GENDER MATTERS: WOMEN COUNSELLORS' EXPERIENCE OF WORKING WITH MALE CLIENTS

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A thesis submitted to the Faculty of Graduate Studies in partial fulfilment of the requirements for the degree of Master of Social Work

Graduate Program in Social Work York University Toronto, Ontario

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by

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MASTER OF SOCIAL WORK

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ABSTRACT

This study explores women counsellors' experience of working with male clients. The purpose of the study was to determine what assumptions the counsellors make about male/female relationships, what beliefs they hold about their clients, and what significance they give to the gender difference in the counselling relationship. The central thesis of this study is that the social construction of 'the male and female' within our society influences the counselling relationship between the female counsellor and male client. Women counsellors risk perpetuating traditional patterns of male/female relationships if they are unaware of the larger social and political issues in gender relations.

The six participants interviewed in this qualitative study work with male clients in the context of workplace based counselling services. Research methods included interviews, field notes and literature, and the data was analyzed for themes and patterns.

The research findings show that gender does play an important part in counselling and often shapes the relationship between the counsellor and her male clients. This study addresses the discourses of gender which influence the practice of counselling and the need for the re-negotiation of those aspects of the discourse which constrict the relationship between women counsellors and their male clients.

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CHAPTER 1

Introduction

I don't go into situations thinking I am female and this client is male. It just never crosses my mind. And when it crosses my mind that's usually a flag for me to pay attention to what's going on here, and is it something that either I don't feel the person is taking me seriously or I don't have resources that they need from a gender perspective.

"Laura", a participant

Defining the Problem: A Conceptual Starting Point

This study is an examination of women counsellors' experience of working with male clients, and its focus has been to explore how women understand their work with men. I have sought to determine what meaning the participants give to their work, that is, what assumptions they make about male/female relationships, what beliefs they hold about their clients and what significance they give to gender difference in the counselling relationship. However, the ultimate goal of the study has been to learn from this what women counsellors understand about themselves, and to learn what discourses guide their therapeutic work with male clients. The majority of research on gender in the therapy field has focused on gender relations within the family; however, the central premise of my research is that the female

counsellor must understand her own gender socialization and the social/political forces that guide her work with male clients. This research study is an effort to examine how the discourse of gender is integrated into the discourse of counselling, and what implications this interplay has for women counsellors in their clinical practice with men.

My interest in this topic comes from an awareness of the conflicts which I face in my own work with male clients. I do not intend to imply that "conflict" in this context is externalized, but it refers to competing values and beliefs which I hold that often present a challenge for me in the counselling relationship with men. I have searched to understand the complexity of these relationships in my clinical practice, and I have embraced the opportunity to explore this area further through research. Although my interest in gender roles led me to focus on the significance of gender in the counselling relationship, I understand that race, class and sexual orientation are equally important elements in the counselling dynamic.

I believe that the social construction of 'the male and female' within our society influences the work that women do in counselling with men, and that women need to understand the limitations of those constructions. Women and men are both part of a patriarchal structure that is grounded in assumptions about male and female socialization. Feminists have challenged gender stereotyping and the ways in which

it silences women and maintains inequality between men and women. On the other hand, the recent development of men's studies has recognized women's oppression under patriarchy, but has identified the ways in which men have also suffered under such a system. Despite institutionalized power, the limited concept of masculinity in our society has often denied men the ability to talk about the pain in their lives. Therefore, women counsellors must be aware of the larger social context and political issues of gender relations in order to avoid perpetuating traditional attitudes which are detrimental to both men and women. I take the feminist poststructural position that if subjectivity is the site of conflict and contention then it is also the site where change is possible (Weedon, 1994, Cree, 1995). A woman counsellor must struggle to find a way to "hold her own" and challenge men's misuse of power, but must also value men's struggle to express and deal with their problems. This qualitative research study seeks to gain a better understanding of women counsellor's phenomenological experience of working with male clients. There is very little written about what that experience means for women and the relationships they work out with men in their practice. I trust this study will motivate others to explore their own understanding of gender relations in the therapeutic environment and its meaning within their practice.

Like all qualitative research it is my goal to respectfully present "the picture"

that my subjects offer about their experience, and to convey the richness and complexity of their different ideas and approaches to the research subject. My topic is grounded in the clinical experience of women counsellors, in the belief that their struggles will have meaning for others. I believe that research and critical analysis are essential to our work if we are to maintain an authentic and ethical position towards our clients.

Definitions:

"Feminism" and "gender" are key terms used throughout my study. I define them as follows:

Feminism has many aspects. It can refer to a doctrine of asymmetrical power in gender relations, an intellectual analysis of the forces that maintain women's subordination or explores women's history and experiences or a social movement that seeks to achieve equal rights for men and women. I have used primarily the analytical aspects of feminism, drawing on theories that help me to understand the complex position of women counsellors in relation to their professional role and self-perception as women.

Gender is distinct from the concept of sexuality and relates to those attributes that are socially, not biologically based. Gender involves our understanding of how men

and women behave based on cultural roles and expectations.

Literature Review

Feminism:

The current literature which explores clinical issues related to female therapists working with male clients is largely grounded in feminist research. The literature in the feminist therapy field reflects a discussion about men as clients that signals a paradigm shift for feminists. Feminists have long been focused on the need to highlight both the neglect and abuse of women in the therapeutic environment and to heighten awareness of how they have suffered under a patriarchal system. Cavanagh and Cree (1996) write that "one of the key contributions of feminism to social work has been to highlight the gender-blindness which has characterized social work policy and literature" (p.2). The more recent inclusion of research and writing about women counselling men does not suggest that feminists see the struggle for change as being complete, but accepts that consciousness raising with women alone cannot change power inequality in the larger social context (Arshad, 1991, Bograd, 1991, Knox, 1996).

Ann Ganley (1996) in writing about feminist therapy with male clients has pointed out that there has been much written about feminist therapy and women and

about feminism and men, but there is a gap in the literature about "feminist therapy with male clients" (p.2). She suggests that feminists have the power to redefine the meaning of mental health for both men and women in a way that no longer limits "idealized male characteristics", such as independence, rationality and ambition, as the norm. These idealized characteristics have diminished both women who are socialized to think of themselves differently, and men who fall outside this "norm". A feminist approach calls for "a flexibility of roles and life-styles, egalitarian rather than power-based relationships" (p.5) and supports a pluralistic understanding of mental health.

There is some risk for feminist researchers in suggesting that men have vulnerabilities which are worthy of being highlighted through research (Bograd, 1991, Bernardez, 1987). One is at risk of being accused of anti-feminism or at the very least, of being insensitive to women's suffering and oppression; however, studies that are done suggest that men too have suffered under patriarchy. Cavanagh and Lewis (1996) conclude in their study of violent men that, "Listening to men talk about themselves, their lives and their opinions has also stripped them of some of the power which we had assumed they enjoy" (p.111). Therefore, as female counsellors we must understand both, men's power, and their vulnerabilities.

My review of the feminist literature has also helped me to understand that,

if there are to be changes in the way that women and men relate to each other, it is essential to work against sex role stereotypes. Female counsellors must be aware of their own biases and remain cognizant that, because of their own beliefs, they may have little faith that men are willing to change. An article by Michele Bograd (1991) has been very important for my understanding of how these belief systems may override women's sometimes contradictory experiences of men. These beliefs may prevent women counsellors from either challenging men's negative attitudes toward women or from reaching out to men who express a wish to get help in dealing with their personal problems.

Bograd describes her working hypothesis as the understanding that gender is socially constructed and that the kind of distinctions made between men and women are not only accepted, but taken for granted. She points out that even if women counsellors believe that they go against the 'conventional wisdom' concerning gender relations in their individual practices with men, they cannot separate themselves from the social and cultural context within which we live. If women believe that the impasses which occur in therapy are strictly individual, it is more likely that they will take responsibility for these impasses (Fisher, 1989; Okun, 1989) or blame men who appear "resistant" to change. Bograd purposes that if we recognize our beliefs as being grounded in a social context we are more likely to

challenge these beliefs and struggle with male clients on a more collaborative basis. She encourages therapists to question their own beliefs and to take the initiative in questioning stereotypical attitudes in both themselves and their clients. However, she also cautions us that "relationships between men and women are not simply cognitive constructions. They are based in material, economic and status inequities ... Changing cognition is not sufficient for changing current gender relations; we cannot simply think ourselves out of oppressive gender patterns" (p. 125). This is a cautionary note which I take throughout my study because I recognize the complex interplay between personal experience, beliefs and social/political structures with the latter pervading our construction of gender.

Gender differences - false dichotomy:

Bograd's writing led me to the work of Rachel Hare-Mustin (1987) whose ideas I see as seminal to my research and the questions that I have in this area. Hare-Mustin suggests that the construction of gender role concepts leads to a false dichotomy where the idealization of the roles is simplistic and damaging to both women and men. She sees a risk in the oversimplification of gender differences in that it maintains the power differential between men and women and ignores the complexities and commonalities of human experience. She criticizes the theorists

of family therapy for failing to recognize the significance of gender in the family therapy field. She suggests that an unconscious use of terms such as "sex roles" leaves an impression that men and women are separate, but equal (Weedon, 1994). She contends that this attitude ignores issues of power and that the idea of defined roles sets the characteristics of one against the other, so that "Men's lives are apersonal because women are personal? Women's lives are expressive because men are rational?" (p.24).

This dichotomy of gender roles is further highlighted in an article by Hare-Mustin and Marecek (1986) which raises questions for therapists about the value placed on autonomy within the field of psychology. The authors describe the achievement of autonomy as the over-riding goal of much of psychotherapy. Since autonomy is also seen as a male quality and a privilege of the upper class, it would appear that female therapists have been coopted into promoting what is valued as a masculine ideal. Hare-Mustin and Marecek challenge the concepts of autonomy and relatedness (here seen as male and female ideals) as false dichotomies and as problematic in their extreme forms. They call for further examination of women's and men's experiences and for more careful attention to the "constraints that the social context places on their behaivour" (p.210).

Hare-Mustin is critical of the writer Carol Gilligan (1982), whose writing

identifies men and women as having different moral referents and principles because of their early socialization. Hare-Mustin questions this duality, stating that the characteristics of "relational" and "principled" described by Gilligan as contrasting feminine and masculine traits, may exist in either sex and that it is power which is most likely to influence who will display certain behaviour. Hare-Mustin's challenge of a dualistic model of the concepts of female and male raises important questions. I believe that women counsellors must examine those questions if their work with men is to be collaborative and has as its goal a less constricted understanding of gender.

Although Hare-Mustin does not discuss her work in the context of poststructuralism it is within this framework that her ideas can best be understood. One of the tenets of poststructuralism is the idea that there can be no fixed meaning, but rather that "meanings are plural, relational and shifting" (Featherstone and Fawcett, 1995, p.3). The meaning of gender is understood to be socially constructed and its meaning can change depending on which discourses are accepted and valued. Weedon, a feminist poststructuralist states that, "This does not mean that meaning disappears altogether but that any interpretation is at best temporary, specific to the discourse within which it is produced and open to challenge" (1994, p.85). She states that it is at the point of experience that attempts to limit meaning create

conflict and contradiction. Her argument seems particularly relevant to the therapeutic field. She suggests that the conflict which "comes from the attempt to take up a single, unified position in competing or incoherent discourses" may lead to emotional problems, but that these personal responses must be understood in the context of "symbolic order, not in psycho-sexual structures" (p.151).

Masculine studies:

Until feminists began to challenge the assumptions of the male perspective, the therapy literature rarely identified the sex of the therapist or the client, or suggested that cross-gender therapist and client might present unique problems or dynamics. However, gender analyses have begun to emerge in the field over the last several years. It initially looked at the ways in which women were oppressed and disempowered, but more recently the gender analyses have included the study of men, and the way in which gender stereotyping has affected their lives (Avis, 1996).

