysis and narrative therapy, with the goal to use words to build a more complete, coherent, honest, and flexible conception of the self. The unconscious is considered the site of an unarticulated inner life. Unacknowledged fragments of experience – memories, perceptions, desires, and fears – exist beneath conscious awareness and if exposed may provide a healing form of self-knowledge. Narrative is one way to describe how consciousness organizes knowledge of the self and world. Narratives constitute frameworks of meaning by which to interpret ongoing experience. Narratives are relationally constructed in a social context, and their comprehensibility relies on a foundation of shared language and meanings among speakers and listeners,

writers and readers. Constructing a coherent narrative of a traumatic event assists the subject to gain mastery and transcendence of the experience. The healing processes of exploring the unconscious and constructing narratives also includes the act of listening. In literacy practices, the community of listeners encompasses all readers of the textual artifact, including the author herself. An attentive, curious, emotionally attuned audience can create space for empowered personal and interpersonal responses to the text. Listener engagement enables the formation of new connections between the text and lived experience and prompts dialogic exchanges that revise and reconstruct readers' and writers' ongoing interpretive frameworks. Studies examining healing in terms of psychological mechanisms include more varied types of literacy practices than those examining physiological outcomes; my review included women's scholarship and autobiographical writing in private, familial, and academic learning contexts.

Unlike my critique of methodologically and conceptually flawed expressive writing studies, I critique psychological frameworks of healing based on their insular focus on the individual psyche and tendency to omit mention of emotional and structural barriers that impede women's healing. Arguments for healing the psyche paint an overly rosy picture that my analysis seeks to problematize by exploring the effects of emotional and institutional gatekeepers. I apply feminist understandings of emotional labor and authentic identity, pathways to critical consciousness, and patriarchal obstruction in traditional academic institutions. I argue that although clearly dedicated to promoting individual growth and empowerment, the research using psychological frameworks *does not go far enough* to expose the barriers that pertain to women and other marginalized groups. Omitting emotional and structural obstacles (which from a feminist perspective

are fully interdependent) produces an impoverished understanding of the pathways to women's healed consciousness in the psychological domain.

Arguments focused on overcoming psychological obstacles focus entirely on the healing that takes place within the individual psyche and omit the role of what feminist scholars Froyum (2010), Hokulani Aikau in Aikau et al. (2003), and English and Irving (2008) call "gatekeepers." Aiku and English and Irving refer to *institutional* gatekeepers, while Froyum applies the term to *emotional* gatekeepers. In each case, "gatekeeper" refers to an entity that wields (or is perceived to wield) the power to either reward or punish a subject based on a standard or norm. Gatekeepers may directly enforce compliance, but they more often serve to inculcate *self*-discipline whereby the subject willingly complies, often without full awareness of her complicity. "Gatekeeper" was popularized in Foucaultian poststructuralism as a feature of the technologies of power that organize social interaction (English & Irving, 2008). Although I do not use the term in a strict poststructural sense, I find gatekeepers a useful conceptual metaphor to describe the power-based internal and external obstacles to healing that women encounter on a psychological level. My critique describes two sites where gatekeepers impede healed consciousness: the emotions that guide women's awareness and the institutional spaces in which women's literacy practices may take place.

### **Emotional Gatekeepers of Women's Healing**

The examples of psychological healing that I explored in Chapter 5 entail women's struggles to transcend various internal barriers to their personal expression. Lakiba Pittman incessantly doodles and annotates her drawings before she can speak publicly in defiance of her rape. Racially, politically, ethnically, and religiously

marginalized women grapple with “cloaks of silence” that stifle their stories. Young women in college composition classes challenge insecurity and self-doubt to write emotionally authentic personal essays. These examples describe situations in which women overcome emotional obstacles to authentic self-expression and development of self-knowledge. The authors highlight the women’s achievement of appropriate paths to personal growth; however, the descriptions rarely provide contextual analyses beyond the circumstances of perceived individual healing. Where did the cloaks of silence come from in the first place? Was it necessary or just incidental that many of these examples involved audiences mostly or entirely composed of women? Do the women’s transformations improve their ability to grow and assert their presence *beyond* the safe space of the storytelling circle or communal composition class? Feminist analyses of emotional socialization shed light on these questions by unpacking the social-emotional forces that structure women’s lived experience.

**Socialization and Emotion Work.** Feminist psychologist Shields (2002) defines *socialization* as “the lifelong process of learning to be a member of one’s culture” (p. 92). Socialization occurs through direct instruction, following available behavioral models, and learning by reinforcement and punishment (Shields, 2002, p. 115 n2). Instruction of emotions is a crucial component of socialization. *Emotional education* is the process of learning “how to know when one is experiencing emotion and how to tell whether that emotion is *authentic*, as well as appropriate to the context (Shields, 2002, p. 112, emphasis in original). Jaggar (1989) explains how the theory of socialization disrupts common beliefs about “natural” or “normal” behavior: “What are taken in any situation to be undisputed facts ... [actually] rest on inter-subjective agreements that consist partly

in shared assumptions about ‘normal’ or appropriate emotional responses” (p. 154).

Fundamentally, the education of emotions teaches members of a culture how to *be* who they think they are – to verify the authenticity of the self – by feeling and performing the correct emotion. Attaining emotional authenticity also achieves self-authenticity: “I feel as I believe I ought to, therefore I am the person I believe I am” (Shields, 2002, p. 111).

Arlie Hochschild’s (1983) groundbreaking work on emotions, ideology, and social structure introduced the original concepts of *framing rules*, *feeling rules*, and *emotion work* to clarify the connections among how we feel, what we believe, and what we do.

“Framing rules” guide how individuals in a social context ascribe meaning to situations, whereas “feeling rules” assign legitimacy to the emotions we feel in the situation

(Hochschild, 1983, p. 566). Ideologies are made up of framing rules and associated

feeling rules, and we perform emotional “work” or “labor” to meet the standards set by

the ideology. As a feminist, Hochschild (1983) applies these concepts to structural sexism and social oppression, arguing that reigning cultural ideologies uphold unequal patterns of emotional (and material) exchange between dominant and subordinate groups.

Dominant framing and feeling rules prepare individuals of different gender, race, class, age, and other identity categories to perform the appropriate emotion work – evoking or suppressing an emotion by changing thoughts, physical symptoms, and expressive gestures – to perpetuates the structural status quo (Hochschild, 1983). As I mentioned in

Chapter 2, within a hierarchical society, the dominant norms and values will tend to serve the interests of the dominant group and punish deviance from the norm.

What does this analysis suggest about the emotions that women are likely to feel in a culture that serves the interests of wealthy, White, heterosexual men? Depending on

their particular status and roles, and intersections of race, class, age, and ethnicity, women are likely to be socialized to feel and exhibit reactions that conform to the dominant ideology but that to some degree conflict with their authentic emotions (because women to varying degrees do *not* identify with wealthy, White, heterosexual men). Some women may be able to internally assimilate their emotional socialization as part of an authentic self. They may feel minimal conflict between ideology and being, or they may mitigate conflicts in ways that do not disrupt the social order. Other women might perceive a greater disconnection between their feelings and the prescribed norm, and they might act more forcefully to overcome the disjunction. In any case, women (and men) *work* to feel and perform the emotions that they believe are appropriate to their identities. They perform emotion work because *the self* is at stake. As Shields (2002) points out, it is not enough to simply convince others that our “surface acting” is genuine. We must convince *ourselves* that our emotional states are authentic because our emotions uphold our self-concept. In the case of gendered emotion, the challenge for women and men is to “reconcile competing emotional standards in a way that can be experienced as consistent with, or at least not undermining, a coherent sense of authentic identity (...) while meeting the expectations and demands of others in one’s various social roles” (Shields, 2002, p. 114). Emotions are an essential thread in the fabric of identity. Emotion and gender are deeply implicated in the security of one’s deepest senses of self, one’s humanity, and trust in the humanity of others (Shields, 2002, p. 170).

A feminist analysis of emotional labor serves to more fully expound the implications of transforming the psyche to heal consciousness. Any attempt to transform patterns of thought and behavior must take into the account the emotional socialization of

the individual and the impact of dominant framing and feeling rules that govern the social context of which the individual is a part and with which she *labors* to identify. From the perspective of emotion work, healing the consciousness of the psyche involves an arduous process of *un-learning* about the self. Transformations that unearth undesirable parts of one's emotional constitution (e.g., unsanctioned sources of fear, anger, or pleasure) may be deeply shattering. Constructing a new narrative self that challenges socialized identity may provoke an intense internal backlash. Listening to a foreign perspective that shifts our sense of the humanity of others may shake our confidence in the world. Exploring new possibilities of being is a journey fraught with doubt and discomfort, an entry into terrifying vulnerability. For populations that already feel vulnerable, a transition toward further perceived instability may be wholly unwelcome.

These characterizations of ambivalence and psychological turmoil are not merely speculative. Critical scholarship involving literacy practices explores numerous examples of inner healing processes that implicate deeply disturbing revelations about the self and world. Critical race scholar Jill Swiencicki (2006) examines the affective constitution and function of what she terms "awareness narratives," or personal narratives describing "an awakening to the structures of power and privilege inherent in cultural positioning and identity formation" (p. 339). For individuals in a situation of relative dominance (through racial privilege) the feelings of shame and guilt are central to awareness narratives. Shame is especially prominent, however, because shame interrupts the identification of the self (Swiencicki, 2006). Shame collapses the self inward, forcing a confrontation between a "me" that was known and comfortable and a "me" that is defective and displeasing (Lewis, 2003). For example, Korean-American feminist Young Kwon (2005)

admits that she felt a visceral anger, sympathy, and personal agitation in response to reading of the death of a Filipina immigrant bride to the United States. Kwon's (2005) shock and distress propelled a personal healing journey that required "a difficult and often painful self-interrogation" of her own implication in multiple relations of domination (p. 74). Swiencicki (2006) argues that shame can constitute the catalytic ingredient to transforming consciousness because shame pushes the subject to a decisional precipice: Either shut down completely (retreat into denial and self-castigation) or find a new way of being that reconciles the conflict.

For Audre Lorde (1984/2012), a "Black woman warrior poet" (p. 42) speaking from a position of racial and gendered marginalization, anger is the operative emotion in her transformative process: "My response to racism is anger" (p. 124). Accompanying her desire to act and transform on the basis of her anger is *fear*. Lorde (1984/2012) acknowledges, "of course I am afraid, because the transformation of silence into language and action is an act of self-revelation, and that always seems fraught with danger" (p. 42). Karma Chavez (2010), a self-described queer feminist of color, examines processes of changed consciousness in response to the work of a "gay slam poet" who is also a "White professional able-bodied [and HIV-negative] gay man with a PhD" (p. 446). Chavez (2010) identifies the problematic silences that the title of "gay slam poet" imposes on other intersectional identities, and she explores the controversial reactions that his performances motivate. The poet's deliberately provocative, contentious, moralistic language has the "ability to get people talking, thinking, standing speechless, or wanting to fight him" (Chavez, 2010, p. 450). He incites and inflames audiences because he forces them out of a safe space into the unpredictable realm of vulnerability, self-doubt, and

self-defense. Feminism underscores using personal experience to gain valid, authentic knowledge for healing, empowerment, and building solidarity; however, what I aim to highlight with these examples is that the journey to explore the self, expose buried memories, revise familiar narratives, and achieve empathetic connection involves distinct and intense *emotional work* to achieve.

**The Role of Dialogue, Contextualized.** Recognizing that pathways to transformed consciousness involve insights about the self that are painful to bear and that evoke shame, anger, and helplessness, scholars often suggest that critical self-reflexive and interpersonal dialogue help individuals to move through and transcend seemingly debilitating emotional responses. As subordinated groups experience social and material disadvantages within a dominant system, they are likely to feel emotions that oppose or question prescribed norms (Froyum, 2010). Emotional dissonance, or the sensation of “outlaw emotions,” (Jaggar, 1989) is a potential source of collective awakening and empowerment for subordinated groups. Self-reflection on one’s own emotional constitution and sharing one’s honest reactions in a community can enable women to harness subversive emotions for political empowerment. When individuals perceive that their “outlaw” emotions are shared and validated by others, they may join together in an emotional “subculture” and begin to act in opposition to dominant values (Jaggar, 1989, p. 160). Hochschild (1983) argues, “one can defy an ideological stance by inappropriate affect and by refusing to perform the emotion management necessary to feel what, according to the official frame, it would seem fitting to feel” (p. 567). Dialogic interaction through critical self-reflexivity and interpersonal exchange enables the pained subject to productively overcome the demobilizing forces of denial, cynicism, guilt,

shame, and apathy, all related to fear and anger (Chavez, 2010; Goltz, 2011; Gunaratnam & Lewis, 2001; Jaggar, 1989; Kwon, 2005; McDonough, 2009; Sweincicki, 2006).

Critical dialogue can help women to perceive and articulate sources of tension and form communities of resistance.

