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A Legacy of Feminism and Advocacy: An Interview with Dr. Lenore Walker

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Abstract

Dr. Lenore Walker is a pioneer in feminism and trauma counseling. Her contribution to these fields is vast, including topics of gender violence, battered woman syndrome, child abuse and trauma, false confessions of battered women, sex and human trafficking, and psychology and the law. Her theories and conceptualizations have shaped how providers approach trauma-informed care and the assessment of trauma survivors. Moreover, her work has spanned a variety of functions such as a clinician, researcher, educator, advocate, leader, consultant, and mentor. For the purposes of this article, Dr. Walker engaged in an interview to discuss her career, contributions, legacy, and the future of trauma counseling. During this interview, Dr. Walker shared what influenced her career and how she forged paths in uncharted areas. She provided insight into the importance of strength-based interventions, increasing prevention efforts and essential counseling skills when working with trauma and abuse survivors. Additionally, Dr. Walker discussed some of her experiences working with the legal system and recommendations for providers whose work overlaps with the criminal justice system to gain proficiency in forensic mental health assessment. Given her role in cross-cultural counseling, Dr. Walker reflected on how culture can influence the identification and treatment of gender violence. Finally, she reviewed the development and evolution of battered woman syndrome, assessing and treating trauma across the lifespan, and how to cope with working in a challenging field.

KEYWORDS

trauma counseling, battered woman syndrome, feminist psychology, gender violence

The work and legacy of Dr. Lenore Walker is engrained in the past and present of trauma counseling. Dr. Walker is a trauma specialist and licensed and board-certified psychologist whose groundbreaking work has benefited the lives of thousands of children and adult victims of gender violence. Dr. Walker is best known for her

contributions in trauma and feminist psychology, as well as coining battered woman syndrome (BWS; Walker, 2017). She is an educator, mentor, clinician, forensic psychologist, author, leader, and advocate.

Dr. Walker has taught at several postsecondary education institutions. She became a part of the

faculty at Nova Southeastern University (NSU) in Fort Lauderdale, Florida in 1998. During her tenure at NSU, Dr. Walker developed a concentration in forensic psychology for doctoral students, as well as a Master of Science in Forensic Psychology program. She has supervised and mentored countless trainees during their master's and doctoral training. Presently, Dr. Walker is a professor emerita and continues to conduct research affiliated with the university. Her contribution to scientific literature, including peer-reviewed articles and books, is longstanding; some of her most recent publications have included *Forensic Practice for the Mental Health Clinician* (Shapiro & Walker, 2019) and *Introduction to Forensic Psychology* (Walker et al., 2020). She has also developed a treatment manual, the *Survivor Therapy Empowerment Program*, to help provide trauma-informed psychotherapy to victims of gender violence.

Dr. Walker has maintained a thriving and successful private practice in which she conducts forensic evaluations in both civil and criminal cases. Often, her work includes the application of BWS in criminal cases and the implications of trauma and abuse in personal injury cases. Moreover, within her private practice, Dr. Walker has served as an expert witness and consultant. Her work in criminal and civil cases has led to improved outcomes for the victims she has evaluated. Aside from teaching and clinical duties, Dr. Walker served on many professional committees, task forces, work groups, and organizations. They have elected her to serve as the chair, president, and executive board member within many organizations. In August 2023, Dr. Walker was awarded the “Gold Medal Award for Impact in Psychology” from the American Psychological Foundation at the annual American Psychology Association conference.

In August 2023, Dr. Walker took part in a virtual interview with the aforementioned author to discuss the development of her work over the years, paving

her own way in uncharted areas of trauma counseling, emerging trends in the fields of trauma and feminist counseling and research, and the importance of understanding trauma across the lifespan.

“Dr. Walker, you have a remarkable career studying gender violence (e.g., battered women, victims of sexual assault, false confessions of trauma victims, sex and human trafficking). How did you become interested in these areas and begin your research career?”