Kaufman (1993) links the stereotyping of masculinity to the stereotyping of femininity and suggests that it is largely defined by "what is not feminine" (p.23). This dichetomizing of the masculine and feminine has helped to support patriarchal structures and the social relations of power. However, despite the power that men have in our society, that power is very much dependent on feminine support and

nurturing. Brooks (1991) has also described this relationship as unique between oppressor and oppressed because the oppressor is dependent on the oppressed to maintain his feelings of power and self-worth. This relationship also feeds and otherwise sustains the male in his "politically advantaged position", thus maintaining his associated power. Tied to this understanding is Kaufman's analysis of men's power and the way it has played out in our society. It has brought not only privilege to men, but also pain. The limited definition of masculinity has led to a hierarchy of power that has been destructive to men themselves. Monk (1997) identifies the importance of recognizing that significant differences in power exist "among males, as all social groups are composed of 'complex hierarchies, exclusions, alliances and oppressions' (Connell, 1993, p. 75)" (p. 124). Thus women therapists working with men are doing so in the context of "structures of privilege and power that have ensured men's dominance" (White, 1992, p.11), but they are also working with individual men who are seeking to find a voice within a patriarchal structure that often leaves them isolated from their own experience.

Avis (1996) has described two divergent threads in the therapeutic literature about how to work with men in therapy. She points out that feminists "emphasize the negative consequences of male power and control, and personal accountability for abuse of this power", whereas nonfeminists "attend more to gender roles and

socialization, affect and cognitive change" (p.232). These positions indicate the challenge that women counsellors face in their work with men. How do they find ways to challenge men's misuse of power while recognizing the feelings of powerlessness that many men feel in their lives?

Power:

One cannot speak about male/female relationships without reference to power relations. Foucault argues that power is no longer understood as simply a technique of the powerful to oppress those beneath them, but that the techniques of power operate through institutional "norms" where people learn to be the guardians of their own behaviour (White, 1990). White has written that "in the relationships between the sexes, this model is gender biased, with men more often the instruments of the normalizing gaze and women more often their subjects" (p.24).

One must understand that power is often a double-edged sword. The feminist literature states clearly that women must challenge men who misuse power that is damaging to other people in their lives. However, it is also clear that men's behaviour is often a result of their own powerlessness and their limited ability to see viable options for themselves. Many women, on the other hand, have experienced "power" in their lives through nurturing and caring, and they see themselves in this

way in their work as well. Perhaps this type of power can be better understood as an effort to have "influence" over what happens in their lives through indirect means. The danger of this position for women is that they lose something of themselves as they attempt to influence without challenging or changing the status quo. This is a risk for the female therapist who may be less comfortable in recognizing her attributes of competence and independence which may be unsettling for herself and her male clients. Consequently, both women counsellors and their clients may be "seduced" into maintaining stereotypical roles in counselling which play out the problems in this type of relationship between men and women. This may lead to assumed power imbalances in the man's favour while the counsellor assumes a caregiver role (Okun, 1989). Power in this way is seen as a "limited resource", suggesting that one person is powerful at the expense of the other (Bograd, 1991).

What is not discussed in the literature about women counselling men is the designated power of the counsellor. Poststructuralists have stressed the need to understand the power relations inherent in the dominant discourses and counsellors must understand the assumptions of power within their practices which may oppress their clients. However, the relations of power means that the counsellor is "simultaneously a subject of and an instrument, or vehicle, of power" (White, p.74). The counsellor who works within an organizational structure is open to criticism if

she is thought to be "unable to solve the problems" that clients bring to counselling. Therefore, she is subject to the "protest" of her clients and the expectations of the organization about how she should do her job. I think that an understanding of the complexity of these power relations is very important for women working with men because of the paradoxes that it presents in their relationship.

What can women counsellors offer male clients?

Several authors have questioned whether there are advantages to men counselling men as compared to women counselling men. It cannot be denied that the majority of social workers and other therapy professionals are women. Women will inevitably treat male clients. Therefore, to assume that clients should only be treated by same sex counsellors is both unrealistic and misguided (Erikson, 1993).

Women counsellors have the opportunity to help men have a different experience of male/female relationships. On the one hand they can challenge men's attitudes toward women that may be sexist (Cree, 1996) and, on the other hand, they have the opportunity to talk to men about their feelings (Forster, 1996). Feminists have begun to recognize the need to work with men and to understand the complexity of male power. Scully has argued that 'the debunking of patriarchy is not accomplished by focusing exclusively on the lives and experiences of women'

(cited in Cree, 1996, p.7). As the study of gender relations in therapy has grown, so has the recognition that men can be viewed "both as oppressors and as psychologically vulnerable people" (Brooks, 1991, p.71).

It has also been suggested that the counselling relationship can serve as a "model" for men, allowing them to have a different experience with a woman that they can then integrate into personal relationships (Erikson, 1993). However, the pitfall of this position is the assumption that women therapists are conscious of gender relations and are able to offer men a different understanding of female/male relationships. Women counsellors must be aware of their "blind spots" (Okun, 1989) when working with men. Unless they are aware of their own issues and beliefs about gender socialization, they are at risk of perpetuating traditional attitudes which are detrimental to both men and women. The question of why women should work with men becomes how women should work with men (Cree and Cavangh, 1996). We have a great deal to learn from a continuing debate and discussion.

The literature review has provided an important framework for my research topic and has broadened my ideas about what women face in their work with men. It cannot be seen simply as a personal struggle between counsellor and client, but must be understood in the larger social context. However, it is at the individual level

that counsellor and client are negotiating what is a very political issue - the relationship between women and men. The feminist and poststructuralist writers have helped me to understand that what has been taken as "the norm" or as "reality" cannot be described as an objective certainty. In this study I have explored the different ways in which women experience their work with men. I do not expect that the results will lead to "objective" findings that will then allow women counsellors to follow a prescribed model in their work with men. Instead I hope that it will provide a reference point for counsellors to think about their own experiences and situations, and allow them to integrate those ideas which have meaning for their practice.

CHAPTER 2

Methodology

THE QUALITATIVE RESEARCH PARADIGM AND DESIGN:

I have chosen to do a qualitative (interpretative) research study because I want to explore women counsellors' experience of working with male clients, and how they think and talk about that experience. Neuman (1996) describes an interpretative researcher as one who wants "to learn what is meaningful or relevant to the people being studied, or how individuals experience daily life" (p.331). The nature of qualitative research requires the researcher to search for themes, as well as for the idiosyncratic perspective of her participants, and to capture the 'picture' as they present it. I have chosen qualitative rather quantitative research for my study because I believe the latter would be inadequate for the understanding of how women counsellors think about gender in counselling and its connection to their own beliefs and personal experiences. The complexity of that experience can best be understood by contextualizing their experience with an ongoing analysis of its meaning for their practice.

This study has used a grounded theory approach because there is very little research done on women counsellors' phenomenological experience of working with

male clients. Grounded theory constantly compares data collected in the field, and through meticulous analysis of the data, seeks to develop theory. It challenges the concept of "a grand theory" and examines data with the understanding that meaning is socially constructed, negotiated and changes over time. The purpose of the research process is "to begin to define concepts, see relationships among concepts, and discover patterns" (Sherman and Reid, 1994, p.116). These concepts are redefined as the data is analyzed and themes begin to emerge. However, the findings are linked to the concrete data and thus, "grounded" in the empirical world. Gilgun (1992) also points out the need to link empirical findings to a literature review. She describes this as a cross-validation of the emerging concepts and a way of developing "higher order concepts" that allow others to build on the present research (p.35).

The literature in my area of interest has provided an important framework for my thinking about the relationship between the woman counsellor and her male clients. However, it has failed to enlighten me about what it means for women within their practice, i.e. whether they are conscious of any differences in their work with men and women, and what conditions affect how they look at the issue. One of the major theoretical ideas that I have gained from the literature is the problem of defining men and women as having fixed characteristics or positions in the world.

Therefore, grounded theory gives me a basis from which to explore the multiple meanings my participants give to gender relations in counselling, and to compare the data based on the narrative of their experiences within clinical practice.

DATA COLLECTION

The Participants:

The research is conducted in the context of Employee Assistance Programs (EAP), which are counselling services based in the workplace and provided to employees of the organization. All six women I interviewed are Employee Assistance Program counsellors. At the start of this project I had expected that the EAP context would be important to the study because of its setting within the workplace; however, for the most part, this was not borne out by my participants. This may be related to the fact that my questions were geared to their experience within their practice, and therefore, they did not focus on the larger context. It may also be related to the fact that both the participants and I are EAP counsellors. They may have assumed that there was a common understanding of the EAP context which did not require further exploration.

I contacted seven women whom I understood to be EAP practitioners because of their membership in the Employee Assistance Program Association of Toronto

(EAPAT). Only one of the counsellors declined to participate in the study and this was because she took referrals from EAP counsellors, but did not consider herself to be an EAP practitioner. I had had contact with four of the women through committee work in EAPAT, one was a colleague of mine and the sixth was someone who I knew had an established practice in the EAP field. There was nothing unique about this group in the way that they worked in counselling which made them more suitable than other EAP counsellors with whom I was familiar. However, I was acquainted with each of them through the association and I believed that this would encourage their trust and willingness to participate in the study.

All of the participants I interviewed were white and, given their occupational status, can be considered part of the middle class. Four of the women I interviewed have a Master of Social Work degree and two of the women have a Master of Education degree. They have different relationships with the organizations with which they are connected: three of them are part of an Internal EAP which means that they are staff members of the organizations for which they work, one of the women has a private practice and is the sole EAP provider to one particular organization, one works for a private EAP company that has contracts with a number of organizations and another woman works independently, providing EAP services to several different companies. This last person does mostly assessment and referral

(assessment of problem and referral to community agency), whereas the other women do the counselling themselves, although the number of sessions depends on the mandate of the program. Some of the women do both short and long term counselling.

I interviewed each of them in their place of work and they all agreed to my taping the interview. The consent form was signed by each woman at the beginning of the interview. In order to try and ensure anonymity I have replaced the women's names with pseudonyms and omitted from the transcript any reference they made to the organizations for which they work.

Research Questions:

The process of drawing up research questions helped me to learn more about the qualitative research process. I initially drew up the questions in a way that openly identified what some of my hunches were about the issues women face in counselling men, e.g. I had posed questions about power dynamics in the counselling relationship, and whether women felt they colluded with men if they did not respond to sexist comments. However, since one of my reasons for being interested in this area is the lack of information about whether women are sensitive to gender in their work, I recognized the need to have less structured questions. Therefore, I reworded

my questions so that they were more open-ended and would serve only as a guide in the interviews. My goal was to allow the participants to tell their stories in their own way and to describe the areas of discussion most significant to them (Cree, 1995, p.162).

I have included the interview questions that I used as a guide in the appendix at the back of this paper (Appendix A).

Interview Process:

Before beginning the actual study I conducted a pilot interview with Pam, who is one of my colleagues. I decided to do this because I thought it would allow me an opportunity to test out my questions, and determine whether they prompted the kind of discussion I needed in order to answer my research question. I also wanted to test my interviewing skills as a researcher, and to get Pam's feedback about whether the questions were clear and allowed her sufficient freedom to elaborate. Although I did tape our interview I had not planned to transcribe it; however, the interview was very "rich" and I felt that it would contribute to my research. Therefore, I asked her permission to include the interview in my study and she readily agreed. When I asked her what the experience of the interview was like for her she acknowledged a guardedness about appearing to be too hard on men in

order to avoid my having a negative view of her. I do not know if her concern was in relation to me as a researcher or if it was also because of our close working relationship and friendship. The interview with Pam became more significant over time because she was one of the two women who named gender as always being relevant in the therapeutic relationship.

I found that some participants were more willing than others to talk and engage in the research topic, and this seemed to influence the flow of the interview and my ability to relax and ask more probing questions. Early in the interview process I believe that I was overly concerned about analyzing and making sense of what the women were saying and, therefore, was less focused on listening to them talk about their experience. However, as I did more interviews I learned to attend more to the participants' narrative than to my 'success' as a researcher.

After my third participant, Mary, referred to her belief that she would not have been able to work with a client had she indicated to him that she was a feminist, I decided to ask the last three women if they used a feminist approach in their work.

The interviews took between forty minutes and an hour and a half. I did not conduct any second interviews and, although I asked each of the women to call me if she thought of any other points she wanted to mention, I did not hear back from

any of them. During the interview most of the women were readily able to give a number of case examples to illustrate their responses. The interview with one participant, Beth, was difficult for me because she gave very little elaboration of her case examples and I found myself providing more lengthy explanations about what I was asking. Laura had difficulty finding examples in response to my questions, although, as we progressed through the interview, examples seemed to come more readily. She offered more examples, as well, after the official interview was over and the tape had been turned off. She was the participant who attached the least significance to gender in counselling and this may be the reason why she had difficulty finding examples in response to my questions.

