MUSIC PSYCHOTHERAPY WITH KOREAN WOMEN
WHO EXPERIENCED SON PREFERENCE

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CHAPTER I
THE RESEARCH OBJECTIVE

Introduction

This study examines music psychotherapy treatment for Korean women who have experienced son preference, a condition that strongly exists in a number of Asian countries including Korea, China and India.

The term son preference refers to a patriarchal attitude that sons are more important and valuable than daughters because of the family line and economic reasons (Clark, 2000). Although the phenomenon of son preference strongly exists and its negative effects have been shown to manifest in various ways in certain countries (Das Gypa et al., 2003; Yoon, 1999), the research on son preference is largely statistical and often confined to show only the ratio of male births to female births in these countries is abnormally high. However, there are other underlying issues of son preference, such as its psychological effects, that have not been sufficiently addressed. Throughout this study, I will present and discuss a broad range of consequences that son preference has for Korean women.

Music psychotherapy involves using musical experiences to facilitate the interpersonal process of therapist and client as well as the process of therapeutic change itself (Bruscia, 1998). As a psychoanalyst in training at The National Institute for Psychotherapies, I am required to do only verbal psychotherapy with my clients and I
often feel the limitation of words and the desire to incorporate words and music. When I work as a music psychotherapist, there is no rigid boundary between words and music, and I can feel "when music speaks and words sing" (Austin, 2003) in the session. This enables me and my clients to explore and expand our experiences. Together we have found that "music psychotherapy can speak to the whole person and offer important possibilities for the treatment of emotional problems" (Hesser, 2002, p. 6).

Discrimination against daughters due to son preference starts from the beginning of women's lives in Korea. Although they have experienced son preference from their earliest days, there are often no words to describe this experience because it is preverbal. Music can give women ways to connect to these experiences and translate them into words. Certain experiences are too much to be aware of, and so they are deeply repressed. These memories also can be explored safely with the help of music in the presence of a music therapist.

The primary purpose of this study is the presentation of experience rather than the addressing of theoretical concerns. It seeks to capture and present what Korean women experience throughout their lives in relation to son preference. It seeks to describe in depth how music therapy techniques and interventions facilitated expression, exploration and change for the women involved in the study.

Personal Source of the Study

I am from South Korea, a country with a strong notion of son preference. There, I was born the youngest of four daughters with no son in my family. My parents,
who wanted a son desperately, were very disappointed that I was a girl because I was
the last chance for them. And all my relatives and family friends did not mind
expressing how sorry they felt for my parents in front of me. As I grew up, I received
overt and covert disregard and blame for who I was and always felt sorry for my
parents sake that I was not a boy. As a result, I overcompensated by being a high
achiever and being oversensitive to other people’s reactions. It was also hard for me to
accept my femininity and sexuality when my body developed and my relationships
with men tended to be too competitive.

These issues were first addressed in my analytic music therapy sessions thirteen
years ago. Surprisingly, before then, I was unaware of the critical effect son preference
had on my life and how I came to develop a “false self” in the way Winnicott (1975,
1997, 1998, 2000) uses the term to indicate a sense of self that is not authentic.

Being aware of my experience of son preference and its impact on my life
enabled me to see something others might also not recognize. Working as a music
psychotherapist in Korea, I met several Korean women who suffered from presenting
problems similar to mine. They had issues with their femininity and sexuality, and were
driven to high achievement, but they felt empty inside, and had abandonment issues.
Likewise, they were not aware of the connection between their issues and the socio-
cultural atmosphere of son preference. The more I worked with Korean women, the
more I felt a strong need to examine closely the effect of son preference in Korean
women's lives.
Now decades have passed since I was born. Some people say that we used to have a notion of son preference but not anymore. They even point out a recent New York Times article entitled "Where Boys Were Kings, a Shift Toward Baby Girls" (Choe, 2007) which describes changes in Korean parents' preferences from sons to daughters. Is it really true? How come my personal experience as a mother of two daughters does not reflect these changes? When Korean people ask me about the gender of my children and find out that I have two daughters, their first response is "I am sorry to hear that. You must have been disappointed." Or "It's okay, you have another chance." These responses from people make me question myself: do I need to feel sorry about having daughters? Why? Yes, things are slowly changing, but some things still remain the same.

Through this research, I want to raise people's consciousness about Korean society's deep rooted notion of son preference. I dare to wish to change people's attitudes toward our daughters, hoping my daughters and my daughters' daughters will live their lives in greater freedom from our old cultural bind.

Need for the Study

When I talked about my dissertation topic, "son preference" with Korean people, I encountered two extremely divergent responses. One was: "we used to have the notion of son preference a long time ago but not anymore." The other response was: "yes, it's ubiquitous. Who wouldn't prefer a son? It's not worth researching."
How is it possible to have such different responses over the same phenomenon? Are we over this notion yet, or not? Perhaps, son preference has taken a more moderate form so people don't see dramatic and traumatic discrimination against daughters very often these days. Comparing the present with past experience, people think we have gotten over it. But in my experience, I still see son preference as strongly hurtful to Korean women and men. The indications of the research that I will present are that it still strongly exists in the Korean community. In fact, one of my purposes in conducting this research is to raise questions about Korean society's deep rooted notion of son preference and to explore the impact this notion has had on Korean women. By alerting people to its negative impact we can prevent future harm.

In the fields of psychology and music therapy, there has been a growing interest in incremental psychological trauma and its effect on human beings. In this process, the definition of trauma has been widened and the treatment of trauma victims has been diversified (van der Kolk, McFarlane, & Weisaeth, 1996). I believe my study can contribute to the ongoing development of trauma treatment in music therapy in a number of areas.

First, there has been much research done in the area of natural disaster, war neurosis, sexual abuse, and domestic violence (van der Kolk, McFarlane, & Weisaeth, 1996). This research focuses on the single or prolonged overwhelming experiences of the victims. However, there has been little study done on accumulated trauma consisting of small negative experiences over an extended period of time. For example, people walking in a misty rain may not be aware of getting wet at first, but after some
time they realize they are thoroughly wet. Each single incident of accumulated trauma seems to be subtle, but accumulated over time, this has the same devastating effect as a single or prolonged overwhelming trauma such as war experiences or sexual abuse. Therefore, I think that this study can contribute to expanding the concept of what is considered to be trauma in music therapy research.

Second, there is not much music therapy research on trauma which focuses on the socio-cultural origins of the victims’ symptoms. However, when the trauma stems from an existing social norm, and if the women are continuously exposed to the same abusive socio-cultural environment, the effect of therapy may not be long-lasting even if clients are well treated in a therapy setting. Soon they will feel the same helplessness they felt before therapy. Therefore, a study of music therapy focusing on the clients’ intra-psychic problems in relation to their socio-cultural context would be a welcome addition to available research. I hope that the findings of this study will also alert people to the devastating effect of son preference in Korean women and contribute to changing the society’s anachronistic beliefs in this area.

Third, describing an attitude of a neurologist to his female hysteria clients, Herman (1992) claims that “women were to be the objects of study and humane care, not subjects in their own right” (p.16). This comment is an example of the more general complaint that women have been objectified in research. Since researchers have used a “male-oriented and male-influenced framework” (Olsen, p.160) when they study women, their findings have often been biased and misleading (Martin, 1998). From such a perspective, Korean women who suffered from son preference might have been
viewed as having 'penis envy' or Oedipal issues which mainly stem from the female's biological inferiority. Therefore, it is imperative to study women from their own point of view. This study listens to and is guided by women (Gergen, 1988; Gilligan, 1979, 1997; Martin, 1998) in the hope that the resulting research will convey women's experiences as closely and accurately as possible.

Research Questions

The central focus of my research is the music psychotherapy experiences of Korean women who experienced son preference. Originally there were four aspects of this phenomenon that I anticipated investigating.

First: what is the nature of son preference in these women and how does it affect their lives in the past and present? In response to this question, I wanted to investigate how this experience affects aspects of their lives such as their relationships with family and others, choice of vocation and career.

