

Psychology's Feminist Voices Oral History Project

Interview with Melanie Katzman

*Interviewed by Leeat Granek
New York, NY
September 5, 2006*

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MK – Melanie Katzman, interview participant

LG – Leeat Granek, interviewer

LG - So basically what I'll do is I'll start asking you some general questions about feminist identity and then I'll ask you a little bit about your career and then the last part will be a combination of both. So the first is a very general question, how and when did you first develop a feminist identity?

MK - I think few things have a moment in time, but I can actually trace the moment-- two moments really. One, I had been working with eating disorders at a time when people weren't really sure that there was a diagnosis - and even if there was a problem, how would one solve it? It was a very exciting time because the field was wide open and the questions were both very basic and very important. And I had convinced one of my supervisors that this was an interesting thing to consider. And we talked about ways to help women achieve a sense of power other than food. But we weren't thinking of it in terms of women and power and feminism. We basically looked and said, "What's going on here?" I had completed some basic research looking at the strange phenomenon that people were eating and wanted to throw up afterwards. Did this exist as a true phenomenon? And if it did, what were some of the behavioral/ psychological correlates?

As we analyzed the research we saw that there were lots of issues around assertiveness, around anger, around sense of meaning, around sense of control and so we formulated an intervention because we got drafted into having to supply some sort of advice to the people who served as subjects in the initial studies but we had no treatment available to them. We thought, you know, this is really an issue of competency. The women don't feel competent, they don't know how to impact the world, and they seem to be lacking problem-solving techniques. And we created what became 'You Can't Have Your Cake and Eat it Too.' It was a series of best guesses that we ultimately validated, but we were literally creating a therapy (one that in fact has stood the test of time, but that is another story). At the time, there were very few therapeutic options available. I started talking about our findings at conferences and people started requesting information about it. Here I was talking about developing groups where women could learn competency, learn voice, learn how to impact their world. So that's a little background.

I didn't think of myself as a feminist. I just thought of myself as answering the needs of people who were struggling. The next moment happened when I went to an American Psychological Association meeting and they had different workshops and one was on female groups. And I thought 'well, I would love to learn about that.' I got to that session and everyone goes around and talks about what they are doing and at the time it was

people who were dealing with sexual abuse and they were talking about their groups. I described my eating disorders groups and they said ‘So how long have you been a feminist?’ And I said, ‘I really hadn’t thought about it.’ It was one of those, the whole room started to laugh and I realized the joke was on me. I thought, I just did what I thought was the right thing to do for the patients. I hadn’t conceptualized it as a feminist treatment. I had conceptualized it as good care. Then it got me much more excited at the idea of, well, what are the pros and cons of thinking about this as a feminist notion? I started to explore more feminist theory. As I began to explore feminist theory, I started to find resonance with the ideas that I had been putting together. I came into it backwards. But I truly remember those moments where I just went (has an ‘ah-hah’ look on her face) ‘oh’. That was the start.

LG - Ok - so you didn’t have any involvement with the feminist movement?

MK – Yes, yes, but in my mind I had actually compartmentalized it. I grew up in the ‘70s so I was a little bit young for being involved in the feminist movement, but I grew up in a home where my mother was very strong and wanted her daughters - I have a sister - to be able to do what they wanted to do, to support themselves. My sister was a lawyer. I have a doctorate... so my mom used to say she was going to wear a placard declaring that she had a doctor and a lawyer and they were both girls!! (She never really got the sign but my sister did buy her a book on mothers of famous daughters and drew a cartoon in the back that said ‘stop getting diplomas and get a man.’) So I was raised with that kind of attitude. There was very clear feminist messaging going on between my mom and my sister and I was certainly very respectful of accomplished women and I had set my role models accordingly. I wasn’t thinking about feminist psychology as an orientation or as a pursuit. I thought about my politics and I thought about my beliefs in independence for women - that was something that existed separate from what was happening in the therapeutic environment. At the time I was at the conference I was describing to you, I was just finishing my internship, so I had just gotten my doctorate. In retrospect, relatively early on in my career....but certainly, no one in my graduate program ever used the F word.

LG - Wow.

MK - This was the early ‘80s. And we thought we were ‘modern.’

LG - What was it that drew you to psychology in the first place?