My location and its meaning for the research process:

My clinical practice and research for this study have brought me face to face with the complex nature of gender relations. Both endeavours have led me to recognize the interplay between the personal and the political in this area, and to strive for a better understanding of how gender relations influence the clinical practice of social work. I also recognize that the longer I am in practice the more I value the need for a theoretical base in counselling. In the same way, when I set out to do my research to interview women counsellors about their *experience* of working

with male clients, I recognized that as a feminist I needed to understand the *theoretical principles* of feminist research. Therefore I undertook an independent reading course in feminist research in order to understand more clearly the debates within the feminist research field.

The additional work in this area helped me to reflect on a number of issues that were important in my own study. One of the outcomes of my reading was that I must admit into my assumptions that women have experienced certain oppressions which bind them, the realization that because of culture, class and sexual orientation, some have suffered much more than others. I also learned the importance of balancing the recognition of women's differences with the importance of considering women's knowledge. These realizations have helped me to understand that participants cannot be isolated from their social context and that interpretation is not value free.

Glucksmann (1994) has pointed out that, because the researcher and the researched are positioned differently, they have different knowledge in "both the production of knowledge and the kinds and range of knowledge they possess" (p.150). Experience does not stand alone, separate from social context, nor is it political in and of itself. It is how the researcher interprets her participants' experience that enlarges and politicizes the experience. Weedon (1994) writes that

"there can be no guarantee of the nature of women's experience since, in so far as it is meaningful, this experience is discursively produced by the constitution of women as subjects within historically and socially specified discourses". Weedon does not rule out "the specificity of women's experience", but she warns that women's subjectivity is open to "the plurality of meaning and the possibilities contained within this plurality will have different political implications" (p. 167). It must be understood that both participants and researcher contribute to the research findings. My analysis is an integration of the participants' understanding of their experience and my interpretation of that understanding - the construction of "a negotiated reality".

Some of the women I interviewed held attitudes and beliefs about the therapeutic relationship and feminism that differed from mine. This required me to remain conscious of prejudices that I might develop in my interpretation. I tried to focus on analyzing the findings rather than on judging the women and their work, particularly as this was a commitment I had made to each participant. I had reassured them that I was not there to pass judgement on their counselling skills, but to learn about their experience of working with men. Some of the women said that the interview had heightened their awareness of the subject, but beyond this I had no indication that the interview itself would change their values or the way they worked.

I also recognize that my interpretation of data may not be shared by the participants.

Nevertheless, I have worked very hard to maintain the integrity of what the women said and to identify their values and position as separate from my own.

In reviewing the transcripts I was able to see moments in which the participant and I were not just "participant" and "researcher", but two women who held common assumptions about men. One example of this is when Barb describes an older man with whom she has been working who, in his effort to try and improve his relationships with the women in his life, bought self-help books such as *Intimate Partners*. We laugh together about this because of some mutual image of the "naivete" or perhaps the "quaintness" of his efforts. There are other times when participants talked about women clients who had careers as well as carrying the main responsibility for 'the house, the children and the men in their lives'. There was laughter and "knowing nods" between the participant and me as we recognized this familiar role for women (as one participant said "yah, been there, done that, heard that one"). There is an assumed understanding between us about "the opposite sex". It appears that our subject positions as women took precedence over our position as "researcher" and "participant" and these contradictions in our subjectivities is an area I would like to discuss later in my analysis.

Data analysis procedures:

Many researchers have pointed out the challenge of data analysis in qualitative research. Creswell (1994) states that data analysis "requires that the researcher be comfortable with developing categories and making comparisons and contrasts. It also requires that the researcher be open to possibilities and see contrary or alternative explanations for the findings"(p.153). He points out the challenge for the novice researcher in being able to reduce the data to a meaningful analysis.

Marshall and Rossman (1995) describe data analysis as "the process of bringing order, structure, and meaning to the mass of collected data. It is a messy, ambiguous, time-consuming, creative, and fascinating process. It does not build in a linear fashion; it is not neat" (p.111). These authors acknowledge the complexity of data analysis and forewarn the researcher of the demands of the research process.

The interview with my first participant was in September 1997 and with my last participant was in January 1998 and I began to prepare the data for analysis soon after the first interview. In addition to audiotaping the interviews for later transcription I kept a journal in which I made field notes after each interview. I used the journal in different ways over time and recorded different stages of the research process. I kept notes about my experience of the interviews - my reactions and the interaction between me and my participant. I reflected on how the research

process was different from counselling and recorded modifications to the interview questions. I recorded the themes which emerged and the shifts and development of those themes throughout the months of research. I went back to the literature after the transcriptions were completed and recorded any insights which I gained from a re-reading of the relevant literature. The journal also serves as an "audit trail" so that, if requested, others can see my methodological decisions throughout the research process.

I found the mechanical activity of transcribing the interviews to be very valuable. I could see things in the data that 'jumped out' at me as either similar to what I was seeing from other interviews, or that was markedly different and unique in a particular interview. I recorded any significant information and began to go back and forth between the transcriptions to see connections and emerging themes.

After I had completed three transcriptions I began to review them and mark off meaning units and categories that I found in the data. Once this had been done for all the transcripts I "cut-and pasted" the meaning units, categorized them and separated them into individual folders. Initially I had sixteen categories which I coded and then compared in order to see the relationship between them. Some of the categories were overlapping and were eventually consumed under other categories and themes. I re-read the data many times and eventually reduced the

categories to three over-arching themes. This process involved moving from first to second level coding in which I began to interpret "the meaning underlying the more obvious ideas portrayed in the data meaning units" (Tutty, Rothery and Grinnell, 1996, p. 100).

On the suggestion of a committee member I went back to my data for a more thorough analysis of my findings. This led to a restructuring of my categories and the development of themes which had been missing in the earlier analysis. Although this was initially a discouraging turn in my research, it has led to a greater understanding of qualitative research and a deeper exploration of my subject.

There were two important ideas which I attempted to keep in mind throughout the data analysis. The first was Tutty's description of the qualitative analysis as a "massive responsibility" because of the amount of data which must be sorted and compared (1996, p. 90), and the second was Marshall's reminder that alternate explanations for the data always exist and must be sought, and then the researcher must "demonstrate how the explanation offered is the most plausible of all" (1995, p. 117). These two points helped to keep me grounded and "alert" throughout the research process and led me to approach my work with both curiosity and humility.

Limitations:

Women counsellors bring to their work attitudes, beliefs and biases that are part of their socialization and their own personal history. Race, class and gender contribute to the positions that they take up in their work with their clients. Although the professional counsellor is taught skills aimed at helping her work with her clients, one can never be isolated from an understanding of who one is in the context of these other categories.

Race and class are important elements to consider in the therapeutic process; however, I have chosen to focus only on gender which I recognize as a limitation to my study. I believe that this is defensible because of its importance as a category that constructs and influences how we understand each other, and that can lead to oppression of one group over another. Nevertheless, there were times when class stereotypes were reflected in the discussion with my participants. I have given two examples below of the class bias that emerged during the interviews. These examples reflect how profoundly class attitudes form part of our framework for understanding the world. One participant when explaining situations when gender matters in counselling says

it depends a lot on the sort of socioeconomic group that you work with and the work experience of the man - and his familiarity with women and his own comfort level with women. I can think of a couple of executives I've seen where there's almost no gender difference at all. They're so well trained in overlooking that kind of issue and from their experience it isn't a factor - or you're on the shop floor and you're instantly kind of inundated with all these gender messages that men are this and women are THAT. It's more of an issue for those people.

Another participant gives an example of where gender mattered in counselling and she felt uncomfortable. She suggests that there is a contradiction in her client's behaviour based on his class background. She explains

this gentleman who was abusive to his family, and had a history of abuse himself - quite a volatile person - interestingly enough, as much as he comes from the other side of the tracks, is really apologetic if he would swear or use terminology that was out of place.

It must be understood that, despite the focus we choose to take at a particular time, other biases and values are always intertwined in our thinking. The limitation of this research prevents me from a fuller reading of the influences of these other categories in my study, but this does not in anyway diminish what I believe to be their importance in the counselling dynamic.

The study undoubtably would have been richer if I had also interviewed male clients about their experience of working with a female counsellor, or male counsellors about their experience of working with male clients. These are areas of research which others may wish to take up and would allow for a fuller study of gender relations in the therapeutic field.

CREDIBILITY OF THE STUDY:

I have approached the question of how to enhance the trustworthiness of my study by using the four criteria outlined by Lincoln and Guba (Marshall and Rossman, 1995). Instead of using the terms, validity, reliability, and objectivity, which fit the "positivist paradigm" they use "alternative constructs that more accurately reflect assumptions of the qualitative paradigm" (p.145). The first construct is credibility. I have attempted to ensure credibility by giving adequate time and attention to the participants and their experience. The feedback from my supervisor has also been critical to my efforts to be faithful in my interpretation of the data, and I have worked closely with a fellow student who has challenged my analysis and findings.

The second construct is transferability. Although I am studying EAP counsellors I believe that my findings are transferrable to a number of other counselling professionals. Because I am focusing on a clinical issue that almost all counsellors (social workers, psychologists, psychiatrists) would encounter (except perhaps counsellors who work only with women, e.g. rape centres, women's shelters) I believe that the research findings can be of value to other professionals in the field of counselling. My literature review has drawn on research done by social workers, psychologists, family therapists and psychiatrists. Although they

have taken different perspectives on the issue, the relationship between the female counsellor and male client has presented challenges which seem to cross all therapeutic disciplines.

The third construct described by Lincoln and Guba (Marshall and Rossman, 1995) is dependability. It is recognized within qualitative research that the inquiry cannot be replicated in a logical, direct way and that it is the focus on multiple meanings and "thick descriptions" which gives the study its interest and value. Sherman (1994) discusses the importance of authenticity in research which includes the need for evenhandedness in the representation of all viewpoints and an acknowledgment of the complexity of the social environment in which the research is being done. It is these aspects of the research which make it dependable rather than an expectation that the findings can be duplicated.

The fourth construct is confirmability. My goal in this study is not to come up with "objective" findings, but I am aware that I must be conscious of my own biases. I have attempted to confirm my findings in ways that prevent an interpretation of data that may lead to a misrepresentation of what my subjects have told me. I have also attempted to provide controls for these biases in a number of ways. My fellow student reviewed my analysis as a check for these biases. I have kept all of my data for review by others, and have recorded any research design

changes that I made, explaining the rationale behind the decision, and I have all my records available in case the findings are challenged or need to be re-analyzed.

ETHICAL CONSIDERATIONS:

Rudestam and Newton (1992) describe the two main ethical issues that relate to the use of participants in social science research. These are "the need for fully informed consent to participate and the need to emerge from the experience unharmed" (p.196). I do not see that my research design is controversial or that I face complex ethical issues in my study, but there are considerations which I have taken into account. I have outlined below the six main ethical issues which I have addressed in relation to participants in my study.

- I have ensured the participants that the information that they have provided
 is confidential. No reference will be made in my thesis to their names or the
 organizations in which they work.
- I gave the participants a clear understanding at the start that this is a
 voluntary process and that they were free to decide whether or not to
 participate in the study.
- I needed to be aware that my questions might arouse emotional or personal issues for the participants, e.g. participants who have been abused or

- harassed by a man.
- I reassured participants that they could withdraw from the study if the interview became uncomfortable for the reason stated above or for any other reason.
- I confirmed with the participants that the findings would only be used for the purpose of my research or for an academic article.
- I provided them with a written consent form to confirm their participation in the study (Appendix B). This form included the list of items described in the Student Information Handbook for York University, Atkinson College (Fall 1996).

Two further ethical issues relate to the writing of my thesis. I have attempted to ensure that I write in a way that is neither discriminatory nor oppressive to either an individual or group. I have tried to ensure that my language is sensitive to the people about whom I am writing and I have "substitute(d) gender-neutral words and phrases for gender-biased words" (Rudestam and Newton, 1992, p.203).

CHAPTER 3

Findings

The findings presented in this chapter explore the meaning and influence of gender in the therapeutic work that women counsellors do with their male clients. The findings suggest that gender does matter, although views of its importance may vary markedly. Two of my participants initially appeared to have strikingly different views about the importance of gender in counselling. Laura was emphatic in her belief that gender did not play a part in her work with men, and that what was important in the relationship was the "chemistry" between her and her clients. Pam believed that gender was always a part of the therapeutic work with men, but she stated that she worked hard to suspend stereotypes about men in order to try and 'hear' the story that they had to tell about themselves. Although on the surface these two views appear to be diametrically opposed, what they have in common is a wish that gender could be ignored or overcome. What both counsellors want is for gender 'not to matter'.