Although dialogic interchange may help individuals and groups to heal from dissonant, dissident emotions, analyses cannot disregard the mediating context in which dialogue occurs. Dynamic dialogic and self-interrogating healing requires shared reflection, introspection, exposure to alternative ideas, and the perception of a receptive audience, all of which may be limited within highly controlled contexts. For example, Froyum (2010) explores a site of emotional socialization that markedly restricts the free flow of dialogue and intra-personal speculation among women. Froyum (2010) observes the socialization dynamics between adult staff and participants in an after-school program for predominantly low-income, Black, adolescent girls. The program's adult Black female staff and volunteers, the gatekeepers of "correct" emotion, are burdened by their own ambivalence toward the nearly all White male executive leadership and the stress of feeling overworked and underappreciated (Froyum, 2010, p. 50). They employ socialization strategies toward the girls that reinforce rather than dispute dominant racialized, classed, and gendered ideologies. The resulting environment provides minimal dialogic openness among the girls or the workers (Froyum, 2010). Through direct instruction, modeling, and reinforcement, the staff enjoins the girls to stifle "attitude," replace negative emotions with an obligation to help others, and to distance themselves from their "dysfunctional" past (Froyum, 2010). These emotional guidelines reflect a positive valuing of privileged White femininity and dismissal of the marginalized

identities of the girls in the program. Although the staff aims to prepare the girls to handle the challenges of their marginalized status, the emotional tools of the dominant ideology hinder rather than promote the girls' personal and collective empowerment. Their emotional socialization devalues the girls' identities as shameful, deficient, and undesirable and produces confusion, anger, and defiance in the girls and frustration in the staff (Froyum, 2010). Constrained by their experience of racial subordination within the leadership hierarchy (who are gatekeepers of the staff), their desire to gain respect, and their emotional burnout, the staff remains locked in a rigid, dictatorial pattern that stifles engagement and communication. The women fail to perceive how the tension among them could instead fuel a productive, honest dialogue toward more positive self-valuation and collective empowerment.

Although this example does not involve literacy practices per se, the scene reveals the roles of interpersonal relationships, personal capacity, and contextual support in promoting healing transformation. Critical scholars almost uniformly call for dialogue and responsive, empathetic listening as antidotes to the self-consuming stasis of fear, anger, and shame (Chavez, 2010; Gere, 2000; Goltz, 2011; McDonough, 2009; Swiencicki, 2006); however, dialogic models also presuppose the existence of "agentic, potentially transformative social contexts" (Swiencicki, 2006, p. 350). One's engagement in reflective and connective dialogue cannot be interpreted in a contextual vacuum.

### **Structural/Institutional Gatekeepers of Women's Healing**

Related to interpersonal emotional contexts are the cultural arenas and institutional locations where healing of the psyche can take place. The gatekeepers of these spaces enforce boundaries both internal and external to women's psyches. Writing

in the early 1990s, at a time of cultural backlash against second-wave feminism, feminist Professor of English Frances Davis (1992) warns that as women increasingly enter higher education and professional spaces traditionally and still dominated by patriarchal values, their needs and interests face marginalization in an alien and unwelcoming culture.

Women's socialized avoidance of competition may make them "unlikely to claim equal air space with men" and intimidate them into silence in large group situations (Davis, 1992, p. 5). Davis also cites the contradictions that fragment women's home and public experience relative to finding a voice in higher education. In her college,

women receive enormously conflicting signals about their future lives. In an upwardly mobile second-generation immigrant community, the young women are on the one hand encouraged to educate themselves, while on the other hand expected to hold down part-time jobs to support the cost of this education, as well as to do about 50 percent of the work at home. They are often made aware, too, that they will be expected to live with their families until they are married, and that real independence for women is not respectable. (Davis, 1992, p. 5)

Over a decade later, as third-wave feminism took hold in feminist academic and activist pursuits, three women scholars reflect on their personal and intellectual paths and cite continuing structural impediments (Aikau et al., 2003). These third-wave feminists generally enjoyed fewer personal restrictions from their families, received social validation in their undergraduate academic communities, and found cultural validation growing up with feminist popular artists and studying the "canon of academic feminism" (Aikau et al., 2003, p. 405). Nonetheless, they recount colliding with the closed doors of a White patriarchal system in several instances. Wendy Moore describes her anger when

her graduate mentor, a feminist, race-critical scholar, is denied tenure in the sociology department. The department leaders do not accept her interests as academically legitimate, and perceiving a challenge to the standards of sociological inquiry, they “threaten to seriously harm [the professor’s] academic standing” (Aikau et al., 2003, p. 412). The event exposed to Moore that “movements toward ‘gender equality’ in the academy (and elsewhere) were being constructed and delineated by White men (....) What was sold as gender equality was women’s right to participate in patriarchal structures” (Aikau et al., 2003, p. 412). Later Moore finds an even less welcoming environment in the University of Minnesota Law School, where “learning to think like a lawyer really means learning to think and act like a *White* man” (Aikau et al., 2003, p. 413). Despite maintaining a thriving Women’s Studies department and the Center for Advanced Feminist Studies, the power-holders of University of Minnesota remained solidly unwelcoming to the concerns of feminism. Similarly, Hokulani Aikau encounters gatekeepers within the seemingly intellectually open American Studies Association. Her dissertation on the intersectionality of gender, Hawaiian culture, and the Mormon Church was rejected for a national conference because of committee members’ discomfort with the salience of religious identity in her work (Aikau et al., 2003, p. 419). She reflects that the experience opened her eyes to what she calls “a false sense of security” in an academic environment still fraught with battles over the legitimacy of marginalized voices (Aikau et al., 2003, p. 419).

The arguments in this section converge around the theme that women’s healing through literacy practices is a substantial struggle on multiple fronts, many of which remain unstated or significantly underplayed in scholarly accounts. Given the salience of

framing and feeling rules in all contexts of private and social life, portrayals of women's healing through mechanisms of the unconscious, narrative, and listening should directly address the particular qualities of the context that may have made healing possible.

### **Political Obstacles in Socio-Cultural Frameworks for Healing**

The socio-cultural domain of consciousness includes the concept of identity and the discursive fields that identities populate. In Chapter 5, I discussed how women's autobiographical texts may generate new discourses, or systems of meaning, that produce alternative subjectivities and enable new empathetically-identified communities to form. Subjects engage in dialogic interaction with a textual artifact, dynamically shifting their subjective stance to incorporate the voice of the "other" into their own discursive schema. As communities of identified subjects expand, gain legitimacy, and continue to develop unique interpretive frameworks, they build supportive institutional spaces and codify their knowledge in texts, technologies, and practices.

The institutional maturation of feminism in college and university Women's Studies programs is an example of a discursive transformation with visible socio-cultural effects. The majority of U.S. Women's Studies programs began in English, literature, and language departments with courses emphasizing (White, privileged) female authors such as Virginia Woolf, Doris Lessing, Sylvia Plath, Simone de Beauvoir, and Tillie Olsen who wrote critically about what it was like to be a (White, privileged) woman (Astin & Parelman, 1973). Instruction, discussion, and analysis of these works spawned production of new feminist knowledge along with new ways of *being* someone who grasps the knowledge. Armed with new ways of thinking, valuing, and acting, feminist-identified

subjects began to work to establish a world to reflect their views, “a world in which they could live” (Davis, 1992, p. 7) as feminist scholars and activists. Importantly, the spread of feminism to new audiences brought critiques of its omissions among diverse groups identifying with the categories “woman” or “feminist.” Challenging the discursive silence that a mostly White, privileged, heterosexual, American middle-class feminism inflicted on “others,” authors such as Alice Walker, Adrienne Rich, bell hooks, Patricia Collins, Trinh Min-ha, Gloria Anzaldúa, Nawal El Saadawi, Chandra Mohanty, and Gayatri Spivak engaged in new discursive production and different forms of identification *within* feminism. Their work coined new interpretive frameworks including intersectionality, womanism, postcolonial feminism, and transnational feminism which continue to attract new scholarly attention and activist interventions in the swell of feminism’s “third wave.”

The example of U.S. feminism illustrates that in flows of discursive production and identification, tension exists between the healing effects of discursive communities and the implicit power dynamics that organize and contain those communities. Discourses sanction and sever even as they liberate and unite. In this section, I explore how contemporary discourses of trauma construct understandings of healing in women’s literacy practices, and I interrogate the political effects of these constructions for women in a U.S. patriarchal context. The surge of trauma discourse in U.S. popular culture and academic disciplines theoretically engenders widespread identification with a proliferation of “traumatized” subject positions. The articulation of a trauma narrative is constructed as a “whole-making” act that invites others to bear witness in solidarity; however, this vision fails to account for *trauma*’s own discursive context, history, and political implications. Drawing on the work of critical scholars on women’s trauma

writing, I argue that the discourse of “trauma” may be counterproductive to women’s healing because, far from universalizing and integrating traumatic experience, the discourse draws stark boundaries reinforcing “otherness” and private victimization (Burstow, 2003; Miller & Tougaw, 2002; Payne, 2000; Quiney, 2007; Radstone, 2007).

### **The Discursive Foundation of Women’s Trauma and Healing**

Discursive processes – identification and the construction of meanings – in literacy practices are neither value-neutral nor democratic. Because discourses, even critical discourses, arise in specific social and historical contexts, they are subject to the normative patterns and rules that structure society in that context. Discursive identification is a means to construct social relationships and (re)order the social distribution of power. As Kenneth Burke (1976) elegantly states, the meaning-making process “whereby ‘things’ can become ‘infused’ with the *hierarchal genius of a social pageantry*” (p. 66, emphasis mine) has clear political and performative effects. In literacy practices, discourses construct subjectivity – the “characters” in the story, the authorial voice, and the community of readers – in specific ways according to prevailing social norms. For example, Michelle Payne’s (2000) study of women’s sexual abuse narratives illustrates that the interpretation of sexual abuse within the social world of those who have experienced it “constructs the abuse experience itself” (p. 125). Tracing the evolution of American women’s sexual abuse narratives from the early colonial period through the eighteenth, nineteenth, and early twentieth centuries, Payne (2000) reveals how then-contemporary discourses construct “what can be said, how, by whom, within what context, and with what evidence” (p. 125) about sexual abuse. Discourses provide the boundaries within which the language of trauma, victimhood, survival, freedom, and

healing can be spoken and understood. In the early colonial period, crimes of sexual misconduct against women were interpreted by the courts as violations of male property; the woman was never the victim (Payne, 2000). On the contrary, the woman's morality lay in question; in one case a female caregiver described a seven-year-old girl who had been raped as displaying "wanton and uncivill [*sic*] carriages" (Payne, 2000, p. 126). Toward the eighteenth and nineteenth centuries, women writing narratives of abuse began to use Christian discourse to authorize their struggles against male aggressors who violated their innocence, piety, and role as caretakers. Psychoanalysis and the "medicalization" of abuse took hold in the twentieth century, which branched into the popularization in recent decades of self-help books, "inspirational" talk show hosts such as Oprah Winfrey and Montel Williams, and increasing numbers of published survivor narratives. Throughout this history, the constructed category of abuse evolves with the discursive meanings that "define and discipline sexuality, gender, power relations, and language" (Payne, 2000, p. 125).

Contemporary practices of reading and writing trauma texts are shaped by a Western, liberal, academic and popular context that favors the idea of women and sufferers of physical, sexual, and emotional traumas voicing their stories and "breaking silences" (Payne, 2000). In Chapter 5, I described the dramatic public and feminist responses to pressure to "speak out" and "bear witness" in actions such as the Clothesline Project. Despite the positive focus on personal release, empowerment, and cultural redemption, however, trauma discourse also authorizes wounding and recovery in ways that intersect with concurrent beliefs about inferior female subjectivity. As some critical authors have argued, trauma discourse ironically places women in a multi-layered bind;

trauma's sanctions and subordinating effects amplify and are amplified by women's already marginalized status.

**The Discursive Politics of Trauma.** Contemporary theories of trauma and healing construct a problematic politics of the traumatized subject. First, the basic definition of trauma marks it as categorically "other." Felman and Laub's (1992) seminal text on testimony in literature depicts trauma as

an event that has no beginning, no ending, no before, no during, and no after. This absence of categories that define it lends it a quality of "otherness," a salience, timelessness and a ubiquity that puts it outside the range of associatively linked experiences, outside the range of comprehension, of recounting and of mastery.  
(p. 69)

The "otherness" of trauma provides a useful theoretical framework in historical and literary criticism, but trauma also inscribes otherness in the concrete, human sphere.

Trauma relies on a binary formula that establishes oppositional categories of trauma (pathology) and normalcy, victim and perpetrator, and inside and outside (Burstow, 2003; Radstone, 2007). A subject either *has* been present at or been "traumatized" by a disturbing experience or *has not*; the victim must claim her wounded status against an external perpetrator; and the menace of trauma inflicts damage from the outside on those who internally are susceptible to harm (Radstone, 2007). The binary qualities of trauma have several damaging political effects from a feminist perspective. Dichotomous constructions erase the "gray" interpretive spaces both within and between the opposed categories of pathology and normalcy, concealing their internal diversity and shared interdependency. Instead, the label of "traumatized" relies on an idealized normal

subjectivity that presumably sees the world through an undistorted, non-traumatized lens. A consequential concern of therapeutic interventions is to restore the traumatized subject to a more balanced, trustful, “accurate” view of the world (Burstow, 2003; Payne, 2000). This fictional delineation of trauma from normalcy champions a privileged worldview and precludes perception of traumatic “symptoms” as legitimate responses to real, potentially ongoing threats (Burstow, 2003). Derrida’s deconstructionist paradigm argues that dichotomous pairings also are hierarchical, assigning one term primacy and the other term a weaker, derivative status (Scott, 1988, p. 37). Applied in social contexts, subjects claim personal and group superiority by identifying with the dominant term and confer inferior status to those accorded the subordinate identity. Conveniently for dominant groups, the normalcy-trauma binary aligns with other hierarchical pairings in the Western tradition (such as man-woman, White-Black, and mind-body) that serve to justify social inequality based on difference.