MK - The love of people. It was something I just did naturally. I enjoyed it. I had a requirement when I was in seventh grade that one had to belong to a peer support group for the first six months of going to middle school which was when we switched to a larger school. The whole process of being in a group and using a group as a way of getting comfortable with yourself and getting comfortable with an environment really fascinated me, worked for me. The very progressive guidance counselor at the time was really pushing peer counseling as something that could make a difference for kids. This was in the ‘70s so it was a new idea. My guidance counselor nominated a few people to

partake in advance peer therapy training. So I was really excited to be a part of that! I was always very interested in journalism, I always liked writing, doing/observing and documenting, and there was a bit of the actress in middle school as well. So when I got to high school, at that point, I worked with the same guidance counselor to deepen/develop a peer counseling program. We made videotapes of our work and I helped her when she went around to different schools presenting on what we were doing/creating. So I got introduced to the world of academics and presenting and training at a fairly young age. I was enamored by what, Dr Hamburg was her name, by how she was doing it, and the fact that people were really responding to it. I went into college saying I wanted to be a psych major and I never looked back. I always combined the writing and the presenting and the doing and I still do. So from the time I was 13 years old, it just all seemed to come together. There was a brief period where I thought, maybe I'll be a journalist, but I actually look now and think that a lot of the writing I do and more so even now is aimed at trying to impact on a more populous level. I enjoy helping individuals locate themselves in history and understand how the shifting forces around them are impacting them as people maybe that journalistic piece is still in there.

LG - Today how do you combine your feminism with your work in psychology, as both a clinician and as a researcher? Is there something about therapy that is explicitly feminist?

MK - In terms of the therapy, yes, I think there is a lot that is explicitly feminist. The way that the patient/professional hierarchy is dealt with, I think it very much speaks to an awareness of social roles. I am very explicit with my patients that I am not necessarily the expert - that together we are exploring alternative questions so that they can come up with a new solution. They are the ones that are doing the hard work during the week, they are correcting me. I do whatever I can in terms of our interactions on the one hand to be supportive and engaging, but on the other hand, extremely respectful of the fact that they are going to be the agents in their life. So there is the explicit discussion of roles (and why I still use the word patient-but that's another interview in itself). Then there's also the way in which we look at what they can and can't do and the limitations they put on themselves. My patients will often step back and look at the societal pressures on them, not necessarily only as women, but as individuals and how do they critique what is going on. I think in terms of the eating disorder patients that I treat, (not all of the women I treat have eating disorders), but certainly in terms of those patients, how we look at why they choose to use their body in the way they do goes beyond what I think would be the cosmetic bias of the thin ideal. Actually, for all my patients we consider how they engage with their body as they operate in operate in the world.

Just looking at the power of connection for women and the cultivation of little mini-societies for them in which they can feel impactful and also knowing when it's time to toss the women's part out the window and say, 'Ok really, how are you going to be bigger, bolder better?' and we don't necessarily need to have lots of adjectives. For example, a woman I saw this morning is an Hispanic lawyer in a big multinational where there are changes going on in their administration-- they are really looking to showcase women at senior levels. We talked about how do we use that interest, but also not get

swept away by being defined purely by diversity? So we play with the concepts, we look at where there is an avenue to better yourself and to better others. Clinically I can say that's the feminist application/interaction of theory and action.

In terms of the research that I do, the research questions that I ask are very much oriented towards tracking the ways in which women's mental health is impacted by changing societies, changing economic pressures, changing political systems. The questions I ask and the ways in which I ask them are inspired by feminist thought. Feminism powers how people are brought into the process, respecting the experience of the local informant but also feminism inspires the use of qualitative processes, which seem to be more firmly rooted in feminist camps than others. The way in which there is an eye towards what we are learning from the local environment and giving back, while again, this should not really fall under the feminist umbrella, continues to fall there more often than not. I find myself in a lot of battles saying 'this is not Melanie the feminist who is saying this; this is Melanie the good scientist who is saying it'. Nonetheless, I would say that my confidence in pushing an agenda that names the need to be conscious of the culture we create in our research teams is driven from a feminist place, even though my belief is that it is more of a humanist place.