Although the views, approaches and values of the participants varied, common themes did emerge which reflect certain tensions that they experienced in their work with men. These tensions include how to understand the male client

without knowing his experience, how to develop empathy with men who behave in abusive ways toward women, and how to maintain an 'objective, neutral' position in marital counselling when there is a "natural alliance" with women.

In this chapter I will discuss three over-arching themes which developed from my analysis of the findings in my study. I have classified these as: 1) gender beliefs about men reflected in the therapeutic relationship; 2) the meaning of anger in the therapeutic work: men's anger and abuse as a particular problem; 3) participants' attitudes to female clients, their institutional role, and contemporary feminism. The discussion of these themes and the sub-themes within them follows.

Theme #1

Gender Beliefs about Men Reflected in the Therapeutic Relationship

The participants worked with their male clients in ways that suggested that they held certain beliefs about men. These beliefs influenced the approaches that counsellors took in their work as well as the therapeutic relationship that developed with male clients. There were a number of ways in which the beliefs about men were reflected in the findings.

Men as reluctant participants in the counselling relationship

The majority of the women interviewed perceive men as reluctant participants in counselling, and believe that the men are often unsure about why they are there. Some men are mandated into counselling because of their behaviour in the workplace and three of the women commented that men constitute most of the mandatory referrals to the EAP. Pam believed that the clients in these situations feel coerced into coming for counselling and that this contributes to a lack of trust or disclosure on the part of the client. Ann commented that although she was not suggesting "that men are the ones acting up in the workplace" they are the ones identified and sent as mandatory referrals. At other times men were mandated into counselling by the courts, or they sought it out because they believed it would help their legal case. Barb said that one man in this situation "wanted to do that to show that he was changing". In these cases the counsellors are working with people who have been identified, either by supervisors or the courts, as needing therapeutic treatment.

In situations where men came voluntarily to counselling, the participants still described them as "coming reluctantly" to counselling. They also suggested that men came with a limited idea of what they want from counselling. One women reported that they usually come "around a specific issue" such as a relationship

breakdown. Barb reported that she is seeing more men individually now than she did five years ago and in companies that have a male dominated workforce or a policy of mandatory referrals to the EAP the participants may see more male clients than female clients in their practice. However, one woman commented that, even in workplaces with a larger male population, she sees more women because they are still the ones more likely to come voluntarily about relationship problems.

The views that the participants hold about how men come to counselling appear to set the stage for the work they do with their clients. The belief that men are reluctant participants in counselling is also connected to the belief that men cannot always articulate why they have come for help. The counsellors commented that sometimes male clients "don't know why they're upset" or are "not sure what they're getting into or not sure whether it's the right thing for them". The question, therefore, becomes how do women counsellors connect with men who they believe are reluctant and inarticulate participants in the counselling process?

The difficulty of establishing trust with male clients

The issue of building trust with male clients was talked about by every woman in different ways. The participants identified a number of problems in this area which include: men's lack of trust in sharing their feelings, the counsellors' own

difficulty in trusting men (particularly when they have been abusive to female partners), the length of time it takes to establish a relationship, and the uncertainty of how to develop depth in the therapeutic relationship.

The problem of trust should be considered first by understanding the assumption that therapy is intended to help people who want to learn more about themselves and find ways to deal with problems in their lives. It is assumed that as clients put their feelings into words and 'reveal themselves' to the counsellor a trusting relationship will develop. The participants in my study reported, however, that it is often difficult for male clients to find a way to express their feelings or to trust their feelings to a counsellor. Some participants believed that their being female further limits the man's willingness to trust his feelings to them, particularly in situations where they come to talk about trouble in their relationships with women. Beth explains how this problem came up with two clients whose "partners had deserted the relationship". She says,

Their anger toward their spouse would spill over in their non acceptance of any kind of counselling I tried to do with them.(..) They thought that I was taking the woman's part by even gently raising the issue that perhaps a behaviour change on their part was indicated. (...) One SAID it, the other probably felt it, but didn't say it - the fact that I was a female counsellor was not in their best interests and that I didn't understand their point of view.

At the same time, three of the counsellors recognized their mistrust of men, and its

influence on their relationship in counselling. Pam recognized that her mistrust of male clients comes from certain beliefs that she holds about men in general and cannot be separated from the counselling context. She explains,

I mean I probably think there's something to do with .. probably somehow in there mixed up is my views of men. Whatever I've picked up from our culture or from my own experience in being with men that does get imposed on the work.

Connected to this concern about mistrust was the counsellors' belief that men's experience and behaviour were often unfamiliar and could not be easily unearthed. Pam describes the difference between working with women and men and the work required in order to understand the man's experience. She says,

You're almost comparing their [female clients'] experience with yours, whereas with a man I don't have any experience to compare it with so I really have to be much more interested in knowing what his experience is from HIS perspective (...) Sometimes I'll spend a whole session just talking to the man in the relationship to try to break down some of those barriers for me.

She comments that these barriers are particularly significant in cases where men have been violent with their partners. She explains that assumptions about them have to be "put on hold" in order to understand their story from their perspective. Ironically, her reference to "suspending stereotypes" and the "barriers" which must be overcome indicate her strong beliefs about what men are like. And conversely, men who have used anger as a way of expressing themselves, are now asked to trust

the counsellor as she searches to understand his feelings. Clearly, this is a challenge for men whose expression of feelings through words has been missing from their lives.

The view that the issue of mistrust was closely connected to the issue of anger and abuse, was supported by the majority of participants. They felt they couldn't trust what the man was reporting in cases of marital abuse, or they were "a bit hard on the man" or "more suspicious" in marital cases where there had been physical or verbal abuse. When Barb is describing a marital case in which there has been abuse she says, "he both denied that he was intimidating, and then he was minimizing it, so I wasn't sure that I could trust what he was reporting".

Reference to the length of time needed to build a trusting relationship with clients was also voiced by five of the women. It again seemed to be related to their belief that men found it difficult to express themselves and to reveal themselves to the counsellor. One participant described a man with whom she said "it took years to develop a rapport", another stated that the process "might be slow and painstaking", and a third explained the lengthy period of time it took for a man to own up to his drinking problem. She described herself as having been "cut off from exploring that in any depth". They often made the comparison between working with men and women and how much longer it took to get to know the man. Beth

says of her male clients:

They don't know why anybody else sees a problem. It's more of a challenge [than working with women]. It's harder to work through - it's a slower process - it's harder to gauge your success (...). It's more difficult I guess as a counsellor because you have to sort of lead them through the steps.

Three of the participants stated that either they had been told by clients, or it was their own perception, that male clients have more trust in a female than a male therapist. They commented that they believe clients often prefer to see a female counsellor because they can expose "the vulnerable side" and do not "need to be tough all the time". However, each of these participants also said that the reverse is true in some cases and one participant commented that she could "equally think of examples where my female side was not a plus". Two of them gave examples of situations where they felt more trust could be established with a male counsellor.

Ann explains that

if I get a couple WITH more traditional views and I'M the therapist and I'm a female - there has been some sort of - well what's SHE going to be able to do? I know a male counterpart that I think is going to be more effective.

Mary explains that if she decided to "split a case where the couple were separating and marital work was no longer indicated" she would refer the husband to a male colleague because he is very sensitive to gender issues. She states that "he made the male clients feel that they were going to be heard. There was, I think, a greater sense

of trust from the onset with him because of his gender".

It appears that even when participants believe that men feel more comfortable with a female counsellor, their own assumptions about 'male bonding' lead them to refer to the male counsellor in the belief that clients will feel more comfortable and trusting.

The counsellors perceive that men's difficulty in disclosing their feelings and their reluctance to trust the counsellor creates a distance between them in the therapy relationship. The women appear to feel unsure about how to approach their clients about deeper issues in their lives and often feel men's experiences are unfamiliar to them. Therefore, the problem of trust seems to suggest a tentativeness on the part of the counsellor and reflects her belief that she has barriers to overcome when working with male clients.

The participants convey a sense of 'otherness' about men - there are assumptions to be "put on hold", feelings of being "cut off" and "barriers" to be overcome. There is a perception of men and women as being different, and the experience of men is seen as 'unfamiliar'. It is within this context that counsellors' seek to draw men out and to understand their experience. The paradoxes and challenges faced by the counsellor are reflected in their understanding of trust as a particular problem within the therapeutic relationship with male clients.

Sexuality as a 'male problem'

The topic of sexuality is an area of discussion which I had expected would be raised by the participants as a dynamic in the work with male clients; however, it was only talked about in a fairly limited way. The participants tended to discuss sexuality as a "male problem". Four of them described cases that had to do with men flirting, with their sexual misconduct, their sexual dysfunction or their sexual attraction to the counsellor. In most cases they did not comment on their own feelings or the effect that men's sexualizing of relationships had on them.

I acknowledge in my discussion of sexuality that there is no unitary meaning for 'maleness'. It was apparent from the findings that the participants saw their male clients as inherently heterosexual, but it is important to understand the multiple subjectivities of men and to recognize that there is no one definition of masculinity.

Laura explains that when men flirt with her she "had to kind of challenge them in terms of almost hearing what I say as being credible (...) sometimes they'll tend to minimize a woman's input if you suggest things to them"; however, she quickly 'corrected' this statement by saying that she believed flirting was really about cultural differences. She goes on to give an example of where a client calls her "love" and she comments that this " is just an expression and I think it's a gender specific expression that's used COMMONLY". She explains that she is not

offended by this and interpreted it "as a warm kind of expression". She says that her age was significant in this regard because as a younger woman she may have been bothered by this, but as a middle-aged woman she did not interpret it in this way. Although Laura touches on her feelings of being minimized when men flirt with her, she seeks to explain her feelings away through 'cultural and male tradition'. This seems to fit with her belief that there are 'natural' differences between men and women which she espoused throughout the interview.

Mary talks about a lawyer she is working with who, when working late at night, "had gotten bored and so he'd gone down the hall to a [female] colleague's office and he had dropped his pants". He is very shaken by what he has done and fears a sexual harassment charge. Mary does not explore what led him to behave in this way or his feelings about what he has done. She responds to his anxiety by discussing with him his options for how he will handle the situation. She explains that he could choose to "pretend that it never occurred" or seek information about sexual harassment policy from the human resources department in his company. She appears to feel more comfortable in helping him to problem solve and to find a solution to his 'dilemma' rather than exploring what emotional forces prompted this sexual act. This may have allowed them both to avoid any discomfort attached to exploring the behaviour.

Ann told of a case where a man confessed to her female colleague, to whom he was assigned at a later date, that he had been attracted to Ann; however, she said that she had no awareness of this during their counselling sessions together and found it difficult to believe because the other counsellor "was a magnificent looking woman". Although she countered this by saying that she knew "attraction is a subjective thing", she questioned the man's sincerity concerning his feelings for her because of the other counsellor's physical looks. This seems to suggest that Ann adhered to the stereotypical attitude that men's attraction to women is based largely on conventional notions of physical beauty. Even though she also acknowledged that he had revealed much more about himself to her than he had to the other counsellor, she gives little credence to the process of transference which is part of the therapy relationship and may have an erotic component.

The sense that sexuality is a 'male problem' also emerged when one of the counsellors discusses a client whom she believed "had serious mental health problems" based on his sexual behaviour. She seemed to perceive a 'dark side' to him which prompted her to refer him to a male counsellor. She explains

he presented with issues around marital breakdown and the distress he was experiencing (...) but when you started to peel back the layers at the end there was some pretty brown layers in there (...) He would describe putting ads in the personal column and the women who would respond and how he would relate to those women. I felt that he could benefit from dealing with his issues with a male because I really felt he didn't have a perspective on things

and plus I felt that he had some very serious underlying - almost sociopathic kind of components (...) I felt that he could go from female therapist to female therapist and probably never get any help.

Michele Bograd (1991) has described "sexuality as a hidden dimension of the therapeutic relationship". She refers to Scheflen's description of "the therapist-client relationship as a dance of "quasi-courtship" (p. 164). There are many dimensions to the concept of sexuality in therapy. It is not only this analogy of 'intimacy' that is significant, but the much more everyday experiences of women counsellors in dealing with sexual attraction or feelings that arise when their male clients bring sexuality into the therapy room. To talk about one's own feelings in relation to sexuality is understandably a risky admission for a counsellor because of the fear that such feelings may be misinterpreted. Most of the participants in this study distanced themselves from any suggestion of emotional feeling attached to the sexual dimensions of men's behaviour. This distancing or depersonalizing of the issue may help counsellors to maintain their 'professional' position of objectivity, thus diffusing the power of sexuality within the therapeutic context.