Women’s non-traditional writing on motherhood exemplifies women’s multiple marginalization related to trauma discourse in literacy practices. Ruth Quiney (2007) explores the continuing paradoxical, no-win conundrum for women who write “confessional” autobiographies of motherhood in the tradition of second-wave consciousness-raising. Struggling to articulate an authentic voice for the culturally silenced maternal subject, contemporary feminist authors such as Naomi Wolf, Rachel Cusk, and Lauren Slater write memoirs of motherhood that interrogate the dominant “Good Mother” fiction and attempt to form new discursive communities for a traumatized motherhood. These narratives follow in the footsteps of Adrienne Rich’s ground-breaking work *Of Woman Born* (1976/1986), which arguably represents what

Cixous (1981) calls woman's "shattering entry into history" (p. 880) on the topic of motherhood. Rich (1976/1986) interweaves the intimate details of her mothering experience (from her own diary) with feminist critiques on the historical trajectory of motherhood as a social institution, creating an ambivalent portrayal of motherhood's joys and sacrifices. She characterizes motherhood as a site of turmoil, pain, and self-loss punctuated by guilt at an imagined personal inadequacy. Contrasted with the idealized notion of motherhood as "central to the lives of women, fulfilling even in its sorrows, a key to the meaning of life," Rich (1976/1986) remembers "anxiety, physical weariness, anger, self-blame, boredom, and division within myself: a division made more acute by the moments of (...) amazement at how [my children] went on loving me in spite of my failures to love them wholly and selflessly" (p. 15). Her opening lines to the first chapter, a journal entry from November of 1960, epitomize Rich's (1976/1986) haunted turmoil:

My children cause me the most exquisite suffering of which I have any experience. It is the suffering of ambivalence: the murderous alternation between bitter resentment and raw-edged nerves, and blissful gratification and tenderness (...). There are times when I envy the barren woman who has the luxury of her regrets but lives a life of privacy and freedom. (p. 21)

Rich's candid words breach the cultural taboos that bar women from placing their voices at the center of a discourse of motherhood. Her concurrent analysis of the institution of motherhood exposes links between how women feel as mothers and how society constructs motherhood to perpetuate patriarchal oppression.

On one hand, Rich's work and the writings of the women who follow her lead reunite women's voices with women's bodily experience in an agentic, healing gesture as

“the mother-body writes herself, and is made new” (Quinn, 2012). On the other hand, however, memoirs that candidly discuss the ambivalence of motherhood may fail to surmount patriarchal strictures because they re-inscribe trauma on a subject (women) whose voice already occupies a marginalized position (relative to men). Contemporary maternal confessional writing continues to serve a larger cultural narrative that assigns women the “primordial, self-erasing job” of renouncing personhood for motherhood (Quiney, 2007, p. 29). The traumatized mother almost disappears behind the cultural construction of womanhood as fecundity personified. Both Wolf and Cusk (as cited in Quiney, 2007) describe remarkable yet disturbing scenes of identification with a “primordial soup of femaleness” within which women dissolve into an undifferentiated assortment of “breasts and bellies and hips” composed solely for reproductive value (p. 29). The impossibility of being both a mother and a “true,” productive, capitalist subject in Western society traps women and mothers in a maddening and unspeakable state of subjective indeterminacy. Mothering emerges as a site of feminine loss, and the articulation of the wounded mother fails to ignite a sense of maternal community and does little to alleviate women’s continued isolation and unrepresentability (Quiney, 2007, p. 32). The re-inscription of female absence and anguish “within an already ‘feminized’ culture of public vulnerability and trauma” (Quiney, 2007, p. 21) serves to reinforce rather than subvert dominant discursive hierarchies that subordinate women. In relation to the theorized healing pattern of discursive production, empathetic identification, and agentic social change, Quiney’s (2007) analysis reveals gaping inadequacies relative to intersectional discursive marginalization.

Aside from subordinate “otherness,” trauma discourse also enforces an identity of internal vulnerability and personal victimization. For example, Payne (2000) argues that the “sexually abused ‘self’ has been constructed as too emotionally vulnerable to sustain appropriate relationships with others (...) or to engage in ‘intellectual’ work that requires a less vulnerable, more stable self” (p. 120). A vulnerable subject falls victim to trauma, which then begets a continuing traumatic state of social isolation and fragmentation. Defining trauma as an external affliction that “at least temporarily overwhelms the individual’s internal resources,” Briere and Scott (2012, p. 4) ironically assign a degree of responsibility to victims who are not adequately prepared. The work of trauma recovery is localized to the victim, with very little attention paid to addressing the pathologies of perpetrators, either individual or structural. In fact, the victim’s agency in voicing the trauma serves paradoxically to strengthen the reigning social hierarchy. Radstone (2007) cites feminist author Carolyn Steedman’s remarks on the normative politics of trauma testimony:

In those moments of vibrating reception, when the heart throbs in sympathy and we are sublimely aware of the harmony of our reactions with those of the person we are sympathizing with, it seems necessary, an absolute rock-bottom line of the exchange, that he or she who tells the harrowing tale, is diminished by *having* that story to tell; and is subordinated in that act of telling. Most of the tellers, in fact, are already inferior, by reason of sex (they are women) or of status (they are of a lower rank than he – it is usually he – who listens, and feels the fineness of his own response). (p. 23)

In a discursive environment that emphasizes the exposure of “extreme” experiences (Miller & Tougaw, 2007), the trauma narratives of women, women of color, lesbians, transsexuals, “Third World” women, and other multiply marginalized groups have the potential to receive privileged attention as the radical “other.” The sensational exposure of these narratives might easily harden rather than dissolve discursive barriers between a dominant, non-traumatized “self” and a subordinate, always already traumatized “other.”

The traumatized subject is constructed not only as “other” and “subordinate” to the norm, but also as dependent on an empathetic witness/analyst/reader to facilitate remembering and give substance to trauma’s intangible specter (Radstone, 2007). A survivor of sexual assault, physical violence, or other traumatic experience requires the “stabilizing” work of therapy (rather than a social intervention) to create a self capable of productive social interaction (Payne, 2000, p. 120). The dependency of the traumatized subject on an empathetic witness has detrimental political implications for healing in literacy practices. Readers of trauma narratives align with the role of the empathetic witness to the writer’s “testimony.” Placed in an agentic position, readers gain the *illusion* of active engagement in a healing process; the act of reading (as empathetic listening) “vindicates the victim” (Harris, 2003, p. 188). This construction diminishes the reader’s responsibility to engage in *real world* action and obscures the relation of trauma to broader social problems that require structural interventions.

The problematic discursive construction of trauma also affects the academic spaces where trauma testimony sometimes takes place. As I explored in Chapter 5, the cultural shift toward narrative exposure, testimony, and witness of trauma compels some students to write academic essays that explore deeply painful personal events. Although

students sometimes can successfully articulate, assimilate, and transcend a distressing experience in academic writing, the essays, often written of the student's own volition and surprising to instructors, enter an academic environment that is traditionally hostile to the so-called "weepy solipsism" of expressive writing (Paley, 2001; Valentino, 1996). Trauma essays disrupt the conventional power dynamics between teachers and students, and the academic setting similarly disrupts the idealized negotiation between testifier and witness. Teachers cannot respond in the customary, transactional pedagogical mode because of the increased perceived vulnerability of a student who is now also a "trauma victim." The teacher's task to critically assess student work clashes with the character of a compassionate, nonjudgmental witness. Instructors face the challenge of navigating conflicting concerns for student well-being, academic "appropriateness," professional integrity, and personal beliefs (Valentino, 1996). This contentious environment narrows opportunities to cultivate the caring connections, open dialogue, and active engagement needed to foster healing change.

The penetration of trauma discourse into popular understandings of wounding and recovery shapes the way that audiences and authors construe women's healing literacy practices. The above analyses illustrate only a few of the political concerns for women who invoke trauma writing as technology of healing. Failing to consider the capacity of discourse to police boundaries and reinforce inequality blinds both readers and writers to "trauma's" limitations and has serious implications for women's well-being.

### **Conclusion**

In this chapter I argued that women's pathways to healing through reading and writing across various domains of consciousness encounter barriers that should be taken

into account in research across various disciplines. In the realm of physiological neural and chemical changes, research on women's expressive writing is plagued by methodological inconsistencies and sampling biases; problematic, stereotypical assumptions about gendered outcomes; and insufficient acknowledgment of the gendered politics of emotions. In studies that examine healing as a function of the unconscious, narrative, and listening, critical perspectives reveal the emotional and institutional gatekeepers that hinder women's paths to healing. Strong emotions such as anger and shame may intercede, open dialogue may be suppressed, and listening may be impossible if institutional powers stifle "threatening" voices. In the socio-cultural domain, employing trauma discourse in women's healing literacy practices has problematic political consequences for marginalized groups. Discourses simultaneously create openings and sanction boundaries for identification, and trauma discourse may stifle women's voice and agency under the idealized guise of creating a liberated, empathetic community.

These critiques represent a spectrum of areas where current, deficient understandings of consciousness, healing, and literacy practices for women must be remedied and strengthened. I argue that taking these critiques into account will enable individuals and organizations to better conceptualize the complexities of healing from multiple perspectives. Better understandings will lead to more comprehensive, effective approaches to tackling both the personal wounds and the broader social conditions that inflict and perpetuate women's trauma. I explore recommendations and possible outcomes based on these deficiencies in the concluding chapter.

## CHAPTER 7

### CONCLUSION

In the introductory essay to her landmark collection, *In Search of Our Mother's Gardens: Womanist Prose*, Alice Walker (1983/2004) identifies the purpose of her attention to Black women's writing: the need to save lives, and to save her own life. A fundamental, terrifying tension exists between the vastness of experience and the smallness of the individual, between passion to embrace the world and fear that curtails one's vision. Walker (1983/2004) cautions:

What is always needed in the appreciation of art, or life, is the *larger perspective*. Connections made, or at least attempted, where none existed before, the straining to encompass in one's glance at the varied world the *common thread*, the unifying theme through immense diversity, a fearlessness of growth, of search, of looking, that enlarges the private and the public world. And yet, in our particular society, it is *the narrowed and narrowing view* of life that often wins. (Walker, 1983/2004, p. 5, emphasis mine)

Throughout the present project, I have demonstrated a variety of ways that women's autobiographical writing and reading promote achieving the insightful connections and the fearless, inclusive perspective that Walker envisions. I also have interrogated why, despite the astute analysis, impassioned labor, and noble intentions of scholars, activists, students, and other authors and audiences, "the narrowed and narrowing view" sometimes prevails. In this chapter to conclude my investigation, I review my findings and suggest ways that future research and activist efforts may remedy the deficiencies that I identified.

## **Review and Recommendations**

I began my analysis with a definition of consciousness that spanned the various domains that theories about healing literacy practices target. I then constructed a definition of healing that unites common threads among disparate approaches to changing consciousness. In each domain – physiological, psychological, and socio-cultural – healing is conceived in different conceptual terms and occurs through various processual mechanisms, but the arguments reflect a remarkable consistency in the vision of healing that they propose. My analysis in Chapter 4 demonstrated that arguments for healing in literacy practices collectively promote fostering new empathetic connections, openness to dialogic movement, and personal agency to effect change. The genre of written texts most commonly understood to serve a healing function are texts that attempt to speak for the self, that reflect a “practice of the personal” and focus chiefly on the writer’s own experience (Paley, 2001). Called expressive writing, personal narrative, testimony, confessional writing, and memoir, texts of the self attempt to locate and define the writer’s experience by coalescing a manageable picture out of the multitude of meanings available to the self at a given time (Burgess & Ivanič, 2010). The act of reading (and in some cases listening) to the text entails the absorption and assimilation of ideas into one’s existing schemas and the resulting affective, bodily response to the transformation of meanings that occurs.

Within each domain of consciousness, arguments proposing the healing effects of women’s autobiographical literacy practices fail to account for the structural inequalities that affect women’s consciousness. This primary conceptual deficit weakens scholarly claims applied to women in a Western patriarchal context. Feminist analyses of gendered

physiological, psychological, and socio-cultural processes expose how a subtext of gender oppression shapes constructions of consciousness and healing. In the discussion that follows, I briefly review my arguments and provide corrective recommendations.

### **Physiological Domain**

In the physiological domain, feminist arguments give insight on the sexist methodological and conceptual biases of expressive writing studies, the problematic reliance on stereotypes and assumptions to construct gendered outcomes, and the role of gendered politics of emotion in shaping patterns of thought and behavior (Brody, 1999; Hochschild, 1979; Jaggar, 1989; Shields, 2002). Women's and men's emotional lives and physical and mental health outcomes develop in conjunction with a rich and varied environment. An organism's environment supplies stimuli that interact with genetically-encoded configurations to produce unique learning and physical development. The physiological responses thought to be involved in expressive writing include emotional and cognitive processing of a painful experience and improved self-regulation or mastery of the event in consciousness. Hundreds of studies have examined the effects of expressive writing and found an array of beneficial health outcomes attributed to emotional, cognitive, and attitudinal changes; however, the lack of gender-specific experiments, the scant attention to gender in sampling, and the spotty reporting of gender-differentiated results, among other problems, seriously undermine conclusions about expressive writing therapies for women. The few studies that do address some female-specific traumas, including breast cancer, violence and abuse, and lesbianism as a marginalized identity, suffer from systematic methodological and conceptual failings that, I argue, contribute to their inconclusive results. Feminist research methods and

feminist empirical work on gender and emotion shed light on how situational and systemic gender oppression may affect women's physiological responses including emotion, cognition, and attitudes about the self. From this perspective, I consider expressive writing interventions insufficient to help women overcome traumatic loss and pain.