Then in the other work that I do - I am a partner in a non-profit which develops leaders internationally, and that is absolutely not defined in any way as a feminist organization. It is much more about looking for leadership and inspiration in developing countries and bringing people from very senior levels of leadership to interact with those leaders. Nothing about it is overtly feminist. What's interesting is that as the organization has grown, the four partners are all women. It was never intended to be that way, but there is a lot to be said about how we are going about doing what we do and why it appeals to people. Our clientele are very senior level people, and to date, most of them are men! We are a value-driven organization, we have grown based on our relationships and the trust we develop with the people we call our hosts who open their organizations, their lives, minds and hearts to us, and the people who we bring who share their experience with them. There's a whole way in which we approach the egalitarian nature of this all. If we are in South Africa and we're bringing people to go see prisoners and we have a bus driver, well the bus driver is invited to come in. Why should they only be transporting us? We are looking at all different ways in which we're honoring the voices of everyone in the room. Never defined in our organization is a feminist perspective, but again if I go back to what I was saying in terms of research models, I look and I go, 'yes, that's where it came from for me.' Interestingly, I don't think in that setting, in leadership development, it is even labeled or seen as feminist. It's seen as being able to pull out all of one's attributes and the cultivation of a sense of passion and a re-engaging with a sense of purpose. People are very hungry for that. I have a secret smile about it and think that's fine. There is a whole host of different ways in which the feminist approach is expressed.

LG - It sounds like it's almost in the air for you!

MK - Yah, I think now it's something that just is, it's become the way that I think, so I no longer label it that way. If I roll back the videotape conceptually for a minute though, when I started to recognize that there is a power in the use of the word feminist, in particular to draw people's attention to issues that would otherwise not get expressed, it was somewhat intoxicating! I guess it was the late '80s, there were very purposeful decisions that several of my female colleagues and I made around promoting women in the field of eating disorders. In the beginning, this was a field that had very little infrastructure. The conferences used to be 30 people and we all knew each other. Now it's quite a massive enterprise. But when we started out, very few people were doing research or treatment in the area and the first few conferences you had the people in the audience who were mostly female therapists and the people you were treating were women and the people who were giving the conference talks were men. It didn't take a radical political mind to say there is something horribly wrong here! And because no one was really sure that eating and vomiting was a *real problem*, many very established professionals were kind of dipping a toe in the eating disorder waters, but they weren't fully in it. This left a lot of space for younger professionals and so you had younger women coming up in their career, looking around, questioning what was the emerging regime and getting together and saying, 'we need to do something to change this.' So we did! We really had meetings where we would say, 'ok, now, we are going to start the all girls network and this is what we are going to do and this is how we are going to help each other.' We are going to work for a position but we are going to do this by sharing. More for everyone is more for everybody - which was counter cultural. We actually gave each other speaker's notes after we got to have some of the podium time.

So developing a peer support, going back to my seventh grade days, but not even in a highly calculated way, we were simply going to get good at what we do. We were going to help each other get better. By the time I edited "Feminist Perspectives on Eating Disorders" (along with Pat Fallon and Susan Wooley) - which we started to write in the early '90s and which came out I guess in '94, we were getting really excited about having a feminist voice and people felt that that was an important thing to feature, so they would ask myself and some of my colleagues to come to conferences because they needed to have 'the feminist block.' Suddenly my membership in the F club was a career advantage. I am a pragmatist. I said, OK and I went on to do a lot of feminist speaking. One of my colleagues said, 'I'd just like to talk about research, I don't really need to talk about feminist paradigms for research, I just want to talk about research.' But they wanted to fill the feminist quota--- much like the woman who I told you about who I was coaching this morning. We used the diversity card, if you will, to both help ourselves and others and then drop it when necessary. It's almost like the rocket launch that gets you into space and then it's jettisoned. The feminist orientation was a differentiator for many women at the time, a platform to air their ideas, then the question became, how do we get into mainstream press and out of the specialized journals and time slots?

LG - Do you feel like that's common in the field?

MK - It's very rare now that it's called out as feminist in quite the same way. I think the field now considers care[fully] and how you care for careers, we deal with the body

image of the therapist. The body image of the therapist! It is so important and yet in the early years it was outrageous to consider (during a conference workshop) “Hey we have bodies too!!!” I can’t say that the field is perfect, we’ve had a lot of issues, but I think it’s really transformed.

LG - What would you like to see happening in psychology in terms of the research that you do?