Men as most suited to cognitive approaches in counselling

My findings suggest that the participants' generally worked with their male clients using problem solving or cognitive behavioural interventions. One of the participants believed that men did not want to explore their feelings and another stated that, although there were limitations on the work because of the cognitive approach, it was the most effective way to work with men.

Mary describes a 'relational model' she uses with women, but explains why her work is different with men. She says,

I do a lot of relational work with my women clients and that model isn't necessarily appropriate for very many male clients. So the kind of work I do with a lot of male clients may be more cognitive behavioural orientation... which is useful, but I'm not convinced that you necessarily have the same depth of impact in terms of the intervention. I just think the work is different.

Barb explains that when men come for counselling because of a marital breakup and they are depressed "they may not be interested in sort of understanding why the marriage didn't work or what happened". She describes them as wanting quick answers to relieve their pain. She comments that even when they make changes to improve troubled relationships they do not wish to "look at why their behaviour is a problem" or do any "looking underneath those dynamics". She explains, therefore, that in these cases she spends time with the client examining how he was socialized, and if the complaint was that he did not listen to his wife, she would enquire about whether he was "socialized to listen'. Believing that men are either unwilling to explore their feelings in more depth, or are uncomfortable in doing so, Barb moves to an *explanation* about why men have difficulties in

relationships - the social factors that isolate men from their feelings.

Mary describes a marital case in which she tries to help the couple see what happens if one person is always winning over the other. She says that she uses a model similar to mediation where you aim for "the notion of win/win". She says, "You can actually graph it out and put it pictorially. It's often something that clients, particularly male clients, can get the idea". Mary seems to assume that men function best with cognitive ideas that fit "managerial" techniques for mediation and negotiation.

I gave the participants a case example and asked them to tell me what issues would come up for them when working with an abusive husband who now sought counselling because he feels hopeless about how to make a new life for himself without his family. In most cases the participants acknowledged the sadness that the man would feel in this situation, but discussed the problem solving approach they would use with the client. One participant said that in dealing with the client's sadness about being denied access to his family she would be "doing education around that". Another participant said that she would help him think of what steps he could take to reconnect with his children, such as "letters from daddy and phone calls". Pam was the only participant who responded to this case by talking about the need to "focus on the internal - what's going on internally because I think that

there's more hope there in the person coming to terms with what they've done".

The findings suggest that some of the participants held beliefs that are reflective of ideas about men as "autonomous" rather than "relational", the latter generally perceived as a female characteristic. Mary describes a case in which she is talking to a man about his problems with relationships and she explains how she approaches this. She says,

One of the things we started to talk about was sort of related to, you know, people are all different and you might not choose to really have an intimate relationship with a lot of depth (....) You might choose to put your energies into other things. And some people do that, in fact feel quite satisfied from their lives. But I think orienting it again that it could be his choice and it would be his decision about what he wanted to do was again strategically quite successful around that.

She goes on to explain that when working with women she thinks about the work in terms of different kinds of relationships, including both marital and friendships with other women. She highlights relationships as being more important to women "than career and (...) acquisition of money or possessions".

Therapy is based on a belief that mental health is achieved by an acceptance of all parts of ourselves, including relationship and achievement needs. However, this belief also assumes that the counsellor is able to challenge gender socialization stereotypes to begin the process of helping men feel comfortable with their intimacy needs. My findings indicate that there was very little reference to men's affect or the

approach used to get at men's affective expression or emotional life. They suggest that the participants' generally worked with men in the way that they believed their clients were most familiar, and this meant focusing more on the cognitive than the emotional aspects of men's lives.

The importance of maintaining male identity

The participants were often concerned about maintaining their client's "male" identity. In some incidences they appeared reluctant to act in ways which they felt would threaten that identity and at other times they sought to preserve and protect it. There were occasions when the participants saw their clients to be in a vulnerable position and in need of help to recover a sense of their 'maleness'. This issue can be looked at from two perspectives - one having to do with women's fear of overpowering their male clients and the other related to their wish to help the client attain 'appropriate' male behaviour. In this section I have examined how the participants sought to preserve their client's masculinity, the major part that male counsellors were asked to play in providing a "male role model" and how this led to the participants' minimization of their own strengths and skills. Mary explains that the lawyer who has "dropped his pants" in front of his female colleague is very fearful about a sexual harassment charge and she reports that, although she had lots

of material about sexual harassment policies, she encourages him to find this information on his own. She comments, "he had so many issues around feeling quite ashamed about that that it was better not to be an expert about it". She explains, "My style with him was very, very non-instructional and very not direct". She suggests to the client that he could call the human resources department and ask for policies around harassment "knowing that I had a desk full of stuff I could have given him myself". She goes on to explain that she "didn't want to bring that (her knowledge) into the therapy". Mary appears to be very aware of her position as a professional in this situation and feels that her "knowledge" would be a threat to her client. She consciously balances her "expert" position with her wish to be non-threatening to her client at a time when they both perceive him to be in a vulnerable position.

Five of the participants made efforts to "support" their clients by referring them to male counsellors with the belief that there was a more 'natural' understanding between them. It was often thought that the male therapist could provide clients with a role model and would be sensitive to their problems, particularly in their relationships with women.

Laura talked frequently about referring clients to male therapists and it was often in relation to the man having "too many women in his life" and needing input from a male. She seemed hopeful that a male perspective might allow the man to assume his responsibilities as a husband and father. She describes one man who comes to her because of his unhappiness in his marriage. She says,

Now I can think of one man who speaks in a whiny voice and all his responses are blame-frame responses. Well there is a point where unless he does something different it's not going to change and you can almost see why the wife left him. I would.(...) I referred him for therapy with a MAN to try and address how he handled strong emotions, to try to get him to get a different sense of who he was. (...)Again I felt he needed to go through some of his issues (...) and get a male perspective and maybe get some positive male figure to give him some input so that he could get a sense of who he was because he was kind of like a man without a backbone in a lot of ways.

Laura seems uncomfortable with what she perceives to be this man's passivity and failure to take control of his life.

There were also times when the counsellors believed that they did not have enough to offer the man and that, therefore, the client needed to be "handed on" to a male counsellor. In the case of a man who had harassed women in the workplace and displayed anger in the counselling session Ann commented that she

referred this person on to a male colleague because I felt that clearly he wasn't going to hear it from a woman. I couldn't provide a role model for him. I could provide a role model as an assertive woman, but I couldn't provide him with a role model of a male who is respectful to other people and giving that message that what he was doing was not okay.

Mary talked about a client who, after about twenty sessions with her, had begun to see a rabbi for counselling. She said, "I think he was really ready to work

with a MAN around gender issues. It had been helpful to work with a WOMAN, but he was also now ready to work with a man about gender issues". She appears to feel that the guidance of a male will help to 'clinch' what he has learned from her. And she was pleased to learn later from the client, that almost incredulously, he found that the rabbi was saying many of the same things to him that she had said.

In one situation Barb refers a client to a male therapist when she feels that he will more readily identify with the male counsellor and face his problems. Barb comments that her male colleague called her back after he had seen the client to say, "I'm a MAN and I'm a big man and it didn't make any difference." Barb indicated that she felt supported by his letting her know that he was no more successful than she was. She seems to believe in a certain power attached to 'maleness' which was expected to help the client.

In one case a counsellor suggested to her client that he would do better with a male counsellor because of problems in his relationships with women, and she refused to continue seeing the client. She explained that it was her "professional opinion" that since most of his intimate relationships were with women, and many of these had been unsatisfactory, it was in his best interest to see a male counsellor. The client protested against this change, but she said that she would not continue to see him and gave him "the choice" of being referred to a male therapist. This

appears to be a case where the counsellor's "professional" stance and her belief in the importance of 'male identification' prevented her from working with her client to explore the issues that brought him into counselling.

The participants often appeared reluctant to disturb the "status quo" when dealing with their male clients. The findings suggest that the counsellors have certain beliefs about the importance of preserving "masculinity". This sometimes led them to back down from exploring troublesome issues in their clients lives, thus minimizing their own skills in working with male clients. The participants presented a duality in this area by casting the male counsellor in the role of preserving masculinity while using their 'authority' as a counsellor to determine how best their clients' male identity should be preserved.

Theme #2

The Meaning of Anger in the Therapeutic Work: Men's Anger as a Particular Problem

Men's anger and abuse was raised as a particular problem for women in the counselling with male clients. The case examples more consistently referred to anger and abuse than any other type of case. The cases seemed to break down into three areas: those which involved men who had a history of abuse toward female

partners, those in which men displayed anger in the counselling session (either to their female partner or the counsellor or to both) and cases where men had abused or harassed women in the workplace. However, the issues concerning anger appeared to present the same challenges for the counsellors in all three contexts.

The issues of men's anger and abuse encompasses many of the other issues previously discussed, but it also presents unique challenges for counsellors in their work with men and is worthy of special attention. The findings suggest that they feel the power of men's anger and abuse whether it is directed at them or at other women. In one sense it is not surprising that women describe these cases as the most significant in their practice because of the vulnerability that women feel in relation to men's violence. It is interesting, however, that in the context of counselling, in which the female counsellor is imbued with significant power, the issues of anger and abuse nevertheless present such a challenge in their work. It is perhaps what male anger and abuse represents for women in the wider world that gives it such significance in their practice. The participants gave a number of reasons why these cases are challenging and create such dilemmas in the therapeutic work.

Firstly, these were the cases in which they felt most discounted because of their gender, with their professional 'position' consequently undermined. Some clients made claims that both the counsellor and their wives were "over-reacting and making a big deal out of nothing" or that the counsellor couldn't understand their situations because she was a woman. In describing two cases where the men had been abusive in their marriages Beth says, "I really felt ineffectual because they could not accept that I was a female and I mean nothing I'd said had value to them because I was a female".

The second dilemma the counsellors faced was the difficulty in developing rapport with a client who was either displaying angry and abusive behaviour in the counselling session or who had a history of abuse in relationships, and who refused to take responsibility for his behaviour. There were many times when the women felt that they were not able to explore other emotions that were "underneath" the anger because the men so often denied responsibility for their behaviour. Pam, when responding to the case example that I had given her, explains that it is very difficult to treat men who feel hard done by, when they are still blaming others for their problems. She says,

I think there has to be some internal motivation on the part of the client to recognize that their actions are unacceptable and inappropriate when they've been violent and want to do something about it before there's really any contract for counselling.

Men's failure to take responsibility for their verbally or physically abusive behaviour toward women was viewed as a major barrier in counselling because it indicated their unwillingness to change. The men's denial of responsibility and their blaming attitudes also deflected the counsellors' attempts to connect with their clients and to explore the underlying reasons for their behaviour. The clients' externalization of the problem and rationalization of their behaviour served to alienate the counsellor. The participants often gave examples when men denied their part in a conflict or blamed others for the problem. Barb describes the husband in a marital case who she said

had done things like pulling the phone out of the hook and shaking the receiver over her [his wife] - never actually hit her which was his defense, you know, like didn't actually break her nose or, you know, never went to hospital so somehow that was different.

The counsellors were aware that their clients' unwillingness to take responsibility for their behaviour represented other problems in their lives. On the one hand they recognized it as a barrier to the men making changes in their lives, and on the other hand they understood that it might represent the men's inability to deal with some deeper difficulties around relationships. However, whatever the reason for the denial, the women felt that they were stymied in their efforts to work with the men who minimized their problems. Pam explains her feelings about men who haven't "moved from the position of blaming everybody else for his problems. I mean I find that most difficult - the most difficult cases and the most hopeless from my perspective".

The third issue that clearly emerged for the participants in response to the men's anger and unwillingness to take responsibility for their behaviour was the recognition that it was difficult to feel empathy and to maintain a therapeutic position in relation to these clients. Ann explains her struggle when discussing a client who is the perpetrator in a domestic abuse situation. She says,

he was the most dislikable human being you could ever meet. There was nothing sort of nice about him. He talked about being abusive. He talked about being VIOLENT and how they [women] DESERVED it. So it was difficult to think HOW am I going to work with this person (..). It would be a struggle of being offended by what he's describing and feeling a sense of, you know, how dare you. I don't want to work with someone who's doing horrible distasteful things (...) and violent things (...) So for me it's saying how do I juggle those two feelings - the distaste and the desire to try and change things or to guide things.