To remedy these deficiencies, I offer the basic feminist tenet that research in individual and social psychology must acknowledge the U.S. cultural context of sexist inequality. At the very least, recognizing that results may differ by gender, taking steps to assure gender-equal sampling, and reporting results by gender will greatly improve the accurate characterization of health effects. Because gender oppression intersects with multiple forms of oppression, studies should either attempt to attain representative samples or acknowledge the limited generalizability of non-representative samples for diverse racial, class, and ethnic groups. While recognizing the potential non-neutrality of gender, researchers should avoid resorting to essentialized constructions of gender-correlated differences. Feminist research on emotions has shown that many differences assumed to correlate with gender actually correspond more strongly to personality traits (such as those related to communion and agency), emotional coping styles, subjective power and status (situational and general), and accumulated experiences of discrimination, deprivation, powerlessness, fear, and shame.

To avoid analyzing gender-correlated results through a sex-stereotyped lens, I suggest implementing (and modifying as needed) several of the measures that Greenland, Scourfield, Maxwell, Prior, and Scourfield (2009) use to explore theoretical antecedents of distress disclosure in adolescents. Greenland et al. (2009) attempt to deconstruct the

factors that contribute to higher scores on the generic Distress Disclosure Index (DDI), which assesses the tendency to disclose negative events or psychological distress. Higher disclosure scores are associated with increased self-esteem, life satisfaction, and social support and with decreased psychological distress, loneliness, and depression (Greenland et al., 2009, p. 2046). Greenland et al. assemble a variety of indicators including private self-consciousness, perceived social support, internal or external locus of control, and perceived benefits and subjective risks of disclosure. The study also includes a Sex Role Inventory to assess participant identification with masculine and feminine gender characteristics. To these measures I would add assessments of subjective power and status (in addition to “objective” measures of education and income level). To address the possibility of accumulated traumatic experiences such as interpersonal violence, stressful events, and social discrimination (*in addition to* whatever trauma the researcher is scrutinizing), I suggest incorporating Seng et al.’s (2012) inclusive measures of life stressors, PTSD symptoms, quality of life, and everyday discrimination. As expressive writing interventions have spread beyond college campuses, some researchers such as Lewis et al. (2005) and Henry et al. (2010) have reported participant demographic factors such as age, income, and marital status. Future studies should include and contextualize these variables along with the other measures that I have discussed.

Since benefits have been observed from writing in a variety of modes (e.g., focusing on one’s best possible self, exploring benefits of surviving cancer, describing an imaginary trauma, and recounting “non-emotional” daily tasks) (see King, 2002), researchers should provide more opportunities for participants to write about multiple facets of their experience. Based on findings that participants with different personality

characteristics or coping styles might benefit from different types of expression (Stanton & Danoff-Burg, 2002), I recommend implementing a set of writing exercises with a variety of goals (as in Gelliatry et al., 2010; Lange et al., 2002; and Schwartz & David, 2002) to allow participants maximum potential to express themselves in their most comfortable modes. Researchers should consider the ethical implications of requesting survivors of traumatic experiences to relive painful events in words when other, less distressing forms of writing might produce the same or greater benefits. On the other hand, researchers should take caution to avoid censoring women's authentic experience with appeals to the "power of positive thinking" and the trope of "triumphant survivorship" (Sulik, 2010, p. 243), as these ideals serve to blame the victim and silence rather than liberate women's expression. Additionally, expressive writing researchers often make assumptions about the benefits of writing from a variety of theoretical perspectives while ignoring the participants' ability to describe aspects of their healing process in their own words. Miller's (1994) study of writer imagery and inspiration illustrates how collecting thought samples during writing activities and interviewing participants on their writing history, attitudes, and habits illuminate the operative factors that contribute to writing's benefits. Assessments of participants' history and comfort with writing may provide insight into the role of the expressive writing intervention in the context of the participants' lives.

For all studies with women, and particularly survivors of IPV or other breaches of personal safety and integrity, I suggest that extra steps be taken to ensure that writing offers the "safe" expressive space that researchers advocate. If conducted on a university campus, writing interventions for women should take place in an area specifically

designated as a safe space for women, such as an on-campus women's resource center, meeting space for women's organizations or activities, or Women's Studies classes. Employing more varied forms of directed and free writing over a longer period of time (rather than one to four sessions) may provide women greater opportunity to address personally salient issues on their own terms. As demonstrated by Lange et al. (2002), writing activities along with "psycho-education" on the concepts of emotional and cognitive processing and self-regulation may take place over the Internet, allowing participants to complete activities in the privacy of their homes. L'Abate and Kern (2002) propose coupling on-line interventions with programmed workbooks to balance the flexibility and privacy of Internet-based activities with structured, easily shareable written products. Both Lange et al. (2002) and L'Abate and Kern (2002) address sharing writing with others as integral to the therapeutic process, an element which most experimental disclosure studies appear to ignore. Louise DeSalvo (1999) emphasizes the benefits of sharing writing in a safe, supportive environment on the author's own terms. In such a context, sharing can be both self-empowering and community-building as authors "transcend the limits of the self" (DeSalvo, 1999, p. 209) to contribute to a larger fabric of voices. As part of an ethic of care and human interaction in scientific research practice, researchers might consider keeping a counselor (preferably with a feminist perspective) available during and after the research sessions to observe and advise participants as needed. Allowing groups of participants to share their writing with each other if desired, as in the model developed by Schwartz and David (2002), also may contribute to a greater sense of communal care in the healing process. I discuss in greater detail community sharing and healing later in this conclusion.

Although some of my recommendations require familiarity with and acceptance of feminist values, most of these arguments align with conventionally accepted standards for attaining validity and reliability in empirical research and adhering to ethical intentions. Examining these factors would aid in moving beyond gender-stereotyped assumptions to a more evidenced-based understanding of how the writing process can assist persons of any gender to overcome emotional distress and trauma.

### **Psychological Domain**

The context of gender oppression also informs my critique of healing frameworks in the psychological domain of consciousness. The idealized trio of unearthing buried sensations, concocting an authentic, stable narrative, and engaging in empathetic listening fails to account for various internal and external barriers, or gatekeepers, that may interfere with women's healing under these frames. I argue that women's emotional education as a subordinate group affects the contexts in which women might achieve a renewed, empowered "voice" through literacy practices. Omnipresent cultural framing rules and feeling rules exert a tight grip on the way women work to feel and express emotion as a function of identity. External agents of socialization may not provide the space for women's dialogic engagement and self-reflection. Additionally, dominant institutional gatekeepers may hinder the dissemination of women's narratives even after an authentic "voice" is achieved. From a feminist perspective of socialized emotion, and acknowledging the potentially limited receptive audience for women's narratives, healing women's psyches through literacy practices proves a stringent challenge on multiple fronts.

In light of these concerns, I argue that investigations and depictions of women's psychological healing through literacy practices should directly address the characteristics of the interpersonal and institutional environments where transformations occur. If the contextual situation is not explored, then the author effectively universalizes the healing experience to, for example, all college composition classes or all intimate gatherings of socially marginalized women. A focus on framing and feeling rules highlights the relationality of emotional responses, which depend largely on levels of intimacy and perceived relative status and power among the individuals involved. As I explored in Chapter 5, settings such as a writing workshop for at-risk women, an intergenerational gathering of female kin, a college composition class, and a private diary impose very different framing and feeling rules for what can be appropriately expressed and how a narrative will be received. Women's ability to overcome potentially painful surges of shame, fear, and anger as they confront buried thoughts may be strengthened or debilitated by the surrounding circumstances. If women perceive wide discrepancies between their own status and power and the status of surrounding listeners, they may have little opportunity or incentive to engage in the honest self-discovery that is fundamental to this healing model. Some women may perceive benefits to *not* engaging in critical self-dialogue, as their continued silence may enable them to achieve certain power goals or maintain a desired way of life. Other women may greatly desire change and embark on a personal journey only to find that the world still does not receive them any differently. Gunaratnam and Lewis (2001) and Froyum (2010) provide models for how researchers can incorporate an analysis of framing and feeling rules into explorations and critiques of pathways to personal healing and social or institutional changes. In sum,

I suggest that achieving solidarity through critical dialogue with the “other,” whether the other is an unwanted, suppressed experience or an external entity that embodies difference, requires persistent, active emotional labor and a facilitative, collectively motivating environment. Researchers must address these elements or risk supplying a skewed portrait that fails to prepare women for probable challenges.

### **Socio-Cultural Domain**

Frameworks for women’s healing in the socio-cultural domain of consciousness draw on the contemporary popular and academic interest in “trauma” discourse. Healing from trauma entails generating a textual testimony of the trauma, sharing the testimony with a compassionate witness, and identifying with a new discursive self and community as a result of the testimony-witness process. My critique of this formula interrogates the politics of the discursive intersections between “trauma” and “women.” The boundaries and sanctions of trauma discourse align with women’s subordination and uphold, rather than challenge, patriarchal inequality. The construction of trauma in the inferior position relative to normalcy, and trauma theory’s problematic reliance on an authoritative witness, create layers of discursive barriers to healing for women and other marginalized groups. Regarding literacy practices, women’s trauma narratives counterproductively reinforce women’s perceived societal vulnerability and lack of power. Readers of women’s trauma texts may identify with the agentic role of the witness and therefore feel justified in avoiding real-world action for change. Although women may indeed collectively identify with like-minded discursive communities, the location of women’s trauma within broader patriarchal discourse remains devalued.

My suggestions to remedy the discursive limitations for women in patriarchal contexts draw on diverse ideas from feminist scholars of trauma discourse, as well as my own proposals. First, why not just refute trauma discourse altogether? Advocate of radical feminist therapy Bonnie Burstow (2003) argues that despite medical and psychiatric hegemony over the label “trauma,” feminist practice should retain the term because it is “a conceptualization that psychologically injured people claim for themselves” (p. 1301). As trauma is integrated into everyday vocabulary, feminists should not shun the opportunity to influence how trauma is understood. Trauma is a useful metaphor comparing psychological suffering to concrete physical wounding. The relation between wounds and violence also provides a useful link between trauma and multiple forms of violence and violation, including socio-structural persecution of feminist concern (Burstow, 2003, p. 1301). In my estimation, Burstow (2003) presents a valid argument for retaining “trauma” in feminist therapeutic practice seeking to preserve client agency and power of self-definition. I contend, however, that “trauma” should be applied with the utmost caution and generally discouraged in women’s literacy practices. Outside of the therapeutic space, and especially if women have not claimed the term for themselves in defining the nature of their experiences, “trauma” is likely to be detrimental to women’s healing. Aligning women’s narratives with trauma inherently devalues the text and dissociates the experience from “normal” life. Even if readers identify with the narrator’s voice and story, their resulting motivation and opportunity to enact change remain minimal if trauma is prominent.

If feminists seek to shape the trajectory of trauma in popular thought, feminists must make transparent the divergence between feminist and traditional treatment of

trauma. First, feminists must endeavor to unlock the false binary between “trauma” and “normalcy.” In *The End of Capitalism (As We Knew It)*, J.K. Gibson-Graham (1996) deconstruct the category of capitalism into a diverse multiplicity of capitalist instances. This discursive disassembly enables Gibson-Graham to then construct a flat ontological field for the array of economic forms that exist in parallel and interdependently with capitalist forms. The purpose of Gibson-Graham’s work is to deflate the overblown prominence of hegemonic views and restore democratic viability to diverse voices. Like capitalism and other economic forms, trauma and normalcy are concepts that are overdetermined, or composed entirely of their constitutive outsides. Trauma and normalcy have no inherent meaning aside from the meaning they obtain when applied to specific instances of trauma or normal-ness. Trauma and normalcy also are mutually dependent, having little worth without relation to the other. In light of this conceptualization, I propose that feminists who use the term “trauma” clarify thoroughly the nature of the wound in its non-essential being. Exposing the diversity and fluidity of meaning obscured under the fixed labels of “trauma,” “traumatized,” and “normal” challenges their hierarchical opposition and mutual exclusivity. Trauma, as claimed by the wounded subject, is not a fixed, self-explanatory identity, but a set of meanings in continual evolution that inform the subject’s “normal” experience. If an author or reader claims that a text represents trauma, then the label should not be assumed to stand for itself; the wound should be fully elaborated as to its layered personal, relational, and socio-structural components and its interdependence with so-called “normal” realities.

On the level of the subject, restoring agency to traumatized subjectivity is paramount on the feminist agenda (Brown, 2004). The traumatized subject possesses

legitimate knowledge that her textual admission of vulnerability and suffering does not invalidate. Payne (2000) observes that students who write about experiences of sexual abuse use both rational and emotional rhetorical strategies; they are “not looking inward and crying, but are engaging in sophisticated analyses and critiques of the social and institutional contexts within which they live their lives” (p. 121). What are perceived in medical and psychiatric communities as maladaptive symptoms might alternatively be constructed as survival skills deployed in desperately strenuous situations (Burstow, 2003, p. 1305). The idea that a traumatized subject has a misshapen view of the world impresses the elitist assumption that the world is essentially non-threatening. In fact, Burstow (2003) argues that mistrust may be appropriate “for women, Blacks, natives, Arabs, and (...) psychiatric survivors” for whom “the world is not a safe and benign place” (p. 1298).