MK - I think there’s something very stale about where the research has settled recently. It gets overly caught up in individual pathology and sometimes microscopic introspection, literally in terms of genetics and biology. Although I am a huge believer that the physical is critically important, theories get too polarized. You don’t have enough integration and while I know it’s very popular for people to say we need to have cross-disciplinary integration, I really don’t think we’re getting it right. To take the feminist perspective to its next level is to understand why women’s roles, geography, opportunities, etc, all help contribute to an environment that then produces certain kinds of psychological reactions that are adaptations. So to my mind it’s just too segregated, too specialized, so it gets dull. And I think like any inbreeding, you stop moving to the highest level. I am speaking in grand generalizations right now, but a lot of my attention has really shifted to working much more in terms of leadership development and trying to identify people at points of influence who can then really work with others who have terrific ideas and passion and focus across the board of disciplines. To me personally, that’s a more exciting space right now.

LG - Sorry, what do you mean leadership development? With women with eating disorders? Or psychology in general?

MK - Well, yes, I’m actually talking about people in general. I started my career looking at issues of power and control for the individual and then issues of power and control as they pertain to one’s body and then eating disorders, and then that led me to issues of power and control for women more generally, which got me involved in diversity and leadership. In my professional life I’ve always had two worlds. About three years after I got my degree (after we had created *You Can’t Have Your Cake*, recovery based on competency development), I was thinking if you can understand the competencies that can help people who had developed quote, unquote ‘a diagnosis,’ and assist people in building on these abilities to overcome the diagnosis, how can you help people develop their abilities so they can improve their current positions? I’ve always looked at both ends of the spectrum. How you can develop women who are in positions of leadership who are not in any way seeking help for pathology, and help them ascend, and at the same time I was dealing with very ill women. So I’ve always been on both sides of the power/control spectrum. Over time, my interest in leadership development expanded beyond just women’s development, to looking at development in general. And in eating disorders I try to go beyond undersigning the pressures on women in America, to look at pressures on women outside of America as a way of breaking apart the idea that eating disorders in particular were about some sort of Western image of women and it had much more to do with personal agency and fulfillment of personal possibility.

Once I dared to leave the US, I became interested in not only cross-cultural models of understanding, but cross-disciplinary ones as well. Leaders Quest, in particular, has woven these two parts of my life. Part one, the academic. I go to developing countries - because that's where a lot of the change happens for women - and through my research activities I have tried to get funding to answer these questions. I meet people with great ideas and missions, but very little money. Part two is my work in leadership development. Over the years I have been watching people evolve to a point where they had lots of influence, but they were starting to feel quite dead in terms of their sense of mission and purpose. I was trying to figure out how to bring the two together, so that you have a synergy where those who have money and influence can assist those who have mission and purpose but less resources.

The work that I'm doing now is really about trying to bring people of intellectual curiosity and deep concern about general issues together so that they can connect first on their level of humanness and then they connect in terms of their questions on leadership. They then see how they can make a positive impact on the world. My career has really evolved to a place where I've moved farther and farther away from individual assessment. But always still, if you don't change individual minds, you don't change anything.

LG - Yes, it sounds to me that everything is so integrated in what you were talking about, they seem connected; everything you are doing is so connected.

MK - I am delighted to hear you say that. I can see the connections but that is not always apparent to others, or I am getting better at relating a cogent narrative. In truth, my activities come from a place where, to understand an individual and what they do and how they act, you have to understand how the world acts upon them. To me, that gets back to that feminist analysis that once my eyeballs were opened, I couldn't close them again.

LG - What publication are you most proud of and why?

MK - I have two, do I get to say two?

LG - Yes! Please!

MK - The first one is "Feminist Perspectives on Eating Disorders." I am proud because we did it! We said there should be a compilation of feminist thinking at a time when it was just bubbling up. We got people together to speak in a very authoritarian manner about things that people knew but didn't always say. Then we were highly critical about the way in which it was presented to the point that we were sure that there was a dartboard out there with our pictures on it, because we kept going back to people. It was really a true act of love, that each of us, we were three editors, we divided it up so that there were primary editors for each piece, but everyone read everything. We wanted to understand what people were saying, we wanted to get under the skin, into the minds of

the authors, and we wanted to help bring out the highest quality product possible to the best of our ability. What happened was that we dealt with lots of struggle and conflict and got to the other place where people were, I think, uniformly quite proud.