Pam expands further the struggle of working with abusive men by discussing her tendency to make generalizations about these clients. She comments, "I have to suspend my own inclinations to say - oh men are all the same when they've been abusive - which I think is a tendency on the part of probably a lot of women (...) to say, oh those men are all the same".

Fourthly, the participants faced the dilemma of how to maintain control of the interview and whether to continue to engage with men when they became aggressive. They not only had to think about their professional role, but they had to think about their personal safety and the risk they ran in continuing to deal with the man's anger. They were, therefore, placed in a conflicted position as a 'counsellor' and a 'woman at risk'. Pam describes a case where a man is verbally abusive to her and she shifts the conversation from his anger in order to tell him how she is feeling. She comments:

I mean I think there's always a moment that you feel like you don't know what to do whether you should just end the session because you're feeling threatened or whether you should spend a few minutes trying to figure out whether you can use the behaviour in a more therapeutic kind of way. Although mind you leaving the room I think makes a statement and that can be therapeutic in itself too. I mean really get the person to examine how they're making somebody else feel through a conversation about it. I think [this] also can be useful, but I think that's hard to sometimes judge when you're feeling somewhat threatened.

The participants' approach in dealing with their clients' anger and abuse was to either try and maintain control by setting limits on their behaviour so that counselling could continue or to refer clients to male counsellors in the belief that they would have more success in managing the behaviour.

The majority of women challenged the behaviour to some degree, although some much more tentatively than others. Two participants stated very clearly that they would not accept aggressive behaviour, and developed strategies which sometimes allowed them to maintain the therapeutic relationship. Barb describes a marital case in which there was violence in the relationship. She let the husband know that she wasn't going to do any counselling until the violence stopped. She

says, "I think there was a part of him that appreciated that kind of directness" and she links this to the fact that he is a Chief Executive Officer of a company and "he had this way of dealing pretty directly with people". This was also a case where she saw the man on his own rather than with his wife because she worried that he would feel "ganged up on by the two women in the room". She saw herself as better able to maintain control and challenge him if he did not feel 'over-powered' by two women. She felt that she could try this approach because the wife was safe and living with relatives, but the question is also raised as to whether she believed that her identification with the wife minimized her power and prevented her from challenging him on an equal footing. She saw her directness, and her ability to find a common language (his business world) with her client, to be the source of her success in getting him to take responsibility for his behaviour.

Pam explains how forewarning the client about limits on his behaviour in the counselling session "leaves some space for me not to feel so threatened". She goes on to say,

If I'm thinking about my own safety then I'm not going to be able to attend to the issues that the client is bringing in or what the issues are. So I mean it does affect the whole relationship. I think the most beneficial part of that [setting limits] is the next session when you're able to sit and talk to the client about what happened and how it made me feel and what was going on for him. And some clients are able to reflect on that and gain insight into some of their difficulties.

Although one might assume that male counsellors also experience difficulty with angry clients at times, the participants' belief that an angry and abusive client wasn't going to listen to a female counsellor often led them to refer these clients to male counsellors.

In some cases the counsellors referred clients to male counsellors because they felt that the anger was generalized to all women and that it was not possible to work with the man. Mary describes a case where a man is angry because of the amount of child support he is expected to pay. She explains,

I started to point out the reality (...) He became more angry and basically said the session is over. (...) I said would you consider seeing a male counsellor? (...) I mean at that point his rage was just generalized to basically ALL WOMEN. It [his anger] was so close to the surface. I don't think it was possible ... [to have worked around gender].

In one case where Barb was working with a man who was expressing anger and she was challenging this, she offered to refer him to a male counsellor. She says,

I was raising issues that he didn't bargain for and was very uncomfortable with that (...) I thought he would see it as a polarization of me against HIM and my being FEMALE. I actually did talk to him about whether it'd be easier for him to hear some of this from a male therapist and he thought about that and I told him to call me back and he did and said, no, I don't think I'll like it any better no matter who tells it to me. I'm not sure I'm going to buy it - right? But there was a shift. I think he felt like that it wasn't about me trying to get on his case as a woman.

It appears that Barb, herself, felt uncomfortable with the position that she was taking

in challenging this man. Giving the client the option to see a male counsellor seems to have endorsed her own position and given her a sense of greater credibility for the work she was doing.

Men's anger in our society is often described as a defense that controls other people. It is the emotion that they have been socialized to use "as a mask for other emotions", such as the fear of intimacy (Ganley, 1991, p.12). The participants were faced with very difficult situations in dealing with men's anger and abuse. They had to think of their own safety and those of the female spouse. They also struggled to develop rapport with men whose behaviour they did not respect. At times they believed there was potential for engagement. In fact, when they did challenge men themselves it did not always lead to termination, and was at times an opening for further dialogue. However, there were many times when they had little faith that engagement was possible and they believed that challenge from a male counsellor was going to have more effect on changing their clients' abusive behaviour. Their feelings of vulnerability and alienation in relation to men's anger, combined with their professional values concerning the development of empathy with clients, created a tension in counselling that made such cases problematic.

Theme #3: Participants' Attitudes to Female Clients, Their Institutional Role, and Contemporary Feminism

Up to now the findings have addressed how the participants understood their work with male clients and what that experience was like for them. However, there are three more aspects of their thinking that was reflected in the findings. At times the participants also talked about their relationship with female clients, with the organizations for which they worked and with feminism. It was at these times that the participants described how they see themselves as women. Clearly, their discussion about male clients is also part of how they understand themselves, but, it was the way in which they talked about their identification with other women and their uneasy position within the larger patriarchal organization which further helps to explain their understanding of themselves and gender relations.

The assumption of identity with female clients

Although there was no question that directly addressed the difference between working with women and men, participants often spontaneously made this comparison. They identified two main reasons why the experience was different. The first was because women clients were thought to be more comfortable talking about their problems and were "more treatment wise". Beth says that "when a

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woman comes in for therapy, they're usually more open and a little more verbal and more in TOUCH with their feelings. I mean a woman can usually identify why she's upset".

The second reason the counsellors gave for why they felt more comfortable with their female clients is because they recognize the story that the women tell about themselves. Even if it is not an experience that they themselves have had, there is an assumed identification with the woman. Pam comments

when I work with women, in general my starting point is - I think I have some understanding of what things might be like from your perspective so why don't you tell me about them. You know, it's almost like with a woman you're doing a little - I think this is the transference and counter-transference piece of it, right? You're almost comparing their experiences with yours, whereas with a man I don't have any experience to compare it with.

Mary explains the "more immediate appreciation of the experience of the woman" when doing marital counselling and she describes how this is an issue in the counselling. She comments that

I think even if it's not articulated [alignment with women] that it's there and present in the therapy. I think the wife will often assume that you will GET IT and ally with her, and I think the husband is completely fearful that you GET IT and that you're going to ally with her.

She points out that it is important to "name" the gender issue in these situations so that the man has an opportunity to express any concerns about seeing a woman therapist.

The identification with women clients means that the participants see themselves as working differently with women than men. They described the process as going more smoothly and it being easier to build trust and "a therapeutic alliance" with the female client. Mary explains that she does not talk about gender socialization when doing couple counselling, but would do this when working alone with a woman:

Now if I was seeing a woman alone I would articulate it so it's interesting how the gender does make a difference. It does make a difference because if I was working with a woman alone I would say, you know, you have been socialized to do THIS [expected to accommodate and meet the needs of other people], you know, and - and that can be okay.

Her contrasting example of male socialization is that "statistics say that men on average do three minutes of parenting a day" and she says that this would be inappropriate to mention in marital therapy. She says "I would probably bend over backwards to really try to appear very open and receptive to the experiences of both". It seems that because she is aware of her 'biases' about the differences between women's and men's socialization she has to maintain a consciousness in her efforts to be balanced when doing marital counselling.

The references to women clients were nearly always in relation to their domestic situation - they were struggling between the demands of home/child care and work expectations or were either faced with 'traditional' husbands who were

reluctant to share responsibility for household chores or with angry and abusive husbands. Beth says, in relation to the problems in traditional marriages where the woman "returns to work", that "I mean certainly as a woman you identify with that and how difficult it is". Barb described herself as serving as a role model to one woman when she set limits with the husband about his anger in the marital counselling session. She explains that the woman

was glad that I could put it on the table (...) that I could admit as a therapist that I was uncomfortable and that meant if I could do it, it reinforced what she was doing - that she was saying we can't live together right now. She said how come it took me so long to do that?

Barb did not feel that she had served as a role model to the husband in the way that she had for the wife.

The one dissenting voice among the participants in terms of identification with women was Laura. She does not adhere to the "common discourse" about men as the primary perpetrators of domestic violence and women as victims. She felt that women are as likely to be at fault in domestic assault cases as men and that men are often wronged by the system when they are charged with wife assault. This appears to be connected to her stated belief that gender issues do not enter into the therapeutic relationship and therefore, she wishes to 'balance out' the problems that men and women present. It led her to approach gender issues differently than the other counsellors. In the case examples that she gave, there was less questioning of

women's safety in the domestic situation or enquiry into men's responsibility when they had been convicted of domestic assault.

The majority of participants stated that they were more comfortable with women clients because there was more openness from the beginning and a certain level of familiarity with their stories. They were aware that this could be a threat to their relationship with male clients in marital counselling, and as one participant explained, led to "bending over backwards" in order to try and be fair to both clients. Although there is an inherent risk in an assumption of familiarity - there can be less curiosity or interest in 'alternative' stories that have been repressed - the participants identified a common understanding with their women clients which produced fewer "barriers' in the work.

Feminism: a challenge to 'professional neutrality'

I asked three of the six women whether they used a feminist approach in their work, and a fourth woman talked about feminism and its place in the therapeutic relationship. Although we did not discuss what the concept of a feminist approach meant to them, it was clear from their responses that they generally had an ambivalent relationship with feminism. Two of the participants suggested that the work of feminism was over. One explained that "I would say I'm a humanist" and

that she had "probably abandoned" some of her "feminist viewpoint" over the years. The other suggested that the "pioneering" was done in the sixties and that women should no longer expect to be treated differently. Even the two participants who suggested that they were feminists described being cautious about letting their male clients know this.

One can assume that, because feminism requires "taking a position" about the male/female relationship, it presents a challenge to counselling which by its very nature implies "objectivity". Therapy focuses on the psychological development of the individual under the guidance of a 'benign' and neutral therapist. The participants' ambivalent relation to feminism suggests that they see it as a challenge to the "humanistic values" of therapy.

All of the counsellors with whom I talked about feminism explained that they were reluctant to bring the concept of feminism into the therapeutic relationship.

Mary, when discussing the client who "drops his pants" in front of his colleague, explains

if I had ever indicated to this client that I was a feminist, identified in that way (...)I don't think he would have ever made the disclosure about what had happened at work and I think we would really have missed an opportunity for him to made a big SHIFT. I think he would have just thought, well, the feminists are those bad people out there and I just hang out with the girls.

Mary seems to feel that revealing her values might have frightened her client off.

Other participants also felt that they might lose the male client if they presented themselves as feminists. Barb says, "I'm careful how I work with that [feminism] because the client is often two genders" (referring to the fact that half her practice is with couples or families). "At this point we all have biases, whether it's a feminist bias or whatever, but my work with a couple is about them doing it differently (...) so it's really about how their own biases get in the way as opposed to mine". The women themselves seem to have taken up the common stereotypes about feminism, and in that respect they assume an identification with their *male* clients.

The participants were aware that there was a tendency to form an alliance more readily with female clients as compared to male clients. In discussing marital cases they talked about "the risk" of "over-alignment" with the woman client which heightened their efforts to remain neutral when doing marital counselling. As a way of dealing with this issue one participant stated that "I try to look at the marriage as the client rather than the individuals within the couple". There was a sense that the participants wanted to try and remain 'neutral' in the work with men and women, in spite of an acknowledgment that this was sometimes very difficult, especially in cases where men had been abusive. Therefore, although they felt a connection with women, and recognized their own struggles to have a similar connection with men,

they were reluctant to take a position which conceptualizes gender relations from a systemic perspective.