Second: how can music psychotherapy help them explore and work through the issues related to son preference? In response to this question, I considered how the therapist can help the participants explore their issues related to son preference and overcome their trauma through verbal and musical clinical interventions.

Third: what are the political and socio-cultural aspects of this problem and how do they manifest in individual lives? In this area, I originally wanted to focus on how I, the therapist, could help the group raise its consciousness and see the interrelation between currently perceived problems and the Korean socio-cultural system.
However, as the group proceeded, I came to trust the participants more and to respect their own pace of understanding and integrating their experiences. Therefore, instead of focusing on what I could do for the participants, I focused more on the participants' own process of understanding and integrating materials and arriving at a bigger picture of their issues.

Finally: what unique factors arise when a clinician-researcher has a personal experience of the phenomenon being studied? In response to this question, I focused on three aspects: First, what the possible benefits and dangers are when the therapist has encountered the same traumatizing condition as her clients, in this case as a victim of son preference. Second, what the possible benefits and dangers are when the researcher has a dual role and studies her own work in an area of trauma in which she has personal experience. Last, how conducting the research and the therapy simultaneously can assist in the therapy process.

These questions remained the same throughout the research process except for the third one as I mentioned above. These questions guided me in the process of initial data gathering and analysis of this study. They gave me a starting point and something concrete to hold on to. When I felt overwhelmed and astray among the enormous data, these questions helped me to find my way home.
CHAPTER II
REVIEW OF LITERATURE

The literature significant to this study includes the areas of son preference in Korea, psychological trauma and music psychotherapy, and feminist research. In this section, I would like to show how son preference can be perceived as psychological trauma and how a feminist music psychotherapy research can benefit women and society.

Son Preference

Although patriarchy has been defined in different ways there are two core elements: gender inequality and systematically structured gender relations (Moghadam, 1996; Walby, 1996). Walby (1996) defines patriarchy as “a system of social structures and practices in which men dominate, oppress, and exploit women” (p. 21). In this system it is inevitable that people prefer to have a son, for he will be dominant in the society.

According to Das Gupa et al. (2003), although most societies show some degree of preference for sons, most of them are mild and virtually undetectable. However, son preference is strong enough to result in substantial levels of excess female child mortality in East and South Asia (Burgess & Zhuang, 2001; Das Gupa et al., 2003). Why then is strong son preference manifested only in some societies and
not in others? Das Gupa et al. find the answers in the extent of flexibility in the logic of patrilineal kinship and gender construction through it.

In China, South Korea, and Northwest India, villages traditionally had one dominant clan that maintained strict exogamy. Wives came only from outside of the community. Thus only men constitute the social order and women are the means whereby men reproduce themselves. In this social order, men are the fixed points and women are the moving points and when women marry they are perceived to have been permanently exported from the family. Therefore, women were valued as vessels of procreation and for their labor contribution to the household.

Moreover, under the culture of Confucianism which prevailed throughout the Chosun dynasty (1392-1910) in Korea, women were expected to obey men completely. One of the rules that women had to follow, called Sam Jong Ji Do (three rules of female obedience) stemmed from Confucianism implies that before a woman marries, she should obey her father; after she marries, she should obey her husband; and if her husband dies, she should listen to her son. It implies that women should not make decisions or do anything else on their own (Lee, 1998).

Ancestor worship, whose rites and rituals could be performed only by sons, played a big role in the prevalence of son preference. The performance of rituals of ancestor worship was needed to ensure the welfare of departed souls according to beliefs about the afterlife. Therefore, without sons, one’s own and one’s ancestors’ afterlives would not be secure.
In contrast with China and Northwest India where sons are equal in principle and are expected to inherit equally, in Korea, the eldest brother inherits the largest share of the property and is responsible for taking care of parents and ancestors. Therefore in each generation, brothers separate from each other and explicitly form a new branch of the lineage. To receive support in this life and the afterlife, one has to have one’s own son.

There are economic factors influencing son preference as well. Due to cultural belief, sons are supposed to provide for their parents support in their old age. In a traditional agricultural setting, the participation of females in agricultural work tends to be discounted as merely an extension of their domestic duties while men’s labor is considered a major contribution to the farm. Moreover, tradition dictates that a woman who generates income must give this to her husband’s family and cannot contribute significantly to her family of birth. This perpetuates the perception that parents investing in their daughters are only investing in another family’s daughter-in-law.

Lee (1998) studied the social construction of gender in Korea. In this traditional environment, men were expected to work outside the home, and be authoritative, dominant, strong, independent and intelligent, because the major role of men was to lead and stand for their family. In contrast, women were to be obedient, quiet, dependent, passive, warm, and wise in order to be supportive wives and wise mothers.
Strong son preference has many negative consequences in Korea. The most decisive effects can be seen in sex ratio at birth. Although the Korean government bans abortion by law, abortion is performed widely and son preference plays a major role in female feticide (Kim, 2001). Before sex selective techniques were available, and the sex of the child-to-be could be known, couples gave birth until they had a desirable number of boys (Kim, 2001; Lee, 1998; Yoon, 1999). After sex selective techniques became available in 1985, numerous fetuses that were determined to be female were deprived of their lives due to the complicity of their parents with socio-cultural norms. The normal ratio of girls to boys at birth is 100:104, 104 boys born for every 100 girls. The following statistics on sex ratio at birth in Korea give an indication of how many female feticides had been performed. The columns show an elevated number of boys born per 100 girls in each year, particularly between 1986 and 1995. The equalizing of the ratio in recent years may indicate a change in attitudes.

Table 1

Sex Ratio of Girls to Boys at Birth in Korea (number of boys born per 100 girls)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex ratio at birth</td>
<td>109.5</td>
<td>111.7</td>
<td>116.7</td>
<td>113.4</td>
<td>110.2</td>
<td>106.1</td>
</tr>
</tbody>
</table>

Source: Korean statistical information service (www.kosis.kr)
Moreover, the sex ratio at birth in Korea increases with birth order, meaning the higher the birth order, the greater the likelihood of female feticide. The table that follows breaks down the number of boys born per 100 girls according to the birth order of the children. In 1980, before sex selective techniques were available, a fourth child was actually more likely to be a girl than a boy. This changes alarmingly during and after 1985, and birth order becomes a strong indication of the sex of the child.

Table 2

*Sex Ratio at Birth by Birth Order*

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>1&lt;sup&gt;st&lt;/sup&gt;</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt;</th>
<th>3&lt;sup&gt;rd&lt;/sup&gt;</th>
<th>4&lt;sup&gt;th&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>1980</td>
<td>103.9</td>
<td>105.7</td>
<td>104.2</td>
<td>102.7</td>
<td>99.1</td>
</tr>
<tr>
<td>1985</td>
<td>110.0</td>
<td>106.3</td>
<td>108.2</td>
<td>131.7</td>
<td>157.2</td>
</tr>
<tr>
<td>1990</td>
<td>116.9</td>
<td>108.7</td>
<td>117.3</td>
<td>193.2</td>
<td>228.1</td>
</tr>
<tr>
<td>2000</td>
<td>110.2</td>
<td>106.2</td>
<td>107.4</td>
<td>141.7</td>
<td>167.5</td>
</tr>
<tr>
<td>2005</td>
<td>107.7</td>
<td>104.8</td>
<td>106.4</td>
<td>127.7</td>
<td>132.6</td>
</tr>
</tbody>
</table>

Source: Korean statistical information service (www.kosis.kr)

There are also serious psychological problems due to son preference in Korea. Yoon (1999) says that if a couple has a strong notion of son preference and they cannot have at least one son, they manifest multiple psychological problems, such as anxiety, despair, depression, guilt and a sense of devastation. This pressure will elevate continuously until they have a son, and this kind of pressure even jeopardizes maintaining married life. Because having a boy is a source of
accomplishment, satisfaction, and self-esteem, if a couple only has daughters, they feel they are losers (Lee, 1998).