I learned a tremendous amount; every single person thought in terms of content and the editing. Everyone raised their standards, which was so exciting. So it wasn't just about a big love fest, about 'ok, we got some great revolutionary ideas, won't everyone be happy to see this!' No, this was going to be a scholarly piece of work that every single person would be absolutely proud of and anyone who turned us down is going to feel horrible that they didn't join in! (laughs). So I really was quite excited about that and I love hearing... I mean that book has now been out for ten years and people still reference it. We helped build a landmark and that was really thrilling. It was a great experience; it came at the right time in my professional life. 'Feminist Perspectives' released energy and excitement. That's the first publication that makes me truly proud.

The other is a piece of work that has several different publications attached to it, which is the work in Curacao. Some scene setting is necessary. I read an article that was written by a group of very well respected epidemiologists and psychiatrists - it got a tremendous amount of attention - they basically concluded that if you have anorexia on the island of Curacao (Curacao is predominantly black), then anorexia must not be culturally determined. If it was, *then on an island that was isolated...* so I read this and I thought this just doesn't make sense for a whole host of reasons, not the least of which I don't think you can draw that conclusion based on the way the study was conducted or where Curacao sits on the map-in the western hemisphere frequented by tourists! It's not that I'm not open to the conclusion that anorexia is biologically determined, it's just that when I looked at the way that the study was done, none of the women had been interviewed. It was unclear how, in fact, some of the attributions of anorexia were established and what were the stories that these women had to tell. So I wrote a letter to the authors questioning their results. To their credit, they (essentially) said, 'ok big mouth, why don't you come to Curacao on our next visit and you can do the interviews and you can poke around and we will open it all up to you and you can see what you find.'

Lo and behold, what did I find? Well actually, as soon as the women came through the door, they literally all came in - if a picture speaks a thousand words, this was it - none of the women that walked in through that door looked like a typical woman on Curacao. I mean these women were a) for the most part, not black, even though blacks were the dominant race. They had mostly left the island, had been exposed to alternative possibilities and came back and then had to reacclimatize to a very different set of cultural expectations. They were better educated. They had very different views about themselves for the future. Each one of them had a story about how they used their foods as a way of coping or in an effort to escape. There was nothing typical about them and everything cultural about them!! So it was exciting for a host of reasons.

LG - Were the authors able to see that?

MK - They were! They were able to see that, though I would have to say that the way we wrote it up and how we presented it was a series of interesting negotiations and sensitivities, but I think everyone was respectful of one another in terms of contributions that we brought. But the person who came on to that team to turn things around was me, I was the only woman, and when the going got tough during our negotiations about how we were writing it up, I was told (I kid you not) that I was feminist and that I wasn't good with some of the numbers, but I was pretty steadfast. We saw what we needed to see, we all saw it and how we were going to go about understanding this in the most scientifically accurate way. It was a very exciting project because I was listened to, I took the risk of the challenge, I got invited in. It was gratifying because the results were so interesting and well received within the scientific community. It was the outcome of a tremendous amount of hard labor, intellectually and a little bit politically. For all these reasons, this body of work makes me proud.

LG - Two questions, I know we are running out of time, so I'll ask two more. How do you balance the demands of your personal life with your professional life? And the second one, what advice would you give to a feminist woman working in the field?

MK - Great, in terms of balancing I think that it's actually how you rebalance. I don't think that you ever get the perfect balance and that feels to me like a punitive, frustrating way of defining things. At any given time, I'm re-jigging what the formula is going to look like. I've actually started the BPA, stands for Bad Parenting Association. I have been the president for some time. You have to do lots of really egregious things in order to maintain your membership. You have to forget school conferences, you have to bake brownies with olive oil that makes them taste like lead, you have to be out of town for the first week of your kid's school - which I will do this year as I did last year and at least two other years, each for a different research conference or professional project. You really have to do a lot of things that could really piss off anybody that looks judgmentally at you. And then you have to have lots of friends who *high five* you every time you get another point in your BPA status.

