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PSYC432: Counseling Psychology

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My character is Carol from the TV series *The Walking Dead*, a middle aged white woman who is known for her growth throughout the series. She is from the outskirts of Atlanta, Georgia, and begins the series with her husband- Ed. It is clear that he is abusive (physically and verbally) to her and her child Sophia, and Carol acts very timid around him for fear of his anger. When not around him, she exhibits more personality, and this is emphasized when Ed passes and Carol is able to start coming out of her shell. It is not the case of his abuse sparking respite within her or making her a stronger person, but rather his subsequent absence allowing her to be more herself and expand upon traits that she hid when he was alive.

Shortly after his death, her daughter Sophia passed as well, and was last seen exiting out of a barn (which relates to Carol reacting strongly when seeing barn doors in later episodes, what appears to be a symptom of PTSD). She begins entering the role of a protector with other children she meets and with friends she makes over time, gaining proficiency in weapons and tactical defense. Much of how she presented herself and how others perceived her was as a result of the dangerous situation she was in with her ex-husband, such as having short hair (which she stated in later seasons was so it was harder to grab). Carol started to become more outspoken, driven towards leadership, and action oriented within the community. She struggles with opening up to others and being in touch with her emotions, and tends to be a loose cannon when she fears for the safety of her loved ones.

There is a clear struggle when it comes to conflict with authority figures, and distrust of male characters throughout her time on screen. She deals with repeated loss of children she assumes a parental relationship with and a lack of stability in general, due to the dangerous reality she lives in even after the death of her abusive ex-husband. In addition, Carol often has

difficulties bonding with other women, and shuts herself off from those around her, even when it would be in her best interest to communicate her thoughts and feelings.

I will be using the feminist theory approach to counseling to analyze my chosen character. This theory revolves around feminism and its empowerment of women and those who have been disempowered by society. It is often used intersectionally with respect to clients' cultural background and other marginalized identities, and is a useful framework for helping people find sources of power and reconciling internalized issues. There are four axis of power; somatic, interpersonal, intrapersonal, and spiritual/existential. Somatic is regarding ones personal safety and wellbeing, either physical or psychological. Interpersonal is about ones roles in a community and relationships with others, and how one has power within that arena. On the other hand, intrapersonal is ones relationship with yourself and knowing your emotions/desires. Lastly, spiritual/existential power is your purpose in life, often relating to religion, culture, or strong life goals.

There are concepts within feminist theory such as external attribution factors, which involve external objects/symbols to attribute meaning to, hence assigning power. The patriarchy is also obviously a major part of this approach, as you can't discuss feminism without first analyzing how the patriarchy has played a negative part in ones mindset or sources of power. Since there is a prominence of the idea of the 'client knowing best,' there is a healthy balance of advice and listening to the client. Feminist theory approach insists on finding what lies in the client already, and how we can bring out those traits to better empower people (mainly women) to take hold of their life and better understand themselves.

Carol has had many aspects of her life impact how she views her role in society and how she desires to be perceived by others. She has had negative relationships with men in the past,

hence her ex-husband Ed, and had to exist within a patriarchy to survive. She had to be timid, feminine, and a caretaker to avoid retribution from her abuser, and continues to have trust issues with men throughout her life. When she finally was able to escape this prison, she came out of her shell and starts regaining her power. Power is relevant to her life and one of the main aspects of feminist theory (Allen, 2021). One sign of that is shifting from the role of caretaker to protector, where she is still being parental/having guardianship over others, but on her own terms and in a way that doesn't make her feel weak.

In terms of somatic power, she learns how to fire a gun and becomes an expert in various weapons. Her personal safety and wellbeing relies on her ability to physically overpower any possible abusers or enemies in the future, and Carol exhibits this by being rather impulsive sometimes with her shows of strength. To circle back to her newfound role of being a guardian, her existential power is heavily saturated in her goal of protecting those who can't protect themselves. Carol shows time and time again that her purpose in life is to do for others what wasn't done for her, and to rid the world of bullies/enemies of her loved ones. Overall, I feel as though Carol would only approach therapy in any sense if she was told to by her loved ones, so I don't expect much cooperation. She would never admit to needing help unless those close to her worded it in a way that frames therapy as a step toward improved group consensus/communication. If it is a means to an end that will allow her to protect others better, she might then consider therapy.

Carol has a great deal of unresolved issues, PTSD, and likely other mental health disorders that have gone untreated due to the post apocalyptic environment she lives in. Feminist theory will prioritize her own goals, and unlocking her true feelings and ability to empathize with others. As a woman, she has masculinized herself in a way to gain influence and power in her

group. Men and physically overpowering others is the only method of safety and gaining respect in the world she lives in, and understanding the systems/oppressions present can better help Carol understand her role in it all. She doesn't have many hobbies, if any at all, and feminist theory will better analyze her disdain for close female relationships and for any shows of weakness. Rather than helping Carol gain power, this theory would be applied to her more in the sense of helping her find herself in the hard shell of protection she built around herself. She doesn't need more power, but a path to understanding that power and how she can healthily approach her past traumas.

In terms of treatment, I don't believe talk therapy or group therapy would work unless paired with somatic therapy. Since I find one of her issues to be her lack of emotionally intimate relationships with women, I think a type of therapy in which she does an activity with a group of women who were also victims of abuse will be beneficial (Dimmitt & Davila, 2004). Carol needs to stop and acknowledge that it doesn't weaken her to align herself with women who have shown weakness or what she perceives to be weakness, and instead build connections that can allow her to express her emotions in a non destructive way. My relationship with her being my client may not function with a one-on-one talk therapy dynamic, as she is a woman of action and generally has shown a lack of interest in people who don't share a heavy amount of trauma. What would I know? Therefore, grouping her with other women with shared experiences, in a way that has a shared goal through a teambuilding activity, is the best course of action.

Somatic therapy is helpful for those who have unresolved trauma, as this strategy is body centered and trauma is often held in the body. The therapy being action oriented would also align with her history of feeling safer when physically useful, and it could assist in regulating her nervous system. Somatic Experiencing has also been proven to be helpful for those with PTSD

symptoms, reducing chronic stress and using a 'bottom-up' approach (Kuhfuß et al., 2021). Suppressed emotions and experiences could be brought up and processed through physical activity when paired with group participation and goal setting. She would benefit from this strategy due to it creating a path toward healthy collaboration and processing past traumas that impact her ability to empathize with others. Carol is mentally blocked off from vulnerability, and the combination of physical tasks with shared experiences surrounding her could work to break her walls down. She also would gain some connections with other women, which is healthy in general aside from the therapeutic aspect. In terms of specificity within treatment, I would suggest an activity that Carol is familiar with- such as a gun range, hunting, or survival skills. It would be important for her to be introduced with new information so she can learn and grow with the other women, and not just assign herself the role of mentor and protector (as she has done in the past).

In addition, Carol being from Georgia and with a background in gun ownership and southern regional culture, I may have some difficulties connecting. Her culture puts a lot of standing and respect with action, being on the offense, and the show of strength through guns/military-esque protections. I would have to understand the difference in our situations and regional upbringings, and account for that in my feminist analysis of her problems.

References

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