According to Lee (1998), having daughters in Korea brings up cultural punishment and power issues. For example, bearing a daughter is experienced as an inferior birth and people treat parents of daughters as objects of derision or sufferers in need of consolation. As a result, son preference segregates people: mothers of at least one son vs. mothers of only daughters; fathers of at least one son vs. fathers of only daughters; daughters in families of only daughters vs. daughters in families with at least one son. Therefore, son preference evokes conflict, and depending on whether a woman has a son or not, there is a set hierarchy among people.

Conflict in response to son preference extends to relationships between wife and mother-in-law, as well. Due to the notion of son preference, bearing a son means more than just having a child in Korea. Mothers raising sons under the culture of son preference often treat their sons with exceeding devotion. Through the process of raising them, mothers and sons become strongly emotionally attached (Das Gupa et al., 2003; Lee, 1998). Mothers are careful to bind their sons to themselves through subtle webs of solicitousness and emotional manipulation. Therefore, when their sons get married, they want to know to whom he shows more loyalty (his wife or mother). There is a powerful motivation for marginalizing the son’s bride and ensuring that the son’s loyalties are to the mother above all (Lee, 1998; Yoon, 1999).

Son preference results in other forms discrimination against girls and women. According to Graham, Larsen & Xu (1998), who studied son preference in Anhui
Province, China, girls are breastfed for shorter periods of time than boys and receive less positive attention from the family. Though no equivalent study has been done in Korea, it is not unreasonable to hypothesize that son preference has similar effects there as well. Research has shown that girls have a lower chance for higher education in Korea than boys. Because parents think that daughters are less valuable than boys, they are less willing to pay a large amount of money for their daughter’s higher education.

The following table shows the dramatic difference in the number of males and females receiving higher education. The percentage of female students in higher education is growing but higher education is still dominated by males. The table that follows shows, for each year indicated, the total number of college students, the number of college students per 10,000 of population, and the percentage of college students that are female.

Table 3

*Number of College Students per 10,000 Populations*

<table>
<thead>
<tr>
<th>Year</th>
<th>Total (A)</th>
<th>Female Students (B)</th>
<th>Male Students</th>
<th>Ratio of female students</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Per 10,000</td>
<td>Per 10,000</td>
<td>Per 10000</td>
<td>(B/A)</td>
</tr>
<tr>
<td>1990</td>
<td>1,379,951</td>
<td>425,764</td>
<td>954,187</td>
<td>30.9</td>
</tr>
<tr>
<td>2000</td>
<td>2,599,578</td>
<td>950,654</td>
<td>1,648,924</td>
<td>36.6</td>
</tr>
</tbody>
</table>

Source: Korean statistical information service (www.kosis.kr)
There is evidence that son preference contributes to a high adult male mortality rate. According to Anderson (1996), who studied son preference and premature death in Korea, the high adult male mortality rate in Korea is related to unhealthy habits such as alcohol consumption and smoking. Korean culture has a strong son preference that confers great power upon husbands in their households. However, the stress from meeting the standard of being strong and able is very high. And worse, families and friends are powerless to limit men’s smoking or drinking habits to relieve that stress. Paradoxically, although the male birth rate is excessively high, the male mortality rate is also very high.

Most of the research on the topic of son preference offers the suggestion that efforts by the state, such as a revision of family law, such as abolition of the age-old patriarchal family headship known as “hoju” can help reduce discrimination (Das Gupa et al., 2003; Kim, 2001; Lee, 1998; Yoon, 1999). Remedies for the many psychological effects of son preference in women’s lives and in the population as a whole are not discussed.

In the next section, I want to talk about why we need to see the notion of son preference as psychological trauma and child abuse.

Trauma

According to van der Kolk, Weisaeth & van der Hart (1996), people have always known that exposure to overwhelming terror can lead to problems in the human body and mind. However, awareness of the role of psychological trauma as a
cause of various psychiatric problems has waxed and waned throughout the history of psychiatry. Even after the impact of psychological trauma was well recognized, there continued to be fervent arguments about the etiology of trauma: Is it organic or psychological? Is trauma the event itself or its subjective interpretation? Does the trauma itself cause the disorder, or do pre-existing vulnerabilities cause it? These arguments have reflected not only how people approached trauma but also contemporary cultural, social, historical and political conditions (van der Kolk, Weisaeth & van der Hart, 1996).

The definition of trauma has changed and expanded over time. For example, in 1980, the American Psychiatric Association described traumatic events as those outside the range of usual human experience (Herman, 1992). However, rape, battery and other forms of sexual and domestic violence are a very common part of women’s lives; these women’s experiences can hardly be described as outside the range of ordinary experience (Herman, 1992). Therefore, Herman (1992) claims that “traumatic events are extraordinary, not because they occur rarely, but rather because they overwhelm the ordinary human adaptation to life” (p. 33).

Recently psychiatrists and therapists use the term trauma in an expanded sense. Sutton (2002) used the term trauma “in terms of something so far beyond the ordinary that it will overwhelm one’s resilience and defenses” (p. 23). This can be interpreted as meaning that a traumatic event can be a single blow or something repeated. Trauma can result from natural causes or human actions, and the varieties
of man-made violence may include war/political violence, human rights abuses, rape, domestic violence, child abuse, sexual abuse among others.

Moreover, there are initiatives to expand the term “psychological trauma” even more radically. A variety of events and conditions are now being termed “traumatic.” In Intoxicated By My Illness, Broyard (1992) describes how his cancer affected every aspect of his life and his family’s lives and was psychologically traumatizing. Garrett & Weisman (2001) discuss chronic illness as a phenomenon with deep implications for disruption of self-states and narcissistic injuries. Physical disability is also considered as trauma (Chrisler, Golden, & Rozee, 2003). Also there is a view that African American people are traumatized because the brutal history their ancestors experienced as slaves has been transmitted from generation to generation (Nocholson, 1997).

Most trauma experts agree that trauma is subjective. Van der Kolk, McFarlane, & Weisaeth (1996) state that “the critical element that makes an event traumatic is the subjective assessment by victims of how threatened and helpless they feel” (p. 6).

Because Korean women who suffer from trauma due to son preference experience rejection, blame and hatred from their parents starting from very early childhood, it will be relevant to review some of the literature which focuses on the importance of the early experiences of children with their parents.

Attachment theory is one approach that considers the importance of these early experiences. Although there is criticism that attachment theory does not give
adequate credit to other genetic factors in the child’s development (Schneider, 1991), it sheds light on the consequences of childhood relationships with parents for individual development and has influenced clinical practice tremendously (Lieverman & Zeanah, 1995).

Research on attachment shows that the infant is predesigned to relate to others from birth. The child’s relationships with primary caretakers are very important in shaping psychic development (Schneider, 1991). According to Bowlby (1973), children who experience their attachment figures as available and emotionally supportive will in turn represent themselves as competent and worthy of love. However, children who experience attachment figures as depriving or rejecting will develop an image of themselves as being unlovable. He adds that although these self concepts can be changed as new information is assimilated, it will be very slow because “ways of thinking and behaving tend to become habitual and, thus, less available for conscious change” (Schneider, 1991, p. 254).

Being influenced by attachment theory, psychoanalysis has directed its attention to disorders in relation to early disruptions in the relationship between mother and infant. Object relations theory emphasizes interpersonal relations, primarily in the family and especially between mother and child.

According to Winnicott (1975) the infant relies on mother totally for survival. He says “there is no such thing as an infant, meaning, of course, that whenever one finds an infant one finds maternal care and without maternal care there would be no infant” (p. 52). He says through caring, adapting behaviors and empathic
mirroring, mother attends to baby’s physical and emotional needs. This early environment is crucial to the infant developing a sense of true self, which is the feeling part of the personality. However, if a mother fails to provide a good enough holding environment for the child, the child is left with a threat of annihilation and fears of falling apart, and comes to develop a false self. Winnicott (1998) describes the failure as being caused by a chronic lack of empathy and/or erratic, over-stimulating or grossly neglectful behavior on the part of the primary caretaker. He sees psychosis stemming from environmental deficiency, and all psychopathology as resulting from parental deficiency that impairs the self by burying the true self and emphasizing the false self (Okun, 1992).