While attending graduate school in New York, Dr. Walker noted that her training and the field of psychology and related mental health fields were permeated by Freudian ideology, always viewing women through the perspective of men. She felt Freudian beliefs were not accurate or supportive of women. Dr. Walker found herself exploring other theories but noted that none truly incorporated feminism. From that time, it was her goal to employ a feminist lens in all of her work and explore new approaches. Dr. Walker described that early in her career in the 1960s, she observed significant sexism in the field and the feminist movement was in its infancy; as such, she felt it was an area that mental health providers could contribute to. When she began working with women and children, Dr. Walker soon found how many of her clients were victims of abuse perpetrated by men. This was the catalyst for her work researching the implications of child abuse and BWS. Dr. Walker noted that while she was not always certain about what she was doing, she paved her way and pursued her work with confidence—a characteristic she has carried throughout her career.

“How has increased trauma awareness influenced your research and work?”

Throughout the interview with Dr. Walker, she exuded an excitement and passion for trauma counseling and the progression of the field that she has observed. Dr. Walker cited the increased awareness of trauma that has led to the development of more professional organizations and work

groups that aim to improve the field of trauma counseling and psychology. For example, Dr. Walker serves on an American Psychological Association work group that is creating professional guidelines for those working with posttraumatic stress disorder and other trauma-related disorders. Additionally, the aforementioned increased awareness has resulted in a significant increase in the overall production of research, which is essential in a field that is often applied to the legal system.

“You have pioneered research on domestic violence and are respected throughout the world for forging a new direction in research and practice. Has the country’s and world’s responses made a difference in prevention and intervention? Where do you see research going in the next decade?”

From Dr. Walker’s perspective, interventions in trauma counseling have continued to be developed and refined over the years, which is a strength of the field. Some of the most important developments have been the utilization of strength-based psychotherapy approaches, but also raising awareness that men can be victims of trauma and providing services for this population. Rather than struggling, victims are more aware of available resources, are getting help, and developing the strength to leave abusive relationships. However, there is a deficit in prevention efforts. Dr. Walker learned early in her training and career that preventative mental health services for children are imperative, especially those who have been victims of child abuse. She also hypothesized that with improved prevention efforts, especially with male victims, fewer trauma victims would be a part of the criminal justice system.

An area that Dr. Walker is excited about in research is the field of epigenetics—the intersectionality of behaviors, the environment, and gene expression. She explained how research has found that with trauma populations, abuse can alter one’s nervous system and brain circuitry, which can be passed

down from generation to generation. This can help clinicians understand why child abuse continues to occur across generations. Moreover, this area has demonstrated that trauma can result in psychological, physiological, and neurological changes, leading to improved assessment and identification of trauma-related disorders.

“You are also very respected for your expertise in understanding the legal system and testifying in court. What is it like being an expert in court on such difficult issues? What advice can you share with mental health practitioners about working with the legal system and its treatment of battered women?”

Dr. Walker described that she loves being in the courtroom and the challenges that come along with educating people in other fields, which is often what expert testimony includes. Mental health professionals should be proactive in educating members of the court system. The expansion of research and knowledge of trauma and its implications has led to the increased integration of trauma into legal issues. When working in the legal system, Dr. Walker reiterated the importance of understanding that a large portion of the population – including both men and women – has reported a history of severe trauma, child abuse, and gender violence.

Dr. Walker discussed that it is important for mental health practitioners to understand biases against battered women in the legal system, which has improved over the years. Historically, there has been underlying sexism against women in the court system that women are more responsible than men for protecting children. The court system is unforgiving towards women for “being human and having human emotions” (L. E. A. Walker, personal communication, August 23, 2023). Within criminal and civil courts, judges and juries are now believing women’s stories more frequently. Moreover, in civil cases, women are being appropriately financially compensated for personal injury claims. Unfortunately, the family court

system continues to function in a manner that forces battered women to co-parent with their abuser, subjecting them to coercive control and the children to potential abuse. She noted that the state of Colorado has recently passed legislation to avoid forced reunification; Dr. Walker is hopeful that such laws will be passed in other states, improving how the family court system approaches reunification for trauma victims.