So I think there's a lot to be said for dropping some great expectations about there being a perfect way, having enough people around you to normalize your behavior, so that you have a peer group support. However, your supports in these days of instant communication, don't have to be local. There's lots of people who think I'm a Martian because of my style of working and because the amount of time that I work is different or unusual. Yet, there are plenty of people, who respect it and cheer it on. It doesn't have to be people in your backyard, but I think you need to have a group that understands and gets what you do and values it. It's another reason why writing "Feminist Perspectives" was so exciting, we created a community around the country (it was all American women at the time). We created a community through conferences and that validated a lot of what we were doing and how we, as female professionals, were living. It wasn't initially the purpose in writing the book. That need to have connection, which is the piece of the advice that I would give, is absolutely paramount. I've always been a group therapist, I'm still a believer in group, there is nothing like it!

The other bit about mothering and balance is that I have always tried, when it made sense, to take my kids with me. So, to the extent that I can, my kids have come with me on research programs. Now that they are both teenagers, I've watched a wonderful evolution. When my son was in fifth and sixth grade he used to say 'why do you write books about things that no one cares about and that don't matter anyway and about problems that don't really exist?' And now he has a girlfriend who is studying eating disorders and who took my book to college and she's telling him how smart his mom is and now because he really likes his girlfriend, he is willing to contemplate reading my book and has identified that some people are actually in need of help, and even thinks it might be needed! It's a great evolution. And just recently my daughter chose to write about eating disorders for science-not about thin fashion models, but about cross disciplinary models of neurodevelopment-and she's only fourteen-and you know girls don't 'do science!' (giggles). I think that you have to maintain a good peer group, a sense of humor, a long view about things and not be afraid to get people to help you out. When I can do things for other people I'm always volunteering, because I need to put deposits into the 'help me out' bank so that when I need it, I can withdraw. The other success tool is to find really good role models. I had really good mentors.

LG - Like who?

MK - One is **Sharlene Wolchik** who was a young professor. When I met her she was in shorts and a t-shirt, she had just started at ASU (Arizona State University). I walked in and I told her that I wanted to do work in eating disorders and her connection to eating disorders was that she had gone to graduate school with **Kelly Brownell** who worked in obesity. That was just about as tenuous as you can get! She was willing to listen and to support me and to edit me relentlessly to the point that I still see her writing over mine-literally! She has never stopped being a friend and mentor. When we would get our statistical runs back or try to figure out what it all meant, we would dump a big pile of M&M's on the table that she kept in her desk drawer for me and we would eat and talk about the meaning of binge eating. It was perfect!

Lillie Weiss, who Sharlene and I worked with on "Treating bulimia: A psycho-educational approach," and also 'You Can't Have your Cake and Eat it too.' Lillie is just a great. Neither one of these women would identify themselves as feminist, but they were huge supporters of me and the questions I was asking. Really great role models of 'you have to get the balance right, so let's have a giant sleepover party, outline the books, sit in the hot tub and figure it out.'

From the hot tubs of the west, I went to Bellevue in NY for my internship and then on to do my fellowship at New York Hospital. At New York Hospital-Cornell Medical Center, Dr. Katherine **Halmi**, taught me a tremendous amount about eating disorders but also taught me about things that I hope will make her smile if she ever reads this interview. She used to say to me, 'you know what, Melanie? You need to pull your hair back, wear shorter earrings, don't wear patterned stockings, no one's going to take you seriously if you look the way you do.' She made me furious at that kind of commentary. I later realized she was actually trying to get me to understand myself as a scientist and what it

meant to be a woman in science - battling of a lot of the obstacles that she had faced years before me. One of the great compliments to me twenty years after that fellowship was won when I was presenting the Curacao data, and when the room was silent after my presentation about turning the initial results around, the first person to jump up and say 'I think this is really important work, the first study never made sense' was Dr Halmi and that was pretty terrific.

Finally, I have to mention, **Susan Wooley** who just, I think almost anyone coming up in the field of eating disorders in the '80s and '90s, they would be lying if they didn't say **Susan Wooley** got into their hearts and heads and made them think differently

LG - Thank you so much. Is there anything else that you want to say?

MK - The only thing that I would say in closing is that I love the notion that there is the history of the feminist movement, which suggests that there is a compilation of the history of feminist thinking. Which by its existence suggests that there has been so much accomplished that one needs to look back and reflect on it. It is a great honor to lend my voice and my stories.

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