Khan (1974) talks about the effect of long-lasting incremental damage due to the accumulation of frustrating tension. According to him, maternal failures do not consist of a single, dramatic event but are found in the mother’s subtle misattunements to the infant. If repeated in frequency and intensity, these small failures make the infant’s inner world turn into a traumatic experience. He states that if the mother cannot provide a good enough environment to her child from infancy to adolescence, there will be cumulative trauma on the child.

Kohut, who developed self psychology, focuses on the “development of the self as an active structure within the context of relationships” (Okun, 1992, p.32). Also, “self psychology sees all psychopathology as reflecting self deficit -- that is gaps, or missing or underdeveloped elements in self structure that come about as a result of traumatic care taking” (Goldstein, 2001, p. 85).
According to self psychology, healthy self-development proceeds from adequate responsiveness of caretakers to the child’s selfobject needs. These are 1) the need for mirroring that confirms the child’s sense of vigor, greatness, and perfection; 2) the need for an idealization of others whose strength and calmness soothe the child; and 3) the need for a twin who provides the child with a sense of humanness, likeness to and partnership with others (Goldstein, 1995, 2001; Jackson, 1993). When the child’s protracted exposure to lack of parental empathy in at least two areas of self-object happens, the child is unable to develop a cohesive self and his/her mental health is in great danger (Goldstein, 1995, 2001).

Self psychology, according to Goldstein (1995), shows us how traumatic or repetitive empathic failures of early caretakers lead to narcissistic vulnerability and disorders of the self. Those who are unable to develop a cohesive self may show chronic problems in self-esteem regulation and the maintenance of self-cohesion.

However, object relations theory and self psychology have limited their focus to negative experiences by the primary caretaker. Therefore, there is a need to expand the focus to include extended family systems and social norms and constructions. Moreover, the aspect of trauma experienced repeatedly on the same theme throughout life, not only in the caretaker but also in relation to society as a whole, needs to be studied.
Trauma and Child Abuse

The aspects of trauma theory that relate to child abuse are particularly relevant to the research under consideration. According to van der Kolk (1987), “the earliest and possibly most damaging psychological trauma is the loss of a secure base” (p. 32). When caregivers who are supposed to be a source of protection and nurturance become the main sources of danger, a child needs to re-establish a sense of safety. He/she often becomes fearfully and hungrily attached, unwillingly or anxiously obedient, and apprehensive if the caregiver is unavailable when needed (van der Kolk, 1987).

“Repeated trauma in adult life erodes the structure of the personality already formed, but repeated trauma in childhood forms and deforms the personality” (Herman, 1992, p. 98). Describing the victim of child abuse, Herman (1992) describes how the child has to develop a sense of self in relation to others who are helpless, uncaring, or cruel. In order to survive, the child has to forget, minimize, rationalize and excuse. “Unable to escape or alter the unbearable reality, the child alters it in her mind” (p. 102). When it is impossible to avoid the reality of the abuse, the child has to construct its meaning so as to justify it. Self-blame often happens to the victim of child abuse and it persists into adult life. Because of this sense of inner badness, the child tries to be good all the time. “She may become an empathic caretaker for her parents, an efficient housekeeper, an academic achiever, a model of social conformity” (p.105).
The survivor of child abuse will be left with fundamental problems in basic trust, autonomy, and initiative (Herman, 1992). The effect of psychological trauma on individuals may be a shattered belief system; disempowerment; feelings of helplessness and dehumanization; loosened grasp of reality; mind/body alienation; disturbed sleep; acute attacks of fear; inability to engage in pre-trauma relationships and lifestyle; inability to trust or to feel safe (Smyth, 2002).

According to an influential study by Herman (1992), the core experiences of trauma are disempowerment and disconnection from others. Restoring empowerment and creating connections are only possible through building a healing relationship between the therapist and client. After building this relationship, the stages of recovery may unfold. The first stage is establishment of a victim’s safety (taking the victim out of the abusive environment); the second stage is remembering and mourning in which the victims revisit their trauma and reconstruct their stories; and the last stage is reconnection in which they are ready to develop a new self so that they can live their lives with the hope of not reliving the past.

Concluding this section, I quote Tavris (1992) who warns us about the limitations of psychotherapy for trauma patients which only focuses on a patient’s intra-psychic problems and excludes the socio-historical context.

Such stories soothe women temporarily while allowing the perpetrators to go free. Indeed, they allow the whole system to go free: a system that rests on the neglect of children, the blame of mothers, and the entitlements of men who
commit the abuse. That’s why society likes these stories so much. Nothing changes. (p.329)

Music Psychotherapy and Trauma

According to Bruscia (1998), there are four levels of music psychotherapy, ranging in a continuum from exclusively musical to exclusively verbal. These are music as psychotherapy, music-centered psychotherapy, music in psychotherapy and verbal psychotherapy with music. The form of music therapy I practiced was music in psychotherapy, in which “the therapeutic issue is accessed, worked through, and resolved through both musical and verbal experiences” (Bruscia, 1998, p. 3).

The musical interventions which are used in music psychotherapy can be largely categorized into improvisation, songs, and music and imagery (Bruscia, 1998). Improvisation is a way of spontaneous music making with voice and/or instruments. In the context of improvisation, “nothing could be right or wrong, but equally anything could happen” (Ansdell, 1995, p. 25). Their instrumental choices and musical expression give information about the clients, and the therapist can use improvisation to support or challenge, and as a means of self-exploration. In music psychotherapy, improvisation serves to intensify, elaborate, or stimulate verbal communication, whereas verbal communication serves to define, consolidate, and clarify the musical improvisation (Bruscia, 1987, 1998).

“Songs weave tales of our joys and sorrows, they reveal our innermost secrets, and they express our hopes and disappointments, our fears and triumphs. They are our
musical diaries, our life stories” (Bruscia, 1998, p. 9). Songs provide easy access to a person’s emotions, thoughts and memories. Songs can effectively facilitate the therapeutic process and provide a safe distance, a non-threatening way of addressing distressing problems. Also, the underlying structures of popular music with their stable and consistent rhythms, frame their exploration with a secure beginning, middle, and end (Hammel, 1995).

"Music and imagery" refers to experiences that the clients imagine while they are listening to music (Bruscia, 1998). This approach can be used to relax the clients and/or to explore their unconscious material. In order to induce relaxation, the therapist plays soothing music and has the client breathe with the music and/or uses relaxation techniques such as tension and release. In order to explore unconscious material, the therapist asks the client to image while he/she listens to music and by talking about the image he/she had, the therapist can help the client to understand the images symbolically, as a psychotherapist interprets a dream with his/her clients.

Bruscia (1998) discusses two primary aims of music psychotherapy. The first is to bring into the client’s present consciousness material from the past that has been repressed and kept in the unconscious but continues to have adverse psychological effects. The second aim is to work through that material by using transference and countertransference to engage the client in corrective emotional experiences (Austin, 2003; Bruscia, 1998).

There are an increasing number of music therapists who work with trauma clients. Music therapy has an important role to play in offering a diversity of paths to
integration and potential resolution to those who have been traumatized. The expressive nature of music can facilitate expression of difficult emotions, and music can help break the silence of isolation (Smyth, 2002).

Using the concept of the music child (Nordoff & Robbins, 1977), Pavlicevic (2002) stresses a focus on the whole child/music child when the music therapist works with traumatized children. According to her, by focusing our therapeutic work exclusively on children’s trauma, we risk fitting a multidimensional, complex child into a small space called the traumatized child. “Whilst not denying the crisis that children may be experiencing, making music spontaneously with a music therapist offers the opportunity to be heard and known as whole - managing and evoking the difficult, frightening, playful and creative feelings and tapping into the child’s own potential for healing” (Pavlicevic, 2002, p. 112).

Moreover, she stresses the importance of improvisation when we work with traumatized children in music therapy. According to her, improvisation offers an opportunity for spontaneity through a creative process that is not a solitary one, but happens with the music therapist. Therefore, the spontaneous music-making process with the therapist helps the traumatized client engage, respond and imagine by offering an opportunity to recreate and re-image life (Pavlicevic, 2002).