For mental health professionals whose work overlaps with the criminal justice system, Dr. Walker voiced the significance of learning about the legal system before beginning their work. There are significant differences between clinical and forensic work, such as who the client is. At times it may be important for a provider to obtain their own legal representation to protect themselves, which is sometimes “the cost of doing business” (L. E. A. Walker, personal communication, August 23, 2023). Moreover, one should understand that clinicians and lawyers make decisions in different ways. Mental health clinicians’ decision-making process is based on scientific methods, while legal professionals attempt to establish a rational story to fit their defense. Practitioners who are seeking more training in forensic practices or have questions (e.g. how to conduct evaluations, preparing to testify) can find many answers in books such as *Forensic Practice for the Mental Health Clinician* (Shapiro & Walker, 2019) and *Introduction to Forensic Psychology* (Walker et al., 2020).

“What should professionals know about false confessions of battered women?”

Dr. Walker reflected that, as humans, we are led to believe that no one would confess to a crime that they did not commit. According to Dr. Walker, “that is simply untrue” (L. E. A. Walker, personal communication, August 23, 2023). She cited research that has shown that a percentage of women may confess to a crime they did not commit for several reasons. First, the woman may have mental health concerns that result in her becoming confused, making her unsure if she committed a

crime or not. Dr. Walker described a victim may “twist” (L. E. A. Walker, personal communication, August 23, 2023) facts around in their head, and unsophisticated law enforcement interviews may cause more confusion. A second explanation posed by Dr. Walker is that during consecutive traumatic events, previous trauma memories may be activated, leading to confabulation of memories and confused thinking. A third reason behind false confessions is that a battered woman may know she is not telling the truth, but she feels the need to protect her abuser because she will not be protected from his anger. Especially where children are involved, abused women will take the blame for failure to protect children from the abuser.

“You have played a leadership role in international psychology and cross-national issues. How does this connect with your other professional and research interests?”

Dr. Walker’s work in international issues organically developed as she met individuals with similar interests from other countries. For Dr. Walker, this type of work “is the perfect way to blend my love of exploration, new things, and travel with the knowledge I have” (L. E. A. Walker, personal communication, August 23, 2023). This approach has led to Dr. Walker developing new friendships and the ability to engage in advocacy across the world. In this type of work, she strives to understand other cultures and how they can affect the perception of violence. While Dr. Walker has enjoyed all of her international journeys, her work in Israel has been particularly meaningful given her own upbringing and Jewishness, as well as a social system that encourages counseling.

“How common is the victimization of women and children around the world? How does culture play a role in violence, as well as interventions and treatment?”

Dr. Walker suggested that domestic violence is very prevalent, “probably more common than we know” (L. E. A. Walker, personal communication, August 23, 2023). She discussed how many people do not

want to talk about being a victim of abuse, and in some cultures, trauma is more observable than in others where domestic violence is hidden. Within this realm, it is important that mental health professionals help women be strengthened using their cultural experiences. Dr. Walker encouraged clinicians to gain knowledge about different cultures and to plan compatible interventions.

“Much has been written about the relationship between child abuse and victimization of adult females. What has your research about abuse and trauma found over your career that can guide the practices of mental health professionals?”

Dr. Walker described that early in her career, she continued to observe commonalities between various forms of abuse. Nearly all victims—women, girls, and boys—were subject to abuse and trauma perpetrated by men because of being vulnerable populations. One of the most important lessons she has learned is to really listen to children, hearing what they are saying when they are not doing well. Dr. Walker continued to discuss that mental health providers must continue to work to support children early on. She advised that those working with trauma populations should have training across the lifespan, from childhood to adulthood, as well as exposure to family and counseling therapies to provide the best treatment to trauma victims and strengthen families.