Burstow (2003) and Payne (2000) suggest that by some definitions, the experience of trauma may provide the subject with an advantageous standpoint to perceive and understand power and violence in human relationships. They argue that the knowledge obtained through a traumatic experience may be more “true” and valid than other experiential knowledge (Burstow, 2003; Payne, 2000). I agree that traumatized subjectivity represents a rejection of the liberal, modernist ideological fiction that claims that the self is “centered, autonomous, and existing in a knowable, stable reality” (Payne, 2000, p. 151). In this sense, the de-centered, vulnerable self may serve as a valid, but not exclusive, source of wisdom. I disagree with the argument that the traumatized subject has a privileged, less distorted view of the world’s threats. Because, according to a postmodern, poststructural understanding, we all view reality through our own discursive

distortions, I contend that the perspective of the wounded survivor may be distorted in a different, critically constructive way from those who do not claim trauma. Touting the epistemic privilege of the traumatized subject reinstates the trauma-normalcy binary and reinforces an unhelpful, competitive struggle between the terms. Although knowledge gained from experience classified as “trauma” is valid, I caution feminists against forcing texts into the “trauma” box in order to make them legitimate. We may “honor and build on the wisdom of the traumatized view” without insisting on its singularity or dominance (Burstow, 2003, p. 1311).

A feminist perspective also stresses that oppressive, patriarchal structures inflict and deepen many forms of “personal” trauma. Marginalized groups are subject to higher instances of overt violation, as well as

the daily awareness of the possibility of rape or assault, the daily struggles to stretch insufficient wages so that the family eats, encountering yet another building that is not wheelchair accessible, and seeing once again in people’s eyes that they do not find you fully human. (Burstow, 2003, p. 1308)

Although all of these experiences occur on the level of the individual, the macro-level context of a sexist, classist, racist, ableist, and homophobic society makes them possible. From this perspective, exploring trauma may motivate subversive inquiry into the hegemonic institutions, standards, and practices that plant the seeds of many traumas.

The above suggestions for discursive reformulation affect the ways that readers and writers might interpret and utilize textual representations of trauma. For example, when students write autobiographical essays exploring situations considered traumatic, teachers might focus on the discursive context of the trauma and the student’s (and

teacher's) interpretations of the text. Instead of getting caught in the role of dispassionate authority or inquiring therapist, teachers can respect the student's experience, perceive the validity of the autobiographical project, and assist the student in probing further into the broader structural underpinnings of the trauma. Such an approach would maintain a non-exploitative relationship between teacher and student while providing the student guidance toward a self-exploratory journey. Writing a personal narrative about a traumatic experience can be a catalyst for identification, locating the self in relation to other selves in a social context. The broadness and depth of that identification may vary, but teachers should not shy away from assisting the student to probe a topic that personally touches her. Additionally, recognizing how trauma is constructed discursively enables the subject to take greater control of her own trauma, resisting the influence of institutions (such as traditional psychiatry) that claim the power to create, magnify, downplay, or otherwise impose an interpretation of trauma onto affected populations. Paley's (2001) ethnography *I-Writing: The Politics and Practice of Teaching First-Person Writing* provides an insightful analysis and multiple practical suggestions for writing teachers faced with the dilemma of students' self-disclosure in personal essays. Paley also draws on and recommends the strategies proposed in an earlier paper (Valentino, 1996) that directly addresses ethical teaching strategies for student writing on sensitive personal topics. Anderson and MacCurdy's (2001) edited collection *Writing and Healing: Toward an Informed Practice* provides four chapters dedicated to classroom experience that explore the potentialities, tactics, and challenges of first-person writing from the perspective of composition teachers.

Overall, studies of women's literacy practices fail to integrate the particularities of women's experience in a Western patriarchal context. Feminist analyses across each of the domains of consciousness provide critical insight into the persistent burden of patriarchy on women's healing through literacy practices. Greater attention to the workings of patriarchy across the physiological, psychological, and socio-cultural frameworks for characterizing healed consciousness will enable researchers, therapists, practitioners, activists, teachers, authors, and readers interested in improving women's lives through literacy practices to better conceive and implement interventions that address potentially hidden barriers to transformation.

### **Literacy Practices and Community Healing**

A major goal of feminist therapeutic, academic, and social activist work is to realize healing transformation on a level beyond the individual. Noting the importance of creating communities of resistance against the oppressive politics of breast cancer, Bricker-Jenkins (1994) explains,

Intimate relationships that preserve and nurture uniqueness and wholeness as well as connectedness are the building blocks of transformation of socio-political relations. They bear witness to the possibility and power of replacing hierarchy with egalitarianism and relations of domination/subordination with collaboration and respect for diversity. (p. 38)

Shared community healing interventions may incorporate literacy practices in numerous creative ways that reflect and respect women's unique perspectives while integrating women's voices into the fabric of the larger community.

Regarding therapeutic writing, Smyth and Catley (2002) argue that expressive writing could serve a preventative role as part of a larger public health agenda. Work sites, schools, libraries, religious and spiritual centers, social organizations (such as a YWCA), community recreation centers, and community health clinics might provide appropriate venues to host participant gatherings. Public health frameworks, social marketing tools, and communication theory models could inform the development of efficient community-level expressive writing interventions (Smyth & Catley, 2002, p. 211). Smyth and Catley (2002) recommend creating media programs, self-help materials, and Web sites to deliver the intervention to groups (p. 212). L'Abate and Kern (2002) examine the use of "distance writing" through workbooks to achieve the therapeutic goals of expressive writing. They propose that workbooks in hard copy or electronic format delivered through the Internet, e-mail, or facsimile could provide a cost-effective, structured way to diagnose, deliver, and assess written therapy. Workbooks could serve as alternatives, supplements, adjuncts, or replacements for more traditional, unstructured verbal therapy delivered face-to-face or over the Internet (L'Abate & Kern, 2002, p. 242). Although workbooks represent an "unabashedly mechanistic, completely American, technology based on a catalogue of 'solutions'" (L'Abate & Kern, 2002, p. 243), they can be easily designed and modified to accommodate a wide variety of contexts and therapeutic goals and be more or less patient self-directed. Workbooks could extend the reach of health prevention measures to underserved, hard-to-reach populations such as "the home-bound and the handicapped, military personnel, Peace Corps volunteers, missionary families abroad, and incarcerated felons and juveniles" (p. 247). To this list I would add individuals and families with limited financial resources.

Schwartz and David (2002) develop a model combining group- and home-based activities for individuals with terminal cancer. Over six bi-weekly sessions, participants complete facilitated relaxation exercises and journaling tasks and may join in group “processing” activities such as describing emotional reactions or reading portions of their writing. Participants also receive homework assignments to revisit the writing exercises over the intervening two weeks between sessions (Schwartz & David, 2002, p. 260). Schwartz and David’s model provides an integrative approach to personal and group healing that remedies the limited personal interaction in the experimental expressive writing paradigm.

Outside of the Pennebaker approach, the Veterans Writing Project provides a model of community-oriented therapeutic writing for veterans, active and reserve service members, and military family members. As expressed on the project’s main Web site, the goals of the effort are literary, educational, and therapeutic: to collect great American literature, to document and share American social history, and to provide veterans the skills and supportive environment they need to participate in healing storytelling (Veteran’s Writing Project, 2013). The Project collects and publishes members’ writing in a quarterly literary journal, podcasts, and a running blog through the online platform *0-Dark-Thirty*. The project provides multiple models for workshops of different lengths and topics provided at no cost to participants. The group also sponsors one-on-one mentoring services for participants who seek personal guidance and advice in the writing process. Although the Veterans Writing Project does not advertise gender-differentiated writing, the model’s flexibility and de-centralized approach could easily accommodate implementation for women’s-only writing groups.

A project based in Northern Ireland called Healing Through Remembering also implements community-oriented programs based on written and oral storytelling practices. The project uses a variety of models including recording oral histories, creating “living” commemorative museums, hosting conversational workshops, and creating open, accessible archives of documents and stories for public engagement (Healing Through Remembering, 2013). The Web site provides resources for getting involved in the project and numerous reports on the organization’s work and experiences, providing a high degree of transparency into the strategy and mission of the program. Like the Veterans Writing Project, Healing Through Remembering gives no mention of gender in its official documentation; however, a search on the term “women” in the Northern Ireland Conflict Related Artefacts [*sic*] Database (hosted on the Healing Through Remembering Web site at <http://cain.ulst.ac.uk/htr/index.html>) yields several examples of memorials dedicated to women’s experiences in the conflict from nine libraries and museums and one victims and survivors organization.

As the previous examples suggest, public and community healing projects tend to focus on collective trauma and not to distinguish the unique experiences of women and men. This unified approach arguably is appropriate for traumas that devastate communities in a gender-blind fashion, such as natural disasters, acts of terror, armed conflict, and political repression. Despite the gender-neutrality of the perpetrating event, however, structural inequalities that mediate norms of thinking, feeling, and behaving (as I explored in Chapter 6) also mediate social responses to an event, including whose voices tell the story and whose actions are remembered. Community healing projects such as the Veterans Writing Project and Healing Through Remembering must take care

to adopt an inclusive strategy that reaches out to all voices of the social fabric and is sensitive to the potentially silencing intersectional effects of gender, race, and class discrimination.

An excellent example of women's community healing inspired by literacy practices is the traveling mural *Who Holds The Mirror?* inspired by the women who participated in the Breast Cancer Oral History Action Project (BCOHAP) in the San Francisco Bay Area in the 1990s. BCOHAP is a health, literacy and community action research organization that trained women to collect multilingual oral histories from underserved women with breast cancer, capturing "voices that were not usually included in personal accounts of breast cancer" (Who Holds the Mirror?, 2013). According to the project Web site, the mural is used "to educate, and inspire action and dialogue about women's and community health, environmental and social justice" (Who Holds the Mirror?, 2013). The mural exposes connections between breast cancer and numerous feminist social issues: social and environmental justice, community and women's activism, immigrant rights, sexual and personal identity, body image and self-esteem, traditional and non-traditional understandings of health and healing, and the politics of health care and research (Who Holds the Mirror?, 2013). The traveling mural also has an inexpensive accompanying pedagogical guide to facilitate community discussion and political organizing. The guide contains ideas for educational uses, a description of the BCOHAP participatory action research methods, and selections (in English, Spanish, and Chinese) from the oral histories collected by the action researchers. Rather than confine the mural to rarified museum spaces, the Web site suggests exhibiting the mural in schools, cancer organizations, health centers and public health departments, adult literacy

and English as a Second Language (ESL) programs, women's groups, community centers, environmental and social justice organizations, and cultural centers. As a permanent or semi-permanent public testament to the experience of groups seldom selected for public recognition, the traveling mural shares some similarities with the Clothesline Project, the AIDS quilt, the Vietnam Women's Memorial, and the Rosie the Riveter Memorial in Richmond, CA (also called the Rosie the Riveter/ World War II Home Front National Historical Park). These projects use "storied" material objects to counteract the tendency of dominant social narratives to overlook or repress the views of under-represented populations.

The models of group-oriented approaches that I have surveyed in this section illustrate ways that literacy practices can enable healing throughout the broader social fabric. Literacy practices intervene at the connection between self and world to shape individual and shared forms of consciousness. Although private healing is crucial to motivate individuals to work for collective changes, feminist transformative action highlights the interdependencies between the personal and the political spheres, focuses centrally on structural inequalities, and brings the narratives and counter-narratives of subordinated groups from the margins to the center of the page.

## REFERENCES

- Agger, I. (1994). *The blue room: Trauma and testimony among refugee women: A psycho-social exploration*. (M. Bille, Trans.). New Jersey: Zed Books.
- Aikau, H., Erickson, K., & Moore, W. (2003). Three women writing/riding feminism's third wave. *Qualitative Sociology*, 26(3), 397-425.
- Allen, G. (2000). Language, power, and consciousness. In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 249-290). Urbana, IL: National Council of Teachers of English.
- Allen, J. G. (1995). *Coping with trauma: A Guide to self-understanding*. Washington, DC: American Psychiatric Press.
- Althusser, L. (1998). Ideology and ideological state apparatuses. In J. Rivkin & M. Ryan (Eds.), *Literary theory: An anthology* (Revised ed.) (pp. 294-304). Malden, MA: Blackwell. (Original work published 1968)
- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., Rev). Washington, DC: Author.
- Anderson, C. M., Holt, K., & McGady, P. (2000) Suture, stigma, and the pages that heal. In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 58-82). Urbana, IL: National Council of Teachers of English.
- Anderson, C. M., & MacCurdy, M. M. (Eds.) (2000). *Writing and healing: Toward an informed practice*. Urbana, IL: National Council of Teachers of English.
- Anzaldúa, G. (1999). *Borderlands/La frontera – The new mestiza* (2<sup>nd</sup> ed.). San Francisco, CA: Aunt Lute Books.

- Anzaldúa, G. (2010). La conciencia de la mestiza: Towards a new consciousness. In C. R. McCann & S. Kim (Eds.), *Feminist theory reader: Local and global perspectives* (2nd ed.) (pp. 254-262). New York: Routledge. (Original work published 1987)
- Astin, H. S., & Parelman, A. (1973). Women's studies in American colleges and universities. *International Social Science Journal*, 25(3), 389-400.
- Babbie, E. (2010). *The practice of social research* (12<sup>th</sup> ed.). Belmont, CA: Wadsworth, Cengage Learning.
- Belle, D., & Doucet, J. (2003). Poverty, inequality, and discrimination as sources of depression among U.S. women. *Psychology of Women Quarterly*, 27(2), 101-113.
- Black, M. C., Basile, K. C., Breiding, M. J., Smith, S. G., Walters, M. L., Merrick, M. T., ... Stevens, M. R. (2011). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.
- Blake, M., & Buckle, P. H. (2011). Unconscious regulatory processes in the organizational psyche. *Psychological Perspectives*, 54(1), 34-53.
- Boals, A., Banks, J., Hathaway, L., & Schuettler, D. (2011). Coping with stressful events: Use of cognitive words in stressful narratives and the meaning-making process. *Journal of Social and Clinical Psychology*, 30(4), 378-403.
- Booth, R. J., & Petrie, K. J. (2002). Emotional expression and health changes: Can we identify biological pathways? In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 157-175). Washington, D.C.: American Psychological Association.