Working with a diverse trauma population and developing her own “vocal holding technique”, Austin (1991, 1998, 2002, 2003) emphasizes giving trauma a voice. She says that “the traumatized person often survives by forfeiting her own voice” (Austin, 2002, p.234) and therefore the structure inherent in songs and present
in vocal improvisation can shore up a weak inner structure in the psyche and help contain strong emotions, thus making it safer to express them. Further, she states:

The act of singing is empowering: sensing the life force flowing through the body; feelings one’s strength in the ability to produce strong and prolonged tones; experiencing one’s creativity in the process of making something beautiful; having the ability to move oneself and others; and hearing one’s own voice mirroring back the undeniable confirmation of existence. Owning one’s voice is owning one’s authority and ending a cycle of victimization.

(p. 236)

Music therapists who work with traumatized people use various music therapy techniques to help their clients. Hammel (1995) used songs with the victims of childhood sexual abuse as a stimulus to gain access to memories, a means of gaining insight and validation, a vehicle to recognize feelings, a way to disclose feelings and experiences, a method of building confidence and a direct expression of feelings. Volkman (1993), who followed Herman’s model (Herman, 1992), uses improvisation through the three stages of recovery—safety, remembering and mourning, and reconnection. While improvising, she used the ‘holding technique’ and ‘splitting technique’ initiated by Mary Priestley (Priestley, 1994). Using Guided Imagery and Music (GIM) techniques with trauma patients, Blake and Bishop (1994) show that the GIM process allows access to unconscious feelings, images and
memories. In addition, it fosters empowerment and reconnection through self-understanding and alliance with the therapist.

Most of the music therapy literature on trauma has been confined to sexual abuse clients in psychiatric hospitals and focuses on trauma patients’ symptoms and attempts to remove them. However, recently there has been increasing awareness of expanding the realm of trauma and connecting the trauma with the clients’ socio-cultural context in music therapy literature. Austin (2003) expresses the need to expand the music therapy area to normal neurotic adults who are traumatized. Stewart and Stewart (2002) address the trauma of early abandonment and deprivation in their psychodynamic music therapy. Dixon (2002) proposes that the victims of political violence can benefit from music therapy because political violence requires a denial or destruction of an individual’s humanity and music-making reaches out to the essential humanity of people. Connecting music therapy and the political situation in Northern Ireland, Smyth (2002) claims that central to the process of healing is the rediscovery and re-establishment of the creativity of the victim. He says creativity is resistance to oppression and creating something new is an act of defiance in the face of destruction. Moreover, he declares that the healing is not a neutral professional act and there should be means of communal and societal level support.

Music, as the primary medium of the therapy, has much to offer the victims of trauma because:

... music is a universal experience in the sense that all can share in it; its fundamental elements of melody, harmony and rhythm appeal to and engage
their related psychic functions in each one of us. Music is also universal in that its message, the content of its expression, can encompass all heights and depths of human experience, all shades of feeling. (Nordoff & Robbins, 1971, p. 15)

Feminist Research Paradigm

The focus of this study is the experiences of Korean women in relation to son preference as these experiences emerged in music psychotherapy sessions. Because of the nature of the experiences under study, it was important to choose an appropriate approach to the research. Ideally, such an approach would facilitate presentation and exploration of such experiences, while acknowledging the value of such a study. A feminist research paradigm fulfills both these requirements and was deemed an appropriate research tool.

Over the past two decades, feminist researchers have criticized traditional social science models for uncritically reflecting not only the values of individual scientists, but also those of the political and cultural milieu. They also assert the belief that there are no universal, ahistorical laws of human behavior, but only descriptions of “how people act in certain places at certain times in history” (Riger, 1998, p.34). Issues that are important to women’s lives in the private realm, such as marital rape, the experience of being a mother, violence, and incest, have been ignored or not defined as issues of importance to research. This is because researchers--mainly males--decided what questions are important and what social phenomena should be
defined and studied. Women's lives, experiences, ideas and needs have been absent from social science research because we live in a world which values male knowledge and perspective and defines it as being objective truth (Brayton, 1997).

Also, there has been a question raised regarding the validity of research. For example, a great many studies have included only male subjects but their conclusions are generalized to all (Riger, 1998). Feminists argued that traditional science "neglects and distorts the study of women in a systematic bias in favor of men" (Riger, 1998, p. 35), and such research promotes the existing inequity between men and women. Therefore, in feminist research, issues that are important to women become the starting point for doing research. The questions women have about the world and areas they experience as problematic become issues to be addressed by feminist research (Brayton, 1997).

In the research, feminists have used all pre-existing methods and have also invented different approaches to studying women as well (Martin, 1998; Reinharz, 1992; Tavris, 1992). In one of these approaches, which is classified as feminist empiricism, the researchers identified the major problem of past research as researcher's gender bias. Therefore, they tried to establish rigorous scientific methods and minimize the influence of the values of the researcher. They believed that a truly neutral science would produce unbiased knowledge - the truth. Feminist empiricism contributed to supporting sex similarities as well as sex differences (Riger, 1998). However, continuing identification of numerous instances of androcentric bias in research has led some to conclude that value-free research is impossible, even if it is
done by those of good faith (Riger, 1998). Technical safeguards cannot completely rule out the influence of values; scientific rigor in testing hypotheses cannot eliminate bias in theories or in the selection of problems for inquiry (Harding, 1986, 1991). Therefore, critics assert that “traditional methods do not reveal reality, but rather act as constraints that limit our understanding of women’s experiences” (Riger, 1998, p.39)

Another approach reflects long-standing feminist criticisms of the absence of women in research accounts. Feminist standpoint research stresses a particular view that builds on and from women’s experiences (Harding, 1987; Olsen, 1994). In contrast to feminist empiricism, epistemologically, the feminist standpoint claims that “the participants, not researchers, are considered the experts at making sense of their world” (Riger, p. 40). In feminist standpoint research, by giving a voice to women’s perspectives, a researcher can find the multifocal nature of reality, and identify the ways in which women create meaning and experience life from their particular position in the social hierarchy (Gilligan, 1979, 1995; Riger, 1998).

Critics from feminist standpoint research argue that the researcher should include the actual voices and reflections of the particular participants (Reinharz, 1992). Stressing a commonality to all women’s experience glosses over differences among women of various racial and ethnic groups and social classes (Olsen, 1994; Riger, 1998). However, feminist standpoint research contributed to the growth of rich and valuable portrayals of women’s experience (Riger, 1998).
supported gender difference and showed that difference does not mean inferiority (Tavris, 1992).

Another approach that has developed is postmodern feminist research. “Postmodern feminist researchers regard truth as a destructive illusion” (Olsen, 1994, p. 164). They claim that although language is a medium of expressing our understanding of experience, it is not a neutral reflection of that experience because our linguistic categories are not neutral (Riger, 1998). According to Riger (1998), the central question in postmodernism is not how well our theories fit the facts, or how well the facts produced by research fit what is real. Rather, the question is which values and social institutions are favored by each of multiple versions of reality. In contrast to feminist empiricism, postmodern feminist research no longer asks whether sex or gender differences exist. Given the impossibility of settling these questions, postmodernism shifts the emphasis to the question of difference itself:

What do we make of gender difference? What do they mean? Why are there so many? Why are there so few? Perhaps we should be asking: What is the point of differences? What lies beyond difference? Difference aside, what else is gender? The overarching question is choice of question. (Hare-Mustin & Maracek, 1990, pp. 1-2)

According to Tavris (1992), the consequence of emphasizing difference is to support the status quo. On the other hand, the tendency to minimize differences justifies women’s access to educational and job opportunities, but it simultaneously
overlooks the fact that equal treatment is not always equitable because of differences in men’s and women’s position in a social hierarchy (Riger, 1998; Tavris, 1992). Overall, postmodern feminism demonstrates that “power, not truth, determines which version of reality will prevail” (Riger, 1998, p. 45).