“You pioneered the conceptualization and research of BWS. How did you develop BWS? How has it changed or expanded over the years?”

Consistent with much of Dr. Walker’s early career success, her conceptualization of BWS was a natural progression of what she was observing in her clinical work. She described how she had to start “defending” BWS when other professionals were attacking and questioning it (L. E. A. Walker, personal communication, August 23, 2023). Dr. Walker noted that while BWS has changed little over the years, she has better learned how to assess

and treat the syndrome. A notable development was the validation of her theory with the help of methodologists at Nova Southeastern University by using over 20 years of data. This research (Millen et al., 2019) found that the factors that make up BWS stand on their own but are also cohesive. Additionally, to better assess BWS, Dr. Walker created the Battered Woman Syndrome Questionnaire (Millen et al., 2019) which has also been validated in research and led to “great assurance” that the tool is measuring what it is intended to (L. E. A. Walker, personal communication, August 23, 2023).

“The latest edition of your book, *The Battered Woman Syndrome*, reflects advances in knowledge and practice about trauma-informed counseling and psychotherapy. What are some of these contemporary ideas and approaches?”

As previously noted, few changes have occurred concerning the theory and conceptualization of BWS. Dr. Walker reported she stopped using the theory of learned helplessness as it was frequently misunderstood. Without proper education on learned helplessness and its applicability to BWS, individuals often interpret this theory as labeling battered women as helpless, which is the opposite of Dr. Walker’s perception. According to Dr. Walker, battered women are simply using survival techniques in a situation that may feel like life or death. However, she reported she continues to cite learned helplessness when providing expert testimony, as she can provide the necessary education to assist members of the courtroom in better understanding their theory in conjunction with BWS, especially why a battered woman may remain in an abusive relationship.

“Throughout your career, you have continued to address child abuse in its many forms, from children exposed to violence, domestic violence, sexual exploitation of children, and human trafficking. What lessons can you share with mental health practitioners?”

When she discussed human trafficking, Dr. Walker expressed the importance of understanding individuals who engage in behaviors that often have pejorative titles, such as prostitution. Rather, these behaviors are better described as “survival sex” and providers should work to better understand why someone is engaging in such behaviors (L. E. A. Walker, personal communication, August 23, 2023). Often, these behaviors are survival skills that were developed to cope with their environment. It is also imperative that providers do not become mired in stereotypes about these behaviors and are open to listening to what somebody tells them. Dr. Walker continued to highlight the necessity of listening to victims’ narratives, stating, “We don’t know everything,” (L. E. A. Walker, personal communication, August 23, 2023). When providing psychotherapy to trauma victims, we as providers know the skills to help, but also need to be aware of what the victim will accept and focus on the timing of therapy. Mental health practitioners need to pace their work to match where their client is in their journey and what they will be able to handle in session. Key counseling skills that a provider should use include good listening and observation skills, and most importantly, patience.

“Your writing and presentations on the myths and science of domestic violence have informed vast numbers of mental health professionals. Can you share some myths and realities that have changed over time and those that have stayed the same?”

According to Dr. Walker, many of the myths about domestic violence have changed over time due to advancements in the field and more available information about trauma. Many of these myths were based on stereotypes; she feels that mental health professionals have done a good job of debunking these myths and moving on from stereotypes that perpetuated false beliefs.

“Adverse Childhood Experiences (ACE) is now a part of graduate training for counselors and mental health professionals. Can you describe

how you have integrated this into your books and research?”

Dr. Walker noted the significance and importance of the ACEs study in the fields of counseling and psychology. She explained how this study has shown that what happens to children has a significant impact on their development into adulthood; these findings also highlight the importance of prevention efforts for children given the implications of child abuse in its various forms. Dr. Walker indicated that in her private practice, the ACEs questionnaire is utilized where appropriate in evaluations as it assists her in better understanding the entirety of the experiences of the victim.