- Bootzin, R. R. (1997). Examining the theory and clinical utility of writing about emotional experiences. *Psychological Science*, 8(3), 167-169.
- Bordo, S. (1987). *The flight to objectivity: Essays on Cartesianism and culture*. Albany: State University of New York Press.
- Bornstein, R. (2010). Gender schemas, gender roles, and expressive writing: Toward a process-focused model. *Sex Roles*, 63(3/4), 173-177.
- Brand, A. G. (2000). Healing and the brain. In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 201-221). Urbana, IL: National Council of Teachers of English.
- Brand, A. G., & Graves, R.L. (Eds.). (1994). *Presence of mind: Writing and the domain beyond the cognitive*. Portsmouth, NH: Boynton/Cook Pub.
- Brecklin, L. R. (2008). Evaluation outcomes of self-defense training for women: A review. *Aggression And Violent Behavior*, 13(1), 60-76.
- Bricker-Jenkins, M. (1994). Feminist practice and breast cancer: "The patriarchy has claimed my right breast..." In M. M. Olson (Ed.), *Women's health & social work: Feminist perspectives* (pp. 17-42). Philadelphia, PA: Haworth Press.
- Briere, J., & Scott, C. (2012). *Principles of trauma therapy: A guide to symptoms, evaluation, and treatment* (2<sup>nd</sup> ed.). Thousand Oaks, CA: Sage.
- Brody, L. (1999). *Gender, emotion, and the family*. Cambridge, MA: Harvard University Press.
- Brody, L. R., & Park, S. H. (2004). Narratives, mindfulness, and the implicit audience. *Clinical Psychology: Science And Practice*, 11(2), 147-154.

- Brown, A. E., & Goozé, M. E. (Eds.). (1995). *International women's writing: New landscapes of identity*. Westport, CT: Greenwood Press.
- Brown, C. G., Weber, S., & Ali, S. (2008). Women's body talk: A feminist narrative approach. *Journal of Systemic Therapies*, 27(2), 92-104.
- Brown, E. J., & Heimberg, R. G. (2001). Effects of writing about rape: Evaluating Pennebaker's paradigm with a severe trauma. *Journal of Traumatic Stress*, 14(4), 781-790.
- Brown, L. S. (2004). Feminist paradigms of trauma treatment. *Psychotherapy: Theory, Research, Practice, Training*, 41(4), 464-471.
- Bruner, J. (1991). The narrative construction of reality. *Critical Inquiry*, (1), 1-21.
- Burgess, A., & Ivanič, R. (2010). Writing and being written: Issues of identity across timescales. *Written Communication*, 27(2), 228-255.
- Burke, K. (1976). The party line. *Quarterly Journal of Speech*, 62(1), 62-68.
- Burke, K. (2006). On persuasion, identification, and dialectical symmetry. *Philosophy & Rhetoric*, 39(4), 333-339.
- Burke, P. J. (2004). Identities and social structure: The 2003 Cooley-Mead Award address. *Social Psychology Quarterly*, 67(1), 5-15.
- Burstow, B. (2003). Toward a radical understanding of trauma and trauma work. *Violence Against Women*, 9(11), 1293-1317.
- Butler, J. P. (2001). Giving an account of oneself. *Diacritics*, 31(4), 22-40.
- Butler, J. P. (2010). Performative acts and gender constitution: An essay in phenomenology and feminist theory. In C. R. McCann & S. Kim (Eds.), *Feminist*

- theory reader: Local and global perspectives* (2nd ed.) (pp. 419-430). New York: Routledge. (Original work published 1997)
- Campbell, K. (1973). The rhetoric of women's liberation: An oxymoron. *Quarterly Journal of Speech*, 59(1), 74-86.
- Campbell, K. (1983). Femininity and feminism: To be or not to be a woman. *Communication Quarterly*, 31(2), 101-108.
- Campbell, K. (2002). Consciousness-raising: Linking theory, criticism, and practice. *RSQ: Rhetoric Society Quarterly*, 32(1), 45-64.
- Carlson, A. (1992). Creative casuistry and feminist consciousness: The rhetoric of moral reform. *Quarterly Journal of Speech*, 78, 16-32.
- Carey-Harper, R., & Goldstein, H. (1994). The Clothesline Project: Bearing witness to violence against women. *Woman of Power*, (23), 33-35.
- Centers for Disease Control and Prevention. (2010). Current depression among adults – United States, 2006 and 2008. *MMWR*, 59(38), 1229-1235.
- Chávez, K. R. (2010). Poetic polemics: A (queer feminist of color) reflection on a gay slam poet. *Text & Performance Quarterly*, 30(4), 444-452.
- Chiesa, A., & Serretti, A. (2009). Mindfulness-Based Stress Reduction for stress management in healthy people: A review and meta-analysis. *Journal of Alternative & Complementary Medicine*, 15(5), 593-600.
- Cixous, H. (1981). The laugh of the Medusa. (K. Cohen & P. Cohen, Trans.). *Signs*, 1(4), 875-893.
- Clothesline Project. (2013). History. Retrieved from the Clothesline Project Web site [www.clotheslineproject.org](http://www.clotheslineproject.org).

- Collins, P. H. (2009). *Black feminist thought* (2<sup>nd</sup> ed.). New York: Routledge.
- Daiute, C., & Buteau, E. (2002). Writing for their lives: Children's narratives as supports for physical and psychological well-being. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 53-73). Washington, D.C.: American Psychological Association.
- Dallery, A. (1989). Politics of writing (the) body: Ecriture feminine. In A. M. Jaggar & S. Bordo (Eds.), *Gender/ body/ knowledge: Feminist reconstructions of being and knowing* (pp. 145-171). New Brunswick, NJ: Rutgers University Press.
- Damasio, A. R. (1994). *Descartes' error: Emotion, reason, and the human brain*. New York: Avon Books.
- Damasio, A. R. (2010). *Self comes to mind: Constructing the conscious brain*. New York: Pantheon Books.
- Davidson, K., Schwartz, A. R., Sheffield, D., McCord, R. S., Lepore, S. J., & Gerin, W. (2002). Expressive writing and blood pressure. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 17-30). Washington, D.C.: American Psychological Association
- Davis, F. (1992). Writing as a point of entry: Feminism, education and personal discourse. *Resources For Feminist Research*, 21(3/4), 3-7.
- DeSalvo, L. (1999). *Writing as a way of healing: How telling our stories transforms our lives*. San Francisco: Harper.
- Dever, C. (2005). *Skeptical feminism: Activist theory, activist practice*. Minneapolis: University of Minnesota Press.

- East, P., Startup, H., Roberts, C., & Schmidt, U. (2010). Expressive writing and eating disorder features: A preliminary trial in a student sample of the impact of three writing tasks on eating disorder symptoms and associated cognitive, affective and interpersonal factors. *European Eating Disorders Review*, 18(3), 180-196.
- Ekman, P. (1999). Basic emotions. In T. Dalgleish and M. Power (Eds.). *Handbook of cognition and emotion* (pp. 45-60). Sussex, U.K.: John Wiley & Sons, Ltd.
- Ekman, P., Davidson, R. J., Ricard, M., & Alan, W. B. (2005). Buddhist and psychological perspectives on emotions and well-being. *Current Directions in Psychological Science* 14(2), 59-63.
- Enke, A. (2007). *Finding the movement: Sexuality, contested space, and feminist activism*. Durham, NC: Duke University Press.
- English, L. M., & Irving, C. J. (2008). Reflexive texts: Issues of knowledge, power, and discourse in researching gender and learning. *Adult Education Quarterly*, 58(4), 267-283.
- Evans, S. M. (2003). *Tidal wave: How women changed America at century's end*. New York: Free Press.
- Felman, S., & Laub, D. (1992). *Testimony: Crises of witnessing in literature, psychoanalysis, and history*. New York: Routledge.
- Fiandt, J. (2006). Autobiographical activism in the Americas: Narratives of personal and cultural healing by Aurora Levins Morales and Linda Hogan. *Women's Studies*, 35(6), 567-584.
- Fishbane, M. (2007). Wired to connect: Neuroscience, relationships, and therapy. *Family Process*, 46(3), 395-412.

- Fisher, M. T. (2004). "The song is unfinished": The new literate and literacy and their institutions. *Written Communication*, 21(3), 290-309.
- Fleckenstein, K. S. (1994). Mental imagery, text engagement, and underprepared writers. In A. G. Brand & R. L. Graves (Eds.), *Presence of mind: Writing and the domain beyond the cognitive* (pp. 125-132). Portsmouth, NH: Boynton/Cook.
- Florence, S. (2000). Las madres, upstairs/downstairs: From soul maps and story circles to intertextual collaboration. In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 416-448). Urbana, IL: National Council of Teachers of English.
- Freire, P. (1997). Chapter 16: A response. In P. Freire, J. W. Fraser, D. Macedo, T. McKinnon, & W. T. Stokes (Eds.), *Mentoring the mentor: A critical dialogue with Paulo Freire* (pp. 303-329). New York: Peter Lang Publishing, Inc.
- Freud, S. (1998). The interpretation of dreams. In J. Rivkin & M. Ryan (Eds.), *Literary theory: An anthology* (Revised ed.) (pp. 128-150). Malden, MA: Blackwell.  
(Original work published 1900)
- Freud, S. (1998). Beyond the pleasure principle. In J. Rivkin & M. Ryan (Eds.), *Literary theory: An anthology* (Revised ed.) (pp. 168-174). Malden, MA: Blackwell.  
(Original work published 1920)
- Freud, S., & Breuer, J. (2004). *Studies in hysteria*. (N. Luckhurst, Trans.). New York: Penguin Books. (Original work published 1895)
- Froyum, C. M. (2010). The reproduction of inequalities through emotional capital: The case of socializing low-income Black girls. *Qualitative Sociology*, 33, 37-54.

- Fryer, L. (2006). Silenced voices: Stories of incarcerated Women. *Women's Studies*, 35(6), 545-565.
- Fulton, D. S. (2006). *Speaking power: Black feminist orality in women's narratives of slavery*. Albany: State University of New York Press.
- Gallehr, D. R. (1994). Wait, and the writing will come: Mediation and the composing process. In A. G. Brand & R. L. Graves (Eds.), *Presence of mind: Writing and the domain beyond the cognitive* (pp. 21-29). Portsmouth, NH: Boynton/Cook.
- Gates, G. (2011). How many people are lesbian, gay, bisexual, and transgender? Retrieved from the Williams Institute on Sexual Orientation and Gender Identity Law and Public Policy at UCLA School of Law Web site.  
<http://williamsinstitute.law.ucla.edu/wp-content/uploads/Gates-How-Many-People-LGBT-Apr-2011.pdf>.
- Gellaitry, G., Peters, K., Bloomfield, D., & Horne, R. (2010). Narrowing the gap: The effects of an expressive writing intervention on perceptions of actual and ideal emotional support in women who have completed treatment for early stage breast cancer. *Psycho-Oncology*, 19(1), 77-84.
- Gere, A.R. (2000). Whose voice is it anyway? In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 25-33). Urbana, IL: National Council of Teachers of English.
- Gigerenzer, G. (2007). *Gut feelings: The intelligence of the unconscious*. New York: Penguin.

- Gilbert, S. (2002). Writing wrong. In N. K. Miller & J. D. Tougaw (Eds.), *Extremities: Trauma, testimony, and community* (pp. 260-270). Urbana: University of Illinois Press.
- Gilman, C. P. (1913, Oct.). Why I wrote *The Yellow Wallpaper*. *The Forerunner*. C. Lavender (Ed.). 8 June 1999. The City University of New York. Retrieved from <http://www.library.csi.cuny.edu/dept/history/lavender/whyiw.html>
- Gilmore, S. (2008). *Feminist coalitions: Historical perspectives on second-wave feminism in the United States*. Chicago: University of Illinois Press.
- Goldin, F. (2009). The ghosts of our mothers: From oral tradition to written words – A history and critique of Jewish women writers of Iranian heritage. *Nashim: A Journal of Jewish Women's Studies & Gender Issues*, (18), 87-124.
- Goltz, D. (2011). Frustrating the 'I': Critical dialogic reflexivity with personal voice. *Text & Performance Quarterly*, 31(4), 386-405.
- González-López, G. (2011). Mindful ethics: Comments on informant-centered practices in sociological research. *Qualitative Sociology*, 34(3), 447-461.
- Greenland, K., Scourfield, J., Maxwell, N., Prior, L., & Scourfield, J. (2009). Theoretical antecedents of distress disclosure in a community sample of young people. *Journal of Applied Social Psychology*, 39(9), 2045-2068.
- Gremillion, H. (2004). Unpacking essentialisms in therapy: Lessons for feminist approaches from narrative work. *Journal of Constructivist Psychology*, 17(3), 173-200.