Despite their apparent differences, approaches to feminist research have important commonalities. Brayton (1997) identifies common elements in feminist research, regardless of research method. First, the traditionally unequal power relationship between the researcher and the subject is restructured to validate the perspective of the participant. Second, feminist research has a commitment to working towards societal change. Thus, feminist research is not research about women but research for women to be used in transforming the sexist society. Last, feminist research takes women’s situations, concerns, experiences and perspectives as the basis for research. Issues that are important to women become the starting point for doing research. Taking the standpoints of women as the grounding for research means attending to how women construct and articulate their experiences in their own words; the essential meaning of women’s meanings can be grasped only by listening to the women themselves.

Although there is an argument over whether there should be a feminist methodology Klein (1983) insists on the value of a feminist methodology, saying that “feminists need to be very clear about how we want our research to differ from patriarchal scholarship and to that end we have to think about how we are going to do what we want to do” (p. 88). According to her, theory and methodology are closely
interrelated in a dialectical relationship. In this way both the theory and methodology of feminist scholarship might avoid the fate of becoming static, rigid and dogmatic. In the feminist research paradigm, conscious subjectivity replaces the value-free objectivity of traditional research (Klein, 1983). The subjective experience of each of the participants as well as the researcher is validated and acknowledged. Also, using intersubjectivity, the researcher needs to compare her work with her own experiences as a woman and a researcher, and to share it with the participants constantly (Klein, 1983).

Harding (1987) discusses the importance of positioning by the researcher. According to her, the researcher is located in the same critical plane as the subject. Moreover, class, race, culture, gender, belief, and assumptions of the researcher provide important and real information. The articulation of the researcher’s unique relationship to the research not only identifies the limitations of the research, but also can strengthen the quality of the findings. Harding says that “if one begins inquiry with what appears problematic from the perspective of women’s experiences, one is led to design research for women … Traditional social research has been for men” (p. 9).

There are a wide range of methods available to feminist researchers. According to Brayton (1997), by attending to the context of the situation as central, feminist researchers can choose methods that will best represent women’s situations and experiences. Situations should guide methodological choices, instead of trusting in a single method as appropriate for every context and situation.
Recognizing the impact of decisions and choices as part of the feminist research process is important in feminist research. The process of doing research involves a long series of choices and decisions. Although feminist beliefs and concerns will help guide and direct the decision making process, one should be aware that outside forces also can play a key role in the research process (Brayton, 1997).

Feminist research is about multiple, subjective and partial truths (Harding, 1987; Klein, 1983). Therefore, feminist research cannot claim to speak for all women, but can provide new knowledge grounded in the realities of women's experiences and actively enact structural changes in the social world (Brayton, 1997).
Feminist Perspective and Naturalistic Inquiry

In this study, I employed two complementary forms of research. The theoretical framework for my research is feminist research. The methodological framework for implementing the study and gathering and analyzing data is informed by naturalistic inquiry.

Feminist research is truly and completely feminist when feminist beliefs and concerns act as the guiding framework to the research process. The research question of this study arose from my own experience. As a Korean woman, I experienced son preference, which stems from the cultural norm of a strong patriarchal Korean society. Also, because I knew the negative effect of son preference from my own experience as a client and a therapist, I do not want to limit the scope of my study to exploring the nature of son preference in Korean women. Instead, I want to expand the understanding of son preference and raise people's consciousness so that we can prevent future harm together. Therefore, my study aims to be for women, and not merely about women. It aims at social change in general and greater gender equality in particular (Harding, 1987, 1991).

In doing feminist research, I want to give a voice to Korean women to speak up about their experiences as victims in a patriarchal Korean community. By letting
people hear these women’s stories of trauma and healing, I want to alert the public so that, as Klein (1983) delineated, the outcome of this investigation will go beyond a mere academic report. It will also offer suggestions for changes in the lives of these and other women.

In choosing this research framework as a means of capturing women’s experiences, feminist researchers need to be flexible in terms of method and methodology (Klein, 1983; Harding, 1987). Therefore, throughout the research process, from data gathering and analysis to writing, I used a wide range of qualitative research methods informed by naturalistic inquiry.

In my effort to gain information, I chose to study a music psychotherapy group with Korean women who had experienced son preference. This became a relatively natural context, where participants could respond and interact spontaneously. Such a context offered the possibility of obtaining more in-depth, multi-layered information than could be gathered in a controlled research setting (Bogdan & Biken, 1998; Ely et al., 1991).

In the study, I was in the dual role of both researcher and therapist which will be described in depth in chapter VIII. Although there are trustworthiness issues around this dual role, I found that if I could self-examine continuously and rigorously, this dual role would allow me to see things that outside researchers cannot see.
Finding and Selecting Participants

In order to gather the most fruitful information from the participants of this study, I used “purposive sampling” (Lincoln & Guba, 1985, p.40). According to Lincoln and Guba (1985), purposive sampling allows the researcher to select participants that will “increase the scope or range of data exposed … as well as the likelihood that the full array of multiple realities will be uncovered” (p. 40).

Because the focus of my study is to describe the experience of Korean women in relation to son preference, the criteria for selecting the participants was that they be Korean women who identify themselves as victims of son preference and volunteer to participate in the study. Since I wanted to discover different aspects, multi-layered meanings of experienced son preference, I was open to all Korean women over 18 who represent themselves as victims of son preference regardless of their marital status, socio-economic status, or the degree of their suffering. Being open to all the possibilities, I let myself be guided by the women.

In order to gather the participants, I posted my flyers to Korean churches and Korean Community Centers in the New York metropolitan area so that women who were interested in my study could contact me. It took months to gather eight participants for the study. Because finding a time which worked for all of the prospective group members was very difficult, time availability became the key factor in participant selection.

The participants ranged in age from their mid 20 to their late 50s. All the participants were born in Korea and came to the U.S. later in their lives for
various reasons such as education, immigration, and business. Two of them were never married, one was divorced, and the rest were married with children. Some were students, others worked part or full time, while others were homemakers. All the participants were Christian. Some participants had previous experience in therapy while others had none. Two group members had experience leading a therapeutic group at their church. None of the participants had experienced music therapy and they were all very curious about it.

There are a couple of reasons why I wanted to study a group instead of individuals. Since the core results of psychological trauma are disempowerment and disconnection from others, recovery is based on the empowerment of the survivor and the creation of new connections (Herman, 1992). Prozan (1992) delineates the importance of commentary and community approval that group therapy can provide and states that this kind of modality is especially important for populations such as “women and minorities, who are belittled and denied success in the larger society except in certain traditional roles” (p.154). I hoped that the members of the therapy group I studied would be able to come out of their isolation, make connections, and support each other.

In my own experience as a therapist, I have found that the size of a group is very important. According to Mackenzie (1997), if the goal is to use the interactions between members as a major therapeutic focus, a group size of five to ten members is ideal. My group needed to be small enough so that all members had time for in-depth sharing and exploring. The group also would be making
music together, and this was a consideration in determining size. I thought a small group format consisting of six participants would be optimal.

Data Gathering and Analysis

The music therapy group sessions were one of the main sources of data for the study. I conducted an hour and a half long music therapy session for twelve consecutive weeks. Short-term psychotherapy has been presented as a cost-effective and clinically sound alternative to psychoanalysis or longer term psychotherapy (Cornett, 1991). For effective short-term group therapy, the range is 12 to 15 sessions of 45 to 90 minutes duration on a weekly basis (Klein, 1993). The limited time element can accelerate the pace of therapeutic work and a time limit prevents long term dependence (Klein, 1993). It is often the case that music can bypass client resistance and reach directly to the root of an area where the central issue lies, thereby intensifying the therapeutic process and shortening the length of time consumed. This supports the 12 week short-term group music therapy research design. Weekly sessions allow time for the women to reflect on their experience in the group and practice what they have learned from the group.

Originally there were eight participants but two of them left the group after attending three sessions because of personal matters. One had to return to Korea and the other had ongoing health problems. Among the six participants, two attended regularly and came on time; two attended relatively regularly but were often late; and the last two attended only half of the sessions and were often
late. Frequent absence and lateness affected the group dynamic and the overall data gathering process. Therefore, much of the data was derived from the four participants who participated regularly.