“Your work has touched very sensitive and painful areas for victims. How have you coped with working in the midst of domestic violence?”

Dr. Walker’s response to the final question was quick and simple: “I play—a lot!” (L. E. A. Walker, personal communication, August 23, 2023). In both her personal and professional life, Dr. Walker makes it clear that life is not all about work. She also encourages professionals to enjoy the work that they are engaging in and to remember that we, in the mental health profession, are making a difference for those we serve. Dr. Walker noted the importance of practitioners learning how to “draw a wall” between what we see in work and what we take home (L. E. A. Walker, personal communication, August 23, 2023). While this may not be a skill that everyone initially embodies, it should develop over time. She also encouraged clinicians to be self-aware; if they find themselves unable to separate from a particular type of work, they should know when to step away from specific types of work. Dr. Walker experienced this difficulty in her career, describing that she stopped taking family violence and child custody cases due to the unwillingness of the court to better protect children. This reality caused Dr. Walker to feel too frustrated and sad for the women and children who were “forced into untenable lives by an ignorant and rigid legal system that is unwilling to change”

(L. E. A. Walker, personal communication, August 23, 2023). Finally, she encourages professionals to have hobbies for their time outside work. For Dr. Walker, she has a newfound passion for writing mystery novels!

POINTS OF REFLECTION AND ADVICE FOR COUNSELORS

Anyone who has spoken with Dr. Walker or attended one of her presentations is aware of how captive and engaging she is in conversations about the fields of trauma and feminist counseling. Following the interview, I asked myself, “What are the underlying messages from Dr. Walker? What can I take, as a new early career psychologist and mentee of Dr. Walker, and share with my colleagues in the counseling field?” As expected, there are many words of advice and inspiration from Dr. Walker that I can offer when drawing from this interview and from my experiences working alongside her.

First, I urge students, trainees, and professionals not to be afraid to forge new paths in their respective areas of expertise. If existing theories and interventions in use are not sufficiently supporting their clients, counselors should not be afraid to push the bounds. Similarly, counselors should find mentors who will support them and their aspirations; and seek out and learn from inspirational professionals. For me, Dr. Walker is this person in my journey—someone who always believed in me and supported me in all phases of my training and career. Dr. Walker has reiterated the importance of openness to learning and seeking new information. If counselors do not have the knowledge needed, they should educate themselves and seek support from those who are well versed in the field—a willingness to learn, as well as a willingness to teach others.

As outlined in this article, Dr. Walker’s legacy in gender violence research is longstanding and

foundational in trauma counseling. To continue this legacy, professionals are encouraged to conduct research to advance the field and should remain eager to reevaluate and evolve their existing work. Additionally, attention is needed for prevention efforts specific to children and men who are victims of abuse. With these advancements, clinicians can better protect and support children, as well as address the implications of trauma on adult functioning. When working with victims of trauma and abuse, Dr. Walker’s words should motivate counselors to maintain the basic skills that best serve clients—remembering that in trauma- and strength-based psychotherapy, timing is imperative and is a product of patience. Clinicians should exude continuous support for their clients, keeping in mind that they are entrusted to work with these vulnerable populations that nearly every other system in society has often failed.

Within the interview, Dr. Walker reflected on her own experiences of knowing when to withdraw from specific types of work—for Dr. Walker, this included family violence and child custody cases. A lesson counselors can learn from this part of the conversation is to exercise introspection and self-awareness. While forensic- and trauma-based work is an exciting field, not all professionals are meant to work in this domain. Practitioners should know their professional limits, and demonstrate humility to walk away from work when necessary.

There are three core tenets I found to be most valuable based on my discussion with Dr. Walker. First, all mental health professionals, no matter their primary work duties, are responsible to advocate for victims of trauma and abuse. Second, while the field has come a long way, there is still much work for mental health professionals to accomplish. Finally, I encourage all readers to approach their work in mental health and trauma counseling with passion, tenacity, and most importantly, compassion.

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