- Griessel, L., & Kotze, M. (2009). The feminine and the masculine in the development of the self in women—A post-Jungian perspective. *Women's Studies, 38*(2), 183-212.
- Gring-Pemle, L. M. (1998). Writing themselves into consciousness: Creating a rhetorical bridge between the public and private spheres. *Quarterly Journal of Speech, 84*(1), 41-61.
- Grodinsky, Y. (2000). The neurology of syntax: Language use without Broca's area. *Behavioral and Brain Sciences, 23*, 1-71.
- Gunaratnam, Y., & Lewis, G. (2001). Racialising emotional labour and emotionalising racialised labour: Anger, fear and shame in social welfare. *Journal of Social Work Practice, 15*(2), 131-148.
- Hand, F. (2011). Impossible burdens: East African Asian women's memoirs. *Research In African Literatures, 42*(3), 100-116.
- Haraway, D. J. (1988). Situated knowledges: The science question in feminism and the privilege of partial perspectives. *Feminist Studies, 14*(3), 575-599.
- Harris, J. (2003). *Signifying pain: Constructing and healing the self through writing*. Albany: State University of New York Press.
- Healing Through Remembering. (2013) Retrieved from <http://www.healingthroughremembering.org/>
- Henke, S. A. (2000). *Shattered subjects: Trauma and testimony in women's life-writing*. New York: St. Martin's Press.

- Henry, E. A., Schlegel, R. J., Talley, A. E., Molix, L. A., & Bettencourt, B. (2010). The feasibility and effectiveness of expressive writing for rural and urban breast cancer survivors. *Oncology Nursing Forum*, *37*(6), 749-757.
- Herman, J. L. (1997). *Trauma and recovery: The aftermath of violence—from domestic abuse to political terror*. New York: Basic Books.
- Hermans, H. M. (1999). Self-narrative as meaning construction: The dynamics of self-investigation. *Journal of Clinical Psychology*, *55*(10), 1193-1211.
- Hewitt, N. A. (2010) *No permanent waves: Recasting histories of U.S. feminism*. New Brunswick, NJ: Rutgers University Press.
- Hitlin, S. (2003). Values as the core of personal identity: Drawing links between two theories of self. *Social Psychology Quarterly*, *66*(2), 118-137.
- Hochschild, A. R. (1979). Emotion work, feeling rules, and social structure. *American Journal of Sociology*, *85*(3), 551-575.
- Hofmann, S. G., Sawyer, A. T., Witt, A. A., & Oh, D. (2010). The effect of Mindfulness-Based Therapy on anxiety and depression: A meta-analytic review. *Journal of Consulting And Clinical Psychology*, *78*(2), 169-183.
- Holmes, D., Alpers, G. W., Ismailji, T., Classen, C., Wales, T., Cheasty, V., Miller, A., & Koopman, C. (2007). Cognitive and emotional processing in narratives of women abused by intimate partners. *Violence Against Women*, *13*(11), 1192-1205.
- hooks, b. (1989). *Talking back: Thinking feminist, thinking Black*. Boston, MA: South End Press.

- Hoyt, T. & Yeater, E. (2011). The effects of negative emotion and expressive writing on posttraumatic stress symptoms. *Journal of Social and Clinical Psychology, 30*(6), 549-569.
- Hughes, C. F., Uhlmann, C., & Pennebaker, J. W. (1994). The body's response to processing emotional trauma: Linking verbal text with autonomic activity. *Journal of Personality, 62*(4), 565-585.
- Jacobs, B. (2010). Writing for emotion management: Integrating brain functioning and subjective experience. *Journal of Poetry Therapy, 23*(1), 23-29.
- Jaggar, A. M. (1989). Love and knowledge: Emotion in feminist epistemology. In A. M. Jaggar & S. Bordo (Eds.), *Gender/ body/ knowledge: Feminist reconstructions of being and knowing* (pp. 145-171). New Brunswick, NJ: Rutgers University Press.
- Jefferson, L. (1974). *These are my sisters: A journal from the inside of insanity*. Garden City, NY: Anchor Books.
- Jordi, R. (2011). Reframing the concept of reflection: Consciousness, experiential learning, and reflective learning practices. *Adult Education Quarterly, 61*(2), 181-197.
- Julier, L. (1994). Private texts and social activism: Reading the Clothesline Project. *English Education, 26*(4), 249-59.
- Julier, L. (2000). Voices from the line: The Clothesline Project as healing text. In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 357-384). Urbana, IL: National Council of Teachers of English.
- Keating, C. (2005). Building coalitional consciousness. *NWSA Journal, 17*(2), 86-103.
- Kihlstrom, J. F. (1987). The cognitive unconscious. *Science, 237*, 1445-1452.

- King, L. A. (2002). Gain without pain? Expressive writing and self-regulation. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 119-134). Washington, D.C.: American Psychological Association.
- Klein, A. C. (1994). Presence with a difference: Buddhists and feminists on subjectivity. *Hypatia*, 9(4), 112-130.
- Klein, K. (2002). Stress, expressive writing, and working memory. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 135-155). Washington, D.C.: American Psychological Association.
- Klein, K., & Hecker, L. (1994). The write moves: Cultivating kinesthetic and spatial intelligence in the writing process. In A. G. Brand & R. L. Graves (Eds.), *Presence of mind: Writing and the domain beyond the cognitive* (pp. 89-98). Portsmouth, NH: Boynton/Cook.
- Knudson-Martin, C. (2012). Attachment in adult relationships: A feminist perspective. *Journal of Family Theory & Review*, 4(4), 299-305.
- Koopman, C., Ismailji, T., Holmes, D., Classen, C., Palesh, O., & Wales, T. (2005). The effects of expressive writing on pain, depression and posttraumatic stress disorder symptoms in survivors of intimate partner violence. *Journal of Health Psychology*, 10(2), 211-221.
- Koppedrayar, K. (2007). Feminist applications of Buddhist thought. *Journal of Feminist Studies In Religion*, 23(1), 121-140.

- Kwon, Y. (2005). Searching to death for "Home": A Filipina immigrant bride's subaltern rewriting. *NWSA Journal*, 17(2), 69-85.
- Kynclová, T. (2006). Constructing mestiza consciousness: Gloria Anzaldúa's literary techniques in *Borderlands/La Frontera—The New Mestiza*. *Human Architecture: Journal of The Sociology of Self-Knowledge*, 4, 43-55.
- L'Abate, L., & Kern, R. (2002). Workbooks: Tools for the expressive writing paradigm. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 239-255). Washington, D.C.: American Psychological Association.
- LaCapra, D. (2001). *Writing history, writing trauma*. Baltimore: Johns Hopkins University Press.
- Laccetti, M. (2007). Expressive writing in Women with advanced breast cancer. *Oncology Nursing Forum*, 34(5), 1019-1024.
- Lange, A., Schoutrop, M., Schrieken, B., & van de Ven, J. (2002). Interapy: A model for therapeutic writing through the Internet. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 215-238). Washington, D.C.: American Psychological Association.
- Langer, S. (2010). Gender differences in experimental disclosure: Evidence, theoretical explanations, and avenues for future research. *Sex Roles*, 63(3/4), 178-183.
- Lee, J. (1997). Women re-authoring their lives through feminist narrative therapy. *Women & Therapy*, 20(3), 1-22.

- Lepore, S. J., & Smyth, J. M. (Eds.). (2002). *The writing cure: How expressive writing promotes health and emotional well-being*. Washington, D.C.: American Psychological Association.
- Lepore, S. J., Greenberg, M. A., Bruno, M., & Smyth, J. M. (2002). Expressive writing and health: Self-regulation of emotion-related experience, physiology, and behavior. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 99-117). Washington, D.C.: American Psychological Association.
- Lewis, M. (2003). The role of the self in shame. *Social Research*, 70(4), 1181-1204.
- Lewis, R. J., Derlega, V. J., Clarke, E. G., Kuang, J. C., Jacobs, A. M., & McElligott, M. D. (2005). An expressive writing intervention to cope with lesbian-related stress: The moderating effects of openness about sexual orientation. *Psychology of Women Quarterly*, 29(2), 149-157.
- Licona, A. C. (2005). (B)orderlands' rhetorics and representations: The transformative potential of feminist third-space scholarship and zines. *NWSA Journal*, 17(2), 104-129.
- Licona, A. C., & Rowe, A. (2005). After words: Feminist praxis as a bridge between theory and practice. *NWSA Journal*, 17(2), 130-135.
- Lorde, A. (2012). *Sister outsider: Essay and speeches by Audre Lorde*. Berkeley, CA: Crossing Press. (Original work published 1984)
- Lumley, M. A., Tojek, T. M., & Macklem, D. J. (2002). Effects of written emotional disclosure among repressive and alexithymic people. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and*

- emotional well-being* (pp. 75-95). Washington, D.C.: American Psychological Association.
- Lutgendorf, S. K., & Ullrich, P. (2002). Cognitive processing, disclosure, and health. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 177-196). Washington, D.C.: American Psychological Association.
- Maarof, M., Hashim, R. S., Yusof, N. M., & Mydin, R. M. (2012). Young Women Speak Out: Healing the selves through narrative therapy. *GEMA Online Journal of Language Studies*, 12(2), 393-405.
- MacCurdy, M. M. (2000). From trauma to writing: A theoretical model for practical use. In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 158-200). Urbana, IL: National Council of Teachers of English.
- Malhotra, S., & Pérez, K. (2005). Belonging, bridges, and bodies. *NWSA Journal*, 17(2), 47-68.
- Manier, D., & Olivares, A. (2005). Who benefits from expressive writing? Moderator variables affecting outcomes of emotional disclosure interventions. *Counseling & Clinical Psychology Journal*, 2(1), 15-28.
- Marcus, S. (2010). Fighting bodies, fighting words: A theory and politics of rape prevention. In C. R. McCann & S. Kim (Eds.), *Feminist theory reader: Local and global perspectives* (2nd ed.) (pp. 431-444). New York: Routledge. (Original work published 1992)

- McBride, D. E., & Mazur, A. G. (2006). Measuring feminist mobilization: Cross-national convergences and transnational networks in Western Europe. In M. M. Ferree & A. M. Tripp (Eds.), *Global feminism* (pp. 219-246). New York: New York University Press.
- McCann, C. R., & Kim, S. (2010). Theorizing feminist knowledge, agency, and politics: Introduction. In C. R. McCann & S. Kim (Eds.), *Feminist theory reader: Local and global perspectives* (2nd ed.) (pp. 303-314). New York: Routledge.
- McDonough, K. (2009). Pathways to critical consciousness: A first-year teacher's engagement with issues of race and equity. *Journal of Teacher Education, 60*(5), 528-537.
- Mejía, X. E. (2005). Gender matters: Working with adult male survivors of trauma. *Journal of Counseling & Development, 83*(1), 29-40.
- Melbourne Academic Mindfulness Interest Group. (2006). Mindfulness-based psychotherapies: A review of conceptual foundations, empirical evidence and practical considerations. *Australian And New Zealand Journal of Psychiatry, 40*(4), 285-294.
- Miller, B. J., Cardona, J., & Hardin, M. (2006). The use of narrative therapy and internal family systems with survivors of childhood sexual abuse: Examining issues related to loss and oppression. *Journal of Feminist Family Therapy, 18*(4), 1-27.
- Miller, E. K., & J. D. Cohen. (2001). An integrative theory of prefrontal cortex function. *Annual Review of Neuroscience, 24*, 167–202.

- Miller, H. (1994). Sites of inspiration: Where writing is embodied in image and emotion. In A. G. Brand & R. L. Graves (Eds.), *Presence of mind: Writing and the domain beyond the cognitive* (pp. 113-124). Portsmouth, NH: Boynton/Cook.
- Miller, J. P. (2010). Whose brain, which ethics?. *Hypatia*, (3), 618-624.
- Miller, N. K., & Tougaw, J. D. (Eds.). (2002). *Extremities: Trauma, testimony, and community*. Urbana: University of Illinois Press.
- Minh-ha, T. T. (1989). *Woman, native, other: Writing postcoloniality and feminism*. Bloomington: Indiana University Press.
- Moore, S. D., & Brody, L. R. (2009). Linguistic predictors of mindfulness in written self-disclosure narratives. *Journal of Language & Social Psychology*, 28(3), 281-296.
- Moore, S. D., Brody, L. R., & Dierberger, A. E. (2009). Mindfulness and experiential avoidance as predictors and outcomes of the narrative emotional disclosure task. *Journal of Clinical Psychology*, 65(9), 971-988.
- Murray, E. J., & Segal, D. L. (1994). Emotional processing in vocal and written expression of feelings about traumatic experiences. *Journal of Traumatic Stress*, 7(3), 391-405.
- Nagel, T. (1974). What is it like to be a bat?. *The Philosophical Review*, 83(4), 435-450.
- Novick, J. M., Trueswell, J. C., & Thompson-Schill, S. L. (2010). Broca's area and language processing: Evidence for the cognitive control connection. *Language and Linguistics Compass*, 4(10), 906-924.
- Nye, E. (2000). "The more I tell my story": Writing as healing in an HIV/AIDS community. In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing:*

- Toward an informed practice* (pp. 385-415). Urbana, IL: National Council of Teachers of English.
- Obourn, M. (2005). Audre Lorde: Trauma theory and liberal multiculturalism. *Melus*, 30(3), 219-245.
- Ong, W. J. (1977). *Interfaces of the word: Studies in the evolution of consciousness and culture*. Ithaca, NY: Cornell University Press.
- Orr, D. (2002). The uses of mindfulness in anti-oppressive pedagogies: Philosophy and praxis. *Canadian Journal of Education*, 27(4), 477-490.
- Paley, K. S. (2001). *I-writing: The politics and practice of teaching first-person writing*. Carbondale: Southern Illinois University Press.
- Park, C. L., & Blumberg, C. (2002). Disclosing trauma through writing: Testing the meaning-making hypothesis. *Cognitive Therapy & Research*, 26(5), 597-616.
- Payne, M. (2000). A strange unaccountable something. In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 115-157). Urbana, IL: National Council of Teachers of English.
- Penn, P. (2001). Chronic illness: Trauma, language, and writing: Breaking the silence. *Family Process*, 40(1), 33-52.
- Pennebaker, J. W. (1997). Writing about emotional experiences as a therapeutic process. *Psychological Science*, 8, 162-166.
- Pennebaker, J. W. (2002). Epilogue: Writing, social processes, and psychotherapy: From past to future. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 279-291). Washington, D.C.: American Psychological Association.