All the sessions were audio-taped and transcribed. In addition, all the participants were asked to write journals which reflected their feelings or thoughts after each session and share them with the researcher. However, a few of them wrote only a couple of times and the rest of them either never wrote or never shared. At the last session, five participants attended and evaluated the group. The sources of data that resulted from the sessions were audio-recordings, transcripts, session notes, analytic memos and the participants’ journals.

Data collection and analysis began and proceeded simultaneously with the clinical treatment. This data collection and analysis is "highly transactional, each activity shedding new light on and enriching the other" (Ely, et al., 1997, p. 165). After each session, I sat down and listened to the tape and transcribed the session. I also wrote a detailed description of what was happening during the group’s musical interludes. Information recorded here included, for example, who played what instrument, how the participants played, and who was playing with whom. I also noted the body expression of the various members as well as the quality, dynamic, tempo of the music. There were times that I couldn't transcribe the same day but I always made sure that I finished the transcript of the session before the next session and started analyzing it. This process gave me a perspective on the next session and affected my interventions in the group, leaving me lots of space.
to anticipate and at the same time be surprised. It also helped me refine my research questions. As Wolcott (2001) delineates, the writing process begins before the first data are collected and continues throughout the research process to bring new analytic insights.

Since data analysis in qualitative inquiry is an ongoing and recursive process (Ely et al., 1991), throughout the collecting and analyzing of data, I wrote analytic memos on developing ideas, impressions, interpretations and hunches, noting emerging questions and areas that needed further attention. All my sources of data - audio tapes, session transcripts, session notes, and analytic memos and the participants' journals - became bases for further exploration.

After finishing the treatment and all the transcripts, I began reading all the data repeatedly, adding new ideas, and listening to the audio tape whenever I felt that there was a gap between what I understood and what I encountered. I soon began to code and categorize these emerging materials and findings. After the process of identifying initial categories, I started the process of developing themes. Data continued to be coded and categorized into themes until they started repeating themselves (Bogdan & Biken, 1992, Ely et al., 1991). Ely et al. say "a theme can be defined as a statement of meaning that runs through all or most of the pertinent data, or one in the minority that carries heavy emotional or factual impact" (p.150). Reading and re-reading the data and adding new ideas, I started identifying larger categories that would encompass and organize the specific coded information. Then, I selected verbatim narratives from the transcripts and
placed them in the categories accordingly so that I could feel the close sense of
the participants' experience and play with them before I presented the data.

Then, I went back to my initial research questions and gathered the group
of categories which related to the questions. I read, re-read, and analyzed, making
connections to the categories, while being open to surprises, until I reached a level
of synthesis and meaning that felt satisfying to me.

After termination, there were some participants who wanted to continue
with their explorations and I referred them to music psychotherapists who practice
a similar approach to mine so that they could continue their self-exploration and
get the support they needed.

Presentation of the Data and Findings

Since this study is designed to capture Korean women's lived experience
of son preference, I utilized multiple forms of presentation in order to convey the
essence of my understanding and interpretation of the participants' experience.
First of all, I tried to utilize the participants' voices as much as possible. Therefore,
in chapter IV and V, where I present the findings of the participants' experience of
son preference in the past and present, I use many direct quotes from the
participants. Although I am the researcher and major story teller using my
understandings and interpretations of the data, I think it is important that each
woman has her own voice in my story, so that their voices come alive with a
vibrancy that conveys the intensity of their experience of son preference. Ely at al.
(1997) say "narrative is a method of inquiry and a way of knowing - a discovery and analysis just as scientism and quantitative research have methods and ways" (p. 64). The telling of her story represents each participant's particular version of reality. By using the participants' own words, their own stories, I hope the reader participates vicariously.

I also used theme statements in order to guide the reader into the topic that I wanted to present. Ely et al. (1997) say “whether or not they are ultimately consolidated, whether they are finally presented in the form of theme statements at all, we do consider a thematic analysis to be a powerful aid in striving to see the essence of our data” (p.211). In my presentation, I used theme statements to express some of the essence of the shared experiences of the participants. Some of these statements were developed from the majority of the participants, while others originated from one or two of them. I made special use of theme statements in Chapters IV-VII, where I presented my findings. In these chapters, a theme statement serves as the title of each category to be discussed. This is done with the hope that these theme statements will enable the reader to connect more directly with the participants as I have come to understand them.

I used my own detailed description of the situation in order to illustrate the participants' music playing and following discussions. This can help the reader to access the essence or summary of what happened easily. However, I cannot deny that my description of the situation represents what I saw and heard as well as what I wanted to see and hear. Throughout this paper, I wove my “value-bound”
(Lincoln & Guba, 1985) voice and interpretations in order to show what I think needs to be further addressed in the field of music therapy and other related fields.

**Trustworthiness**

For the researcher studying her own clinical work, establishing trustworthiness is very important. Lincoln and Guba (1985) define four criteria for achieving trustworthiness: credibility, transferability, dependability and confirmability. They suggest prolonged engagement with and persistent observation of the research participants and the phenomenon under study. Prolonged engagement and persistent observation provide the scope and depth that contribute to the study’s trustworthiness.

In order to ensure the trustworthiness of my work, I first continuously scrutinized myself in my personal psychoanalysis throughout the research process in order not to impose my issues on my clients/participants. Also, I was supervised during the period of the music therapy group with Korean women to help monitor my countertransference reactions.

Checking data obtained by various methods is another way of ensuring trustworthiness. I tried to verify the accuracy of my findings by studying, comparing and contrasting session notes with audiotapes of the session, transcripts, and other contents of my log such as analytic memos and observer comments.
Member checking (Lincoln & Guba, 1985) with the research participants is another important technique for establishing the credibility of the findings. The nature of music psychotherapy is such that eliciting and sharing feedback with the client is natural. Therefore, throughout the study, I gained information that enabled me to verify my impressions and hunches and also gain insight into the effectiveness of interventions (Austin, 2003). And I tried to be open to the participants' perspectives and incorporate their opinions into subsequent sessions. Moreover, in the last session, we had an evaluation of the group. I asked open-ended questions to the participants about their overall experience of the group in terms of topic, group experience, music therapy experience, therapist's role, and how this group experience met their expectations. All these worked as informal member checking.

Regular meetings with my doctoral research support group, which consists of Korean music therapists and psychotherapists, helped me throughout the entire process of research. As Lincoln and Guba (1985) mentioned, in peer debriefing, the researcher meets with a peer in a manner paralleling an analytic session to establish research credibility. This peer is free to pose questions regarding methodological, ethical or any other aspects of the study. This led me into the process of “exploring aspects of the inquiry that might otherwise remain only implicit within the inquirer’s mind” (p. 308).

Because this is a study with Korean women, all the transcripts were written in Korean. In order to assure the trustworthiness of the analysis, I showed
a bilingual Korean/English speaker translated parts of transcripts that I directly quoted or paraphrased into English. In this way, I tried to convey the experience of the participants to the readers as closely as I could.

Researcher's Stance

I am a victim of son preference. Throughout my life I struggled with the feeling that I was not important and was not worthy of taking other people's attention and time. Having majored in politics in my undergraduate degree in Korea, I was aware of many injustices in our society. While studying Marxism, I was able to see the world through the eyes of the proletariat and as a result became a politically active student. With my colleagues, I organized and participated in student demonstrations allied with the labor union and we fought for democracy, labor liberation, gender equity and unification of our divided country. Although there were actual external conditions that made me angry, it did not take long before I realized that I was projecting my own anger onto our society.

After graduating from college, I decided to study music therapy. I was a musician my whole life and I was always curious about why people behaved, thought, and felt a certain way. Also, from my own experience, I knew the power of music could influence people's emotions. Music therapy seemed my destiny at that point. From the beginning of my study at NYU, I was interested in traumatized populations because I found so many things in common with the
victims of trauma. I could understand and empathize with them very well. Although there were times that I identified with my clients so much that I imposed my own issues on them, with the help of my therapist and supervisors, I was able to help my clients while working through my own trauma.