The participants seemed uncertain about how men would cope with a feminist approach and there was a general sense that taking such an approach would 'destabilize' the relationship. This view seems to fit into the differentiation that Avis (1996) makes between feminist and non-feminist approaches to therapy. She refers to Bograd's (1990) argument that "a feminist approach to the therapy of men keeps power at the centre of personal and clinical concern" whereas, non-feminist therapists "attend more to gender roles and socialization" (p. 232). The participants in my study generally referred to male/female socialization as "different, but equal". One participant explained that "I accept that there are differences (...) It isn't that one is better or one is worse or one is the good guy". Another described her belief that "we need to value the diversity" [between men and women]. She expressed concern that if men and women begin to think alike "we're probably in a pretty disturbed society". Feminism clearly challenges these positions because it requires the counsellor to question her own relationship to the cultural beliefs and ideas about gender socialization, and to question assumptions of neutrality in male/female relationships.

The gendered organization

The main focus of my study was on the participants' relationship with their clients, rather than their position as professionals within organizations where they are expected to deal with 'troubled' employees in order to help maintain a productive workforce. However, Ann and Laura did make reference to how they are viewed by other parts of the organization and by senior management, and these references seem important to the study because they reflect structural issues of gender which move beyond the micro level of individual counselling commented that, rather than gender being an issue in counselling, it may be more of an issue "in terms of perhaps all the senior male leaders kind of giving you credence for who you are". She then seemed to contradict herself by commenting that organizations were learning to deal with "differences in gender" and that she consciously brought the "touchy feely" comment to discussions "to make them aware that I'm coming at it from a different perspective". Ann said that sometimes the terminology that was used was "there's a little girl that works over" in the EAP and she felt as if she were perceived as "the one that, you know, fluffs up the pillows in the hotel room after - after you leave". The emotional and sexual language that Laura and Ann use reflect "feminine" stereotypes. Laura presents gender as an important distinction that must be identified so that the executives will notice her,

whereas Ann clearly sees this as demeaning and finds relief only in her sardonic awareness of the situation. In both cases the women appear to feel that they are outside the patriarchal domination of their organizations and are unsure of their role within this structure. They appear more aware of themselves as 'women', and as separate from their role as professionals who are respected for the work that they do with employees.

Conclusion:

My findings suggest that gender does play an important part in the therapeutic relationship between the participants and their male clients. This is demonstrated in two significant ways. One has to do with the frequency with which they referred male clients on to male counsellors. The reason for these referrals fall into three general categories: the belief that the man needed a male role model in order to change, the belief that the client wasn't going to listen to a woman, and situations where the counsellor felt she could not deal with the client's anger in the counselling session. The other has to do with the frequency with which they contrasted their experience of working with male and female clients. A certain consciousness is needed to learn the man's 'story' and to understand what lies behind it. However, five of the six participants acknowledged a "natural alliance"

with women clients which meant that there was "less groundwork" to lay than is necessary with male clients. In my study it was these differences, and the corresponding assumption of identification with female clients, which often helped the participants to explain their work with men and why it is sometimes problematic.

Counselling is not gender-free and the implications of this were reflected through the women's stories of their work with men. They held strong beliefs about men and those beliefs influenced the therapeutic relationship. Some participants were more conscious than others of gender as a dynamic in their work, and some acknowledged its impact on the relationship with their clients. Women counsellors see themselves as more 'comfortable' with women clients, and often assume that male clients will be 'do better' with male counsellors. Thus there is the suggestion of hierarchy and boundaries in male/female relationships which is supported through clinical knowledge and practice. The participants often referred to gender socialization and its effect on the lives of both men and women, and in the majority of cases they did not see counselling as isolated from the influences of the larger social context; however, they hesitated to embrace feminism as a framework for understanding structural inequalities that form male/female relationships. The discussion of gender is not a neutral activity and carries with it conflicting ideas and experiences. Counselling is not isolated from these conflicts and, therefore, women

counsellors benefit from an awareness of the role of gender in the therapeutic relationship. They must begin to think about new ways of working with male clients so that they value their own strengths and skills, but also recognize the institutionalized structures that inform gender relations.

CHAPTER 4

Gender is a reality

I think gender is a reality. I think you always have to be attentive to that issue. I mean gender is significant no matter who you're working with. You're either working with a woman and you're interested in understanding her life through the eyes of a woman or you're working with a man and as a woman therapist I have to spend more time - I really have to attend to understanding his story through his eyes and his experiences.

"Pam", a participant

Although counselling is associated with 'the female world' because it attends to emotions and feelings, it has become part of our cultural landscape and there are an increasing number of both men and women entering into counselling. The discourse of gender relations enters into the counselling relationship as it does in every other aspect of life. The premise of my study is that women counsellors must understand their own position and relationships within those discourses if they are to re-negotiate and question discourses of gender which constrict the relationship between men and women.

My findings show that the participants' beliefs about gender influence the work that they do with their male clients. Although the awareness and understanding of its importance in the counselling relationship varied among the participants, the responses of all the women clearly indicate that work with men results in certain

tensions and 'problems'. The gender difference between the counsellor and client does comes into play in the therapeutic work, and attitudes about gender influence the way in which women work with men.

What I propose from my findings is that women counsellors bring to their work with male clients the cultural narratives of gender relations and that these become part of the discourse of counselling. Secondly, there is a hierarchy in the gender and counselling ideologies, with gender ideology most often dominant. However, at times the female counsellor experiences conflicts and struggles as these ideologies converge. Thirdly, the discourse of gender results in women counsellors' failure to recognize their own strengths and skills within the counselling relationship. And fourthly, feminism offers women counsellors a way of understanding themselves in relation to the powerful discourses of gender socialization and the contradictions within those discourses.

This chapter examines these findings and their implications for women counsellors in their work with men. I conclude the chapter by looking at the implications of this research for social work education and practice.

Cultural narratives of gender relations

The findings suggest that the participants had complex feelings about their

ability to understand and to connect with men. They had difficulty finding their way into the story which their male clients had to tell. On the one hand, they attribute this to men's difficulty in expressing themselves, but, on the other hand, they believe that they and their male clients have different ways of seeing the world which limit their ability to connect.

These cultural narratives about gender are part of what women counsellors bring to their work and cannot be 'left at the door of the counselling room'. Avis (1996), in her article on gender in family therapy contends that "[f]eminist writers argue for the importance of understanding the whole of human experience as being gendered, including society, the family, and individual identity (...) patriarchy is embedded in language, culture and experience, and is thus subtly communicated and internalized from the moment of birth (Goldner, 1985; James, 1984; Taggert, 1985)" (p. 226). She ties this understanding of the gendered world to the clinical setting by noting that both women and men bring their internalized beliefs and the oppression that those beliefs may carry into the therapeutic relationship. Even the most conscious person 'cannot step outside' of the dominant discourses which define how men and women are 'expected' to behave, and what expectations they have of each other.

The findings suggest that there are a number of "internalized beliefs" and

cultural narratives which counsellors bring to the therapy room and which influence their work with male clients. The participants in this study expressed ideas about male clients which indicate that they saw them as different, i.e. having contrasting experiences and ways of living in the world which limited trust in the relationship. There was, on the other hand, an assumed identification with female clients. The participants' acknowledged a deeper and more 'natural' understanding of women's stories and had to work less hard at connecting to their experience.

The counsellors often worked with male clients in ways that supported traditional patterns of gender relations, e.g. they referred clients to male therapists because they believed there would be a better connection, they believed that to be "a strong female role model" would not help male clients, and they were cautious about revealing feminist ideas in the belief that this might offend clients. Secondly, the women often explained men's behaviour and gender relations based on "common sense" assumptions, e.g. a client is more likely to be sexually attracted to a physically beautiful counsellor, men in offices will have fewer problems treating women as equals compared to men in factories and a man who is 'wimpy' needs to see a male counsellor to learn how to conform to masculine expectations. Such assumptions suggest that there are "natural" and "normal" behaviours that describe men, and these assumptions are deeply embedded in the culture. Weedon (1994)

contends that the power of "[c]ommon-sense knowledge (...) comes from its claim to be natural, obvious and therefore true. It looks to 'human nature' to guarantee its version of reality. It is the medium through which already fixed 'truths' about the world, society and individuals are expressed" (Weedon, p. 77).

These 'truths' about gender relations are part of the cultural history which has supported a duality in the relationship between men and women. The cultural stories about men and women have focused on the "chasm and not on the bridge" (Bograd, 1991, p. 133) in male/female relationships. Holloway (1984) states that "heterosexual relations are the primary site where gender difference is re-produced" (p.228). The understanding of masculinity is seen in relation to the understanding of femininity. The formation of gender identity for both men and women is seen in relation to each other - one is what the other is not. Men are most often seen as "the subject" and women as "the object" in heterosexual relationships, and women have traditionally been expected to support and nurture men in order to preserve their dominant position in society. Although this is an over-simplification of the dynamics in female/male relationships, the cultural messages about heterosexual relationships continue to promote much of the ideology of gender "difference".

Stuart Hall (1997) raises an important issue about the meaning of "difference' and its significance as a way of understanding ourselves. He has

pointed out that "'difference' and 'otherness' are both necessary for the production of meaning, the formation of language and culture, for social identities and a subjective sense of the self as a sexed subject - and at the same time, it is threatening, a site of danger, of negative feelings, of splitting, hostility and aggression towards the 'Other' " (p. 238). He therefore describes 'difference' as ambivalent. The risk for the female counsellor is that 'difference', when unquestioned or unchallenged remains embedded in the therapeutic relationship, and constricts both counsellor and client. It must be questioned in order to 'problematize' the fixed idea of difference, and to explore where there are common understandings and sources of connection between men and women. Of course, the attention paid to gender differences may also lead to the neglect of other dimensions of difference, such as class and race, which cannot be ignored in the therapeutic dynamic.

How gender and counselling ideologies converge

The analysis of how women work with male clients suggests a number of conflicts and dilemmas for the participants in their role as counsellors. There were certain patterns in their responses to clients which reflect the power of gender ideology. Somewhat surprisingly these gender patterns were not neutralized by

'professionalization' or the counsellors' efforts to 'balance' their views of men in their professional role. They often struggled to maintain that balance because they recognized, and sometimes felt guilty about, their difficulty in empathizing with men.

The participants were frequently aware of the assumptions that they made about men and sought to suspend those stereotypes in order to develop a therapeutic relationship, e.g. they struggled to maintain a professional stance in situations where men acted in ways which were threatening either to them or to their female partner, they sought to be fair in marital counselling where they recognized a stronger alliance with the female spouse, and they sought to develop rapport with men whose values they could not respect. At certain times the counsellors struggled against their 'gut reaction' as women in order to maintain their professional position. At other times they were hesitant to question or explore more deeply why their clients' behaved in certain ways, and thus maintained a complementary position as a woman who did not threaten her male clients.

The work with men who were angry and abusive created the greatest challenge in this area. Despite the designated power of the counsellor within the context of the counselling relationship, men's anger often shaped the relationship between the female counsellor and her client. Even in situations where women

recognized the problems behind men's anger, they felt its impact and power within the counselling context.

The counsellors did not often talk about the anger and abuse cases in terms of power, however, the challenges in dealing with men's anger and abuse is part of 'the problem' of men's power in the larger social context. Kaufman (1993) has pointed out that violence is not just a psychological problem, but "is institutionalized at all levels of social, political, cultural and economic life"(p.161). The power of the dominant discourse concerning the perpetrator/victim "story" in which men are predominantly the perpetrators of violence and women the victims may make it difficult for women counsellors to separate these concerns from the issues they face in counselling with an abusive or angry client. Their concerns about their own safety and those of the abused spouse may create a tension that interferes with their confidence about searching for the underlying causes of their client's anger or challenging the effect of anger on others.

How do women counsellors work out these conflicting positions within the counselling relationship? Perhaps by recognizing these conflicts, there is the possibility of questioning and contesting those aspects of the gender ideology which restrict and undermine the female counsellor's strengths. Michael White (1992) argues that "identity is constituted through a myriad of contexts" that are "multi-

sited: work, recreation, marriage, family and so on" and which bring "forth specific experiences of self-specific "subjectivities" ". He proposes that these competing subjectivities allow for an understanding of "identity that is ever available to contestation, renegotiation, and to change" (p.9). The participants in the study demonstrated those conflicting subjectivies, but found it difficult to contest those aspects of their identity which were guided by traditional patterns of behaviour in male/female relationships. Based on White's concept of identity I believe that there is the potential for women counsellors to "unpack" gender ideology which cuts them off from their own knowledge. If this occurs they can begin to contest those discourses which limit their relationship with male clients, and thus gain "a sense of agency" in their work.