- Pennebaker, J. W., & Beall, S. K. (1986). Confronting a traumatic event: Toward an understanding of inhibition and disease. *Journal of Abnormal Psychology, 95*, 274-281.
- Pennebaker, J. W., & Seagal, J. D. (1999). Forming a story: The health benefits of narrative. *Journal of Clinical Psychology, 55*(10), 1243-1254.
- Peterson, C. A. (2011). Short-term psychoanalytic psychotherapy: "A construction zone." *American Journal of Psychotherapy, 65*(3), 193-204.
- Poon, A., & Danoff-Burg, S. (2011). Mindfulness as a moderator in expressive writing. *Journal of Clinical Psychology, 67*(9), 881-895.
- Potter, S. J., & Darty, T. E. (1984). Social work with challenged women: Sexism, sexuality, and the female cancer experience. *Human Sexuality In Medical Social Work, 2*(1), 83-100.
- Probyn, E. (2005). *Blush: Faces of shame*. Minneapolis: University of Minnesota Press.
- Psyche (2002). In *American Heritage Stedman's Medical Dictionary*. Retrieved from Dictionary.com Web site <http://dictionary.reference.com/browse/psyche>
- Quiney, R. (2007). Confessions of the new capitalist mother: Twenty-first-century writing on motherhood as trauma. *Women: A Cultural Review, 18*(1), 19-40.
- Quinn, K. (2012, Aug.). The body that read the laugh: Cixous, Kristeva, and mothers writing mothers. *M/C Journal, 15*(4). Retrieved from <http://journal.media-culture.org.au/index.php/mcjournal/article/view/492>
- Radner, J. (1993). *Feminist messages: Coding in women's folk culture*. Urbana: University of Illinois Press, 1993.
- Radstone, S. (2007). Trauma theory: Contexts, politics, ethics. *Paragraph, 30*(1), 9-29.

- Rainey, S. A., & Johnson, G. S. (2009). Grassroots activism: An exploration of women of color's role in the environmental justice movement. *Race, Gender, & Class, 16*(3-4), 144-173.
- Range, L., & Jenkins, S. (2010). Who benefits from Pennebaker's expressive writing paradigm? Research recommendations from three gender theories. *Sex Roles, 63*(3/4), 149-164.
- Reinhartz, S. (1992). *Feminist methods in social research*. New York: Oxford University Press.
- Rich, A. (1986). *Of woman born: Motherhood as experience and institution*. New York: W.W. Norton. (Original work published 1976)
- Rico, G. L. (1994). The heart of the matter: Language, feeling, stories, healing. In A. G. Brand & R. L. Graves (Eds.), *Presence of mind: Writing and the domain beyond the cognitive* (pp. 199-214). Portsmouth, NH: Boynton/Cook.
- Rivkin, J. & Ryan, M. (1998). Introduction: "Strangers to ourselves: Psychoanalysis." In J. Rivkin & M. Ryan (Eds.), *Literary theory: An anthology* (Revised ed.) (pp. 119-127). Malden, MA: Blackwell.
- Roberts, A. L., Austin, S., Corliss, H. L., Vandermorris, A. K., & Koenen, K. C. (2010). Pervasive trauma exposure among U.S. sexual orientation minority adults and risk of Posttraumatic Stress Disorder. *American Journal of Public Health, 100*(12), 2433-2441.
- Rowe, A. (2005). Be longing: Toward a feminist politics of relation. *NWSA Journal, 17*(2), 15-46.

- Rowe, A., & Licona, A. C. (2005). Moving locations: The politics of identities in motion. *NWSA Journal, 17*(2), 11-14.
- Roy, D. (2012). Neuroethics, gender and the response to difference. *Neuroethics, 5*(3), 217-230.
- Saenger, P. (1997). *Space between words: The origins of silent reading*. Stanford, CA: Stanford University Press.
- Salvatore, S., & Freda, M. F. (2011). Affect, unconscious and sensemaking. A psychodynamic, semiotic and dialogic model. *New Ideas In Psychology, 29*(2), 119-135.
- Sapphire. (1996). *Push*. New York: Vintage Books.
- Sarbin, T. R. (1986). *Narrative psychology: The storied nature of human conduct*. Westport, CT: Praeger/Greenwood Publishing Group.
- Schaffer, K., & Song, X. (2007). Unruly spaces: Gender, women's writing and indigenous feminism in China. *Journal of Gender Studies, 16*(1), 17-30.
- Schwartz, C. E., & David, E. (2002). To everything there is a season: A written expression intervention for closure at the end of life. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 257-278). Washington, D.C.: American Psychological Association.
- Scott, J. W. (1988). Deconstructing equality-versus-difference: Or, the uses of Poststructuralist theory for feminism. *Feminist Studies, 1*(1), 32-50.
- Seng, J. S., Lopez, W. D., Sperlich, M., Hamama, L., & Meldrum, C. D. (2012). Marginalized identities, discrimination burden, and mental health: Empirical

exploration of an interpersonal-level approach to modeling intersectionality.  
*Social Science & Medicine*, 75, 2437-2445.

Sharpe, P. (1995). Fragmented identities and the process of metamorphosis in works by Lygia Fagundes Telles. In A. E. Brown & M. E. Goozé (Eds.), *International women's writing: New landscapes of identity* (pp. 78-85). Westport, CT: Greenwood Press.

Shields, S. (2002). *Speaking from the heart: Gender and the social meaning of emotion*. Cambridge, UK: Cambridge University Press.

Shirazi, B. (2010). Wholeness, integration of personality, and conscious evolution in integral psychology. *Revision*, 31(3/4), 7-12.

Siegel, D. J. (2001). Toward an interpersonal neurobiology of the developing mind: Attachment relationships, "mindsight," and neural integration. *Infant Mental Health Journal*, 22(1/2), 67-94.

Siegel, D. J. (2006). An interpersonal neurobiology approach to psychotherapy. *Psychiatric Annals*, 36(4), 248-256.

Siegel, D. J. (2007). *The mindful brain*. New York: W.W. Norton.

Siegel, D. J. (2009). Mindful awareness, mindsight, and neural integration. *Humanistic Psychologist*, 37(2), 137-158.

Singh, A., & Hofsess, C. D. (2011). Reclaiming the maiden: Use of archetypes in a 6-week women's empowerment group. *Journal For Specialists In Group Work*, 36(1), 41-61.

- Smyth, J. M. (1998). Written emotional expression: Effect sizes, outcome types, and moderating variables. *Journal of Consulting And Clinical Psychology, 66*(1), 174-184.
- Smyth, J. M., & Catley, D. (2002). Translating research into practice: Potential of expressive writing in the field. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 199-214). Washington, D.C.: American Psychological Association.
- Stanton, A. L., & Danoff-Burg, S. (2002). Emotional expression, expressive writing, and cancer. In S. J. Lepore & J. M. Smyth (Eds.), *The writing cure: How expressive writing promotes health and emotional well-being* (pp. 31-51). Washington, D.C.: American Psychological Association.
- Stickney, L. (2010). Who benefits from Pennebaker's expressive writing? More research recommendations: A commentary on Range and Jenkins. *Sex Roles, 63*(3/4), 165-172.
- Street, B. V. (2011). Literacy inequalities in theory and practice: The power to name and define. *International Journal of Educational Development, 31*(6), 580-586.
- Sulik, G. A. (2011). *Pink ribbon blues: How breast cancer culture undermines women's health*. New York: Oxford University Press.
- Sutherland, L. M. (2005). Black adolescent girls' use of literacy practices to negotiate boundaries of ascribed identity. *Journal of Literacy Research, 37*(3), 365-406.
- Swiencicki, J. (2006). The rhetoric of awareness narratives. *College English, 68*(4), 337-355.

- Teich, N. (1994). Teaching empathy through cooperative learning. In A. G. Brand & R. L. Graves (Eds.), *Presence of mind: Writing and the domain beyond the cognitive* (pp. 143-153). Portsmouth, NH: Boynton/Cook.
- Thomas, T. H. (1994). Generous listening: A deeper way of knowing. In A. G. Brand & R. L. Graves (Eds.), *Presence of mind: Writing and the domain beyond the cognitive* (pp. 99-109). Portsmouth, NH: Boynton/Cook.
- Tougaw, J. (2002). Testimony and the subjects of AIDS memoirs. In N. K. Miller & J. D. Tougaw (Eds.), *Extremities: Trauma, testimony, and community* (pp. 166-185). Urbana: University of Illinois Press.
- Ullman, S. E. (2007). A 10-year update of 'Review and critique of empirical studies of rape avoidance.' *Criminal Justice And Behavior*, 34(3), 411-429.
- United Nations Educational, Scientific and Cultural Organization. (2004). The plurality of literacy and its implications for policies and programmes. Paris: Author.  
Retrieved from <http://unesdoc.unesco.org/images/0013/001362/136246e.pdf>
- United Nations Fourth World Conference on Women. (1995). *Beijing declaration and platform for action*. Beijing, China: Author. Retrieved from <http://www.un.org/womenwatch/daw/beijing/platform/>
- Valentino, M. J. (1996). Responding when a life depends on it: What to write in the margins when students self-disclose. *Teaching English In The Two Year College*, 23(4), 274-283.
- van der Hart, O., Brown, P., & van der Kolk, B. A. (1989). Pierre Janet's treatment of post-traumatic stress. *Journal of Traumatic Stress*, 2(4), 379-395.

- van der Kolk, B. A. (1994). The body keeps the score: Memory and the evolving psychobiology of posttraumatic stress. *Harvard Review of Psychiatry, 1*, 253-265.
- Veterans Writing Project. (2013). What we do. Retrieved from the Veterans Writing Project Web site <http://veteranswriting.org/>
- Walker, A. (1982). *The color purple*. Orlando, FL: Harcourt.
- Walker, A. (2004). *In search of our mothers' gardens: Womanist prose*. Orlando, FL: Harcourt. (Original work published 1983)
- Warnock, T. (2000). Language and literature as “equipment for living.” In C. M. Anderson & M. M. MacCurdy (Eds.), *Writing and healing: Toward an informed practice* (pp. 34-57). Urbana, IL: National Council of Teachers of English.
- White, M., & Epston, D. (1990). *Narrative means to therapeutic ends*. New York: W.W. Norton.
- Who Holds the Mirror? (2013). About the traveling mural. Retrieved from Who Holds the Mirror Web site <http://whoholdsthemirror.com/about.html>
- Willis, A., Montavon, M., Hunter, C., Hall, H., Burkle, L., & Herrera, A. (2008). *On critically conscious research: Approaches to language and literacy research*. New York: Teachers College Press.
- Wilson, E. A. (2004). *Psychosomatic: Feminism and the neurological body*. Durham, NC: Duke University Press.
- Wiredu, K. (2009). An oral philosophy of personhood: Comments on philosophy and orality. *Research In African Literatures, 40*(1), 8-18.

Woolf, V. (1998). *A room of one's own; and, Three guineas; edited with an introduction and notes by Morag Shiach*. Oxford; New York: Oxford University Press.

(Original work published 1929)

Zobl, E. (2009). Comparative perspectives symposium: Feminist zines: Cultural production, transnational networking, and critical reflection in feminist zines. *Signs*, 35(1), 1-12.

## CURRICULUM VITAE

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Women's and Gender Studies  
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### **Education:**

2010 – 2013

TOWSON UNIVERSITY, Towson, MD  
Master of Science, Women's and Gender Studies  
GPA: 3.97  
Thesis: Consciousness, Healing, and Women's Literacy  
Practices: A Feminist Critique

2001 – 2005

VASSAR COLLEGE, Poughkeepsie, NY  
Bachelor of Arts, English and Hispanic Studies  
Departmental Honors in English and General Honors

### **Research Experience:**

Aug 2011 – Dec 2012

Graduate Research Assistant, Towson University  
Institute for Teaching and Research on Women  
Supervisor: Karen Dugger, PhD

### **Field Experience:**

Jun 2012 – Sep 2012

Intern, Facilitator: Anger Management and Emotional Skills  
Writing Workshop  
Female Intervention Team (F.I.T.) Unit  
Baltimore City Juvenile Justice Center (BCJJC)  
Supervisor: Karen Dugger, PhD

Jun 2011 – Jul 2011

Volunteer, Facilitator: Girls' Empowerment Camp  
Ghana Health and Education Initiative (GHEI)  
Humjibre, Western Region, Ghana

### **Teaching Experience:**

Mar 2008 – Nov 2008

English Teaching Assistant  
Fulbright U.S. Student Program  
Profesorado Superior de Lenguas Vivas, Salta, Argentina

### **Professional Experience:**

2012 – Present

Communications Specialist  
KEYW Corporation, Hanover, MD

- 2010 – 2012                      Project Coordinator, Technical Writer  
Poole & Associates, Inc. (a KEYW Corp. company as of Oct  
2012), Annapolis Junction, MD
- 2001 – 2009                      Information Specialist  
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