Understanding the discourse and recognizing strengths

The discourses brought to the counselling room by both men and women are part of the social/political messages about heterosexual relationships within the culture. These messages often prevent women from recognizing their strengths and skills and result in their giving away power - power which has the potential for the creation of new conversations in the therapeutic relationship between the female counsellor and male client. It is not the power of a "professional", isolated behind

methods and techniques of counselling, which will lead women counsellors to recognize their own strengths, but a questioning of how gender ideology limits their power in their individual practices with male clients. No female therapist is free of certain attitudes, stereotypes and assumptions about men. Within each of us there are conflicting expectations and views of men that are part of our own socialization and personal experiences. It is not that we will ever be able to 'wash those views right out of our hair'. What we can do is question our own assumptions about gender relations because, ultimately, women's beliefs about men reflect their beliefs about themselves. If men are seen as uni-dimensional or unable to develop depth, the female counsellor is less likely to explore the problems that men face. It leaves them at risk of failing to examine what lies behind men's initial reluctance to participate in counselling and what is meant by men's 'resistance' to explore deeper issues in their lives. This may lead to a minimizing or truncating of their own strengths and abilities as counsellors, resulting in a re-enactment of conventional patterns in male/female relationships.

In respect to my earlier literature review, and the ideas of Hare-Mustin which helped form my thinking in this area, I have considered again her major ideas concerning power. She discusses power as something that can be in the hands of either women or men depending on their relationship. However, I have concluded

that the social construction of men and women within our society does result in conflicting power relations even when the woman is "designated" as the expert whose power is sanctioned by her professional role. It is my conclusion from this study that it is extremely difficult for women to move away from the gender construction which places them in a 'supportive' role in relation to men. The participants' attention to "Other" (their beliefs about what their male clients could tolerate and how they would react) sometimes prevented them from recognizing what they had to offer men in the therapeutic relationship and resulted in a loss of 'agency' in their work. However, support for the "externalizing" of the "alternative story" that women can tell about themselves within the counselling relationship with male counsellors cannot occur in isolation. It must be part of a discussion that occurs in the context of education, and professional organizations, which can give women a voice to explore this area.

Feminism and its value for women counsellors

Feminism is a way of understanding gender relations and the power dynamics that have shaped those relations. Cavanagh and Cree (1996) write that "one of the fundamental principles underlying the women's movement is a commitment to change: feminism has undoubtedly been influential in changing the lives of women.

As women's lives have changed, so have the lives of men" (p. 182). Women counsellors' failure to recognize the power dynamics within the male/female relationship is a failure to recognize their conflicting positions within this dynamic. They are consequently at risk of "perpetuating traditional role constraints" and failing to recognize the potential for women counsellors to "protest" against these traditional role constraints. An examination of our conflicting positions is essential if we are to challenge the status quo, and to question how we work and what knowledge we have to share with others. I do not believe that the work of feminism is over or passe: the study of feminist ideas in the context of the female counsellor and male client allows for the broadening of scope within clinical practice. The exploration of feminist ideas opens up more questions about how men and women relate to each other, and also encourages us to keep questioning both how we know ourselves and our male clients.

The participants in this study hesitated to embrace feminist ideas. They seemed to equate feminism with an idea that it placed blame on individual men for gender inequality. This may again reflect the strong messages of the dominant discourse in which feminists are seen as "strident" and man-hating. It may also reflect women's reluctance to challenge the status quo in male/female relationships, fearing a negative response from their male clients.

Feminism has challenged and critiqued the larger structural power relationships that have diminished and silenced women. They have also challenged the concept of "difference" as "equal". This challenge is supported by Hall (1997) who refers to binary opposites as "open to the charge of being reductionist and oversimplified". He refers to the philosopher, Jacques Derrida, who has argued that "there are very few neutral binary opposites. One pole of the binary, he argues, is usually the dominant one, the one which includes the other within its field of operations. There is always a relation of power between the poles of a binary opposition (Derrida, 1974)" (p. 235). Feminism calls for the awareness of this relation of power in male/female relations. It also allows for a 'higher order' of analysis that expands the debate about gender relations beyond the individual work with men who enter into the counselling relationship.

Cavanagh and Cree (1996) propose that "feminist social work practice must include direct work with men as part of a broader strategy whose ultimate goal is the empowerment of women" (intro). Perhaps the revelation in this research project has been the recognition that women counsellors must begin to search for their own empowerment within the counselling relationship with men.

Conclusion and implications for social work education and practice:

There are four important reasons why the understanding of gender relations between women counsellors and their male clients is a significant area for study. The first has to do with the increasing number of men who are entering into counselling. Women counsellors are consequently faced with the problems that men identify and struggle with in their lives. Secondly, without this exploration "men's attitudes and behaviour towards women are left unchallenged" (Cavanagh and Cree, 1996, p. 6). Thirdly, unless this subject is opened up for discussion women risk isolation, and the absence of a voice to explore the dilemmas and challenges that they face in their work with male clients. And finally, although my research was not dedicated to looking at the counsellor in relation to the larger organization, one can assume that she has two major relationships - the one with her clients and the other with the larger organization. Counselling is itself a 'gendered' profession characterized as "feminine" because of its focus on the emotional, psychological aspect of life. So that within an organizational structure that is patriarchal in nature women counsellors are in a 'feminine' profession - with different values and discourses. No doubt such 'structural gendering' will influence the structure of the counselling relationship between female counsellor and male client. Therefore, it is not enough to examine the individual work that female counsellors do with their

male clients, but it is incumbent that we understand the larger patriarchal systems that influence both the counselor and her client.

The findings in my research, and the literature review that has served as a backdrop to my study, have led me to conclude that any notion of women and men as having distinct, opposite characteristics that fit them into a neat, unified picture is inadequate to explain male/female relationships. Flax argues "for a recognition of gender as a social relation and for an understanding of masculinity and femininity as constituting each other rather than occupying distinct oppositional locations" (cited in Featherstone, 1995, p.4). Therefore, social workers as professionals and educators need to begin to think about gender as an integral part of the therapy relationship. To think of it as something which is "outside" and only in need of being addressed if it is a "problem" leaves the counsellor at risk of becoming polarized with her male client based on assumptions of "fixed or inevitable" male and female positions.

If we accept that men and women understand themselves differently in certain aspects of their lives, how do they find a common language and understanding in counselling? Perhaps the starting point is an acceptance that concepts of gender relations are contentious, and that dualism continues to be part of the discourse in male/female relationships. We must challenge those beliefs

where male and female relations are seen as static and inflexible. Once we begin to articulate our assumptions we can begin to take the risk of questioning both our own and our clients' beliefs and attitudes (Bograd, 1992). Leonard (1995) suggests that "critical practice" should be founded on the notion of "active self-criticism of the discourses of (...) social work within which we are located when we undertake intervention, education or research" (Leonard, p. 10).

Harlene Anderson and Harold Goolishian describe the therapeutic conversation as "no more than a slowly evolving and detailed, concrete, individual life story stimulated by the therapist's position of not-knowing and the therapist's curiosity to learn" (cited in McNamee and Gergen, p. 19). However, I believe that the therapeutic relationship is more complex than this, particularly for the female counsellor who is working with male clients. She must find a way to be open to hearing the story of her clients while recognizing that the relationship may have moments of mis-communication and misunderstandings. She must search to maintain her sense of power so that she is able to collaborate with her client: to take a "not knowing" position, but avoid a "one down" position where she risks being unable to recognize her own competence.

The task I have laid out for the female counsellor is not a simple one and is difficult to achieve in the isolation of the therapy room. I believe that support for this struggle must come from the social work educational system and profession where discussion about gender relations needs to be integrated into training. Course work and training in the area of feminism and gender relations is essential if social workers are to understand both their own, and their clients', conflicting positions in relation to the discourses of male/female socialization. Such understanding must go beyond the individual, psychological explanation of problems and there must be a recognition that men and women are part of the same system of cultural narrative.

Female counsellors need support in recognizing gender as an integral part of social relations, and for handling the tensions which may arise in their work with male clients. It is difficult for social workers to recognize the discourses of which they are apart without the conceptualization of the subject in the context of both practice and theory. It is important that there be a forum to debate and explore gender socialization and its influence on the counselling dynamic. The experiences of counsellors/social workers need to be integrated into training programs irrespective of which "model" of social work is being taught and used. Marianne Walters et al. (1988) have written "thinking gender" (...) is the edge that cuts across all methodology and schools and is adaptable within a broad range of clinical and theoretical frameworks. (p.30).

Social work training should allow for students' reflection on their own

attitudes about gender and their own gender socialization within their families and the community. The values that female counsellors/social workers hold about gender relations reflect how they work with men in their practice and the way in which they deal with the dilemmas that they face. It is the discussion about how to find ways through the problems that women face in their work with men which can help us to understand the common struggles that need to be discussed and shared. Female counsellors need to acknowledge their beliefs and recognize their struggles, not divert or bury them. The female counsellor must understand what forces influence her work, but also recognize what strengths and abilities she has which she can then allow to enter the therapeutic relationship. As a profession, social work must find ways to explore those questions which challenge our assumptions about "natural" ways of thinking about gender relations.

A significant finding of this research is that women sometimes turn to their "professional position" in order to deal with the uncertainty and tensions in their work with men. There appeared to be a notion of professionalism as neutrality and authorativeness; this notion could on occasion result in aloofness toward male clients. If professionalism is the guise under which women achieve power, it may shelter female counsellors from examining their strengths and competence as women who can engage male clients. Unless they embrace their own power and strengths,

they risk falling into traditional supportive roles with male clients or coming to believe that women counsellors simply cannot deal with certain male clients.

I hope that this research has introduced new questions about the counselling relationship, questions that challenge our assumptions about gender relations. In exploring the 'problems' in gender relations we cannot stand outside of our subjectivity within historical and structural contexts; however, I believe, that with an understanding of the larger social and political forces which contribute to our way of knowing we have the potential for more creative ways of working in counselling. We can begin to question the paradoxes of these forces and the way in which they oppress and limit our understanding of ourselves.

APPENDIX A

Interview Guide

Introduction

- Introduce myself and explain my affiliation
- Explain the study and its purpose
- Review confidentiality, audio taping, consent form
- Acknowledge appreciation of their participation.
 - Note: interested in their experience appreciate the help they are giving me in my research, no judgement about how they work, only interested in their ideas about the topic
- Review the process of the interview I will ask for case examples and would like them to feel free to take their time to think about the questions, a discussion rather than a long list of questions
- Consent form to read and sign
- Request brief description of the range of services provided and how people come to the service.

Guide

The following questions served as a guide in the interviews:

- 1. Can you describe a case in which you were working with a man where gender mattered?
- 2. Have there been situations in which gender mattered and it's been uncomfortable for you?
- 3. How do you experience gender issues in your work with couples?
- 4. Case example: Imagine you had a case in which a man comes to you following a marriage separation and he has had a domestic assault charge. He has limited access to his children, and he feels hopeless about how he will make a new life for himself. What issues might arise in your work with this type of case?
- 5. Earlier we talked about a case where gender mattered. Is there a case where gender didn't seem to matter?

APPENDIX B

INFORMED CONSENT FORM

I agree to participate in this study which is a research project being conducted by Margaret Robbins for the purpose of her Master of Social Work degree from York University. She has informed me that the findings of her research will only be used for the purpose of her thesis or for an academic publication.

I understand that there will be one or two interviews conducted at our mutual convenience.

I understand that I was chosen for this project because I am an Employee Assistance Counsellor and Margaret was aware that I work in this capacity.

I have been informed by Margaret that our sessions will be audiotaped and that she may also take notes, but neither my name nor place of work will be mentioned in the research study. I understand that the audiotape will be used only for this study and destroyed once the research is complete.

I understand that my participation in this study is strictly voluntary and that I may withdraw from the study at anytime and material already gathered will not be included in the study.

I am fully aware of the nature and extent of my participation in this research project as stated above and the possible risks from it. I hereby agree to participate in this project. I acknowledge that I have received a copy of this consent statement.

Name of participant	Date

If you have any questions or concerns about any aspect of the research please feel free to call Grant McDonald, the Graduate Programme Director in Social Work at 416-736-5226 or my thesis advisor, Dr. Pat Evans at 416-736-5329.

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