Now, I am a music psychotherapist with ten years of experience, and a psychoanalyst in training. I am a married mother of two daughters. I am a woman who is constantly struggling to balance my professional life with being a good wife and a nurturing mother, which seems to be very difficult.

I identify myself as a feminist and I believe that there exists gender inequity in Korean society. Many women experience discrimination simply because they were born female. By collecting women’s experiences of discrimination and letting the public know about these, I believe that we can raise people’s consciousness and facilitate social change toward more gender equity in the long run.

Also, I believe that psychotherapy has a ripple effect. If a woman experiences herself differently and can make a different form of connection with the therapist and/or the therapy group members, she can extend this experience into her personal life and slowly have a positive impact on other people who make contact with her.

I am aware that how I understand and interpret the participants’ experiences will likely be influenced by all of my subjective life experiences and beliefs. However, feminist research denies the neutrality of the researcher and
highly encourages the researcher's subjectivity in order to capture women's experience (Harding, 1987, 1991; Klein, 1983). Therefore, I consciously used my subjective experience, as a woman who is married with daughters in this gendered society and as a victim of son preference, as an instrument of data gathering and analysis.

Moreover, I believe that the therapist influences the clients and that the clients influence the therapist. Similarly, the researcher influences the participants and the participants influence the researcher. Therefore, intersubjectivity will play an important role in the process of my therapy and research. Using the ideas of intersubjectivity, I will constantly compare my work with my own experience as a woman, a therapist and a researcher.
CHAPTER IV
SON PREFERENCE AS PAST TENSE

In the next two chapters, I will discuss the effects of son preference on the participants' lives, past and present. The following categories were established from the descriptions of the participants' experience of son preference in the past. Most of these themes were shared widely among the participants. However, I also included themes that were only shared by one or two participants as well because I thought they were significant. Using verbatim narratives from the participants, I tried to convey their experience of son preference as closely as possible to the readers and I tried to construct meaning out of what they said. I did not identify the individual narrators by name because although each participant's experience of son preference was unique and valuable, it also reflected the collective experiences of the other participants.

In what follows the verbatim statements of the participants will be presented in italics.

My Mother's Name is Two Sons

In a society where son preference prevails, there is less room for a daughter's existence. The daughter's existence is either denied or acknowledged only as a being that can ensure sons. One of the participants said,
My mother’s name is DuNam (two sons), meaning the second person who wishes for a son. In her name, there is no sense of her existence as her own being. All she does is wish for boys. MalSoon, MalJa (both meaning no more daughters). These names define a girl as a being who exists only for (her unborn) little brother. I now feel like my mom lived her life like an orphan. Through her own family, she erased her own sense of being and never lived a life as a being in her own right.

This is a familiar story to Korean people. In the past, many daughters were named as SunNam (before son), HuNam (after son), GuiNam (valuable son), and KKeutSoon (no more daughters) etc. Many parents felt that their sons were necessary and important, but daughters were not (Kim, 2001; Lee 1998; Yoon, 1999). Under this circumstance, daughters were denied by their own parents and got the message that they were not important to their families. They were useless, and inferior to sons. Nowadays parents have become more tactful and don’t name their daughters in such an obvious way. Rather they give their daughters nick names that represent their wish for a son, such as KKokJi (no more daughters). However, this deep rooted parental attitude still can affect their daughters’ self-esteem negatively.

In another case, a family totally erased a daughter's identity as a girl and raised her as a son with the belief that if they raise a daughter as a son, it would ensure that they have a son. One of the participants reported,
I have a picture of myself, very young, wearing a boy's outfit, having my hair shaved and sitting on a toy car. It was such a shock to me. I asked my mom why I had a boy's appearance but my mom didn't answer me then.

When I was in sixth grade, I went to celebrate my grandfather's sixtieth birthday party and heard women neighbors talking about me. "Oh, that is a girl who was raised as a boy. She still has a boy's face." I found out that until my little brother was born, I was raised as a boy, given boy's outfits and boy's toys in the wish for a son. When my brother was born, I was released from that but still it remains as a wound.

Another participant felt that her gender identity was not really respected by her parents.

My mom was only concerned about my older brother. All his clothes were given to me when I was little including his underwear (hysterically laughs but tears are welling up in her eyes), even all worn out ones too. I felt ashamed of myself wearing a boy's outfit all the time. I really wanted to wear pretty dresses. I begged my mom to buy me a pretty dress like other girls but she never listened to me. Mom never had empathy toward me. She was always on his side and that made me mad. This pattern is still going on. All the people say that my brother is such a good boy and they don't understand why I hate him so much.
Parents don't put girl's clothes on boys. People in Korea say that if you put girl's clothes on boys, their penises will fall off. However, it seems like they feel comfortable putting boy's clothes on girls, either as an indication of their wish for a boy or merely for convenience. In the case of this participant, her frustration over her mother's insensitivity toward her growing awareness of gender identification was compounded by her mother's preference for her brother.

Gender identity plays an important role in the early years. Children make sense out of the world by figuring out where they belong and what is expected of them. She knew that she was a girl and that she was expected to behave as a girl. She was demanding that her parents recognize and respect her gender and her difference. But this basic need was frustrated by her mother. Her frustration accumulated over time and she became angry at her brother and parents. In her view, everything has been so easy for her brother but not for her. She became a fighter. In her mind, unless she claims her own rights, unless she fights for herself, nobody will recognize her needs. In this process, people don't hear that beneath an angry attack there is the voice of a little girl who was hurt. They only hear an angry, mean woman's voice. Now she is accused of being difficult and aggressive and this misunderstanding of her makes her more angry at her family. This becomes a vicious circle.
My Mom Wanted to Abort Me

I heard from my mom that she didn't want me. She told me that a long time ago in a passing manner. She said "as a matter of fact, I wanted to abort you because there is only a one year gap between your brother and you." I was not the one who was planned. I didn't feel sad or anything then but when I talk about this with my friends nowadays my friends seem to be very upset and ask how mom could say such a thing to her own daughter. As a grown up, whenever I think about it, it hurts. And I think to myself. See? I wasn't the one who they meant to be born.

There were two participants whose mothers told them that they were unwanted children and therefore they wanted to abort them. Coincidentally, each of them was the youngest child in the family. In the literature review, I mentioned female feticide and how this ratio increases with birth order (Lee, 1998; Yoon, 1999). Although these participants' mothers did not say that they wanted to abort their daughters only because of their gender, hearing that they were unwanted children had a very significant effect on their lives.

One participant hated her brother, whose birth was welcomed by her family. She became a perfectionist and she called herself a workaholic. When we had an individual session due to the absence of the other members, we were able to focus on her issue. In that session we talked about her feelings of pressure and tightness in her body. She said that she couldn't relax because relaxation means no
structure, no improvement, going backward, and not being productive. If she was not being productive, that means she was meaningless. She said that "meaningless means that I don't have any reason to live." Then she recalled her mom's saying that she wanted to abort her. She was meaningless to her mom. In her mind, she needed to be perfect in order not to be abandoned by her mom. Whenever she felt that she was not perfect, her anxiety about being abandoned increased.

She was very clingy to her mom when she was little. She couldn't fall asleep without touching her mom. And this was aggravated by her mom's actual disappearance from home a couple of times a year due to arguments with her father.

Since she felt that she was meaningless to her mom, she needed to prove herself all the time by being a people pleaser. She was an entertainer at home and often wanted to be reassured of her existence by her mom. She kept saying to her mom "what a loss it could have been, if you had aborted me." She also tried to reassure herself by telling herself that "yes, if I weren't born, my family would be as dead as a grave."

She continued,

*I always tried to please adults. I was always cleaning, doing laundry, cooking and bringing coffee and tea when there were guests at home. I was so good at those kinds of things even before I was in kindergarten. Then adults would praise me and say I was adorable. How could such a*
little girl do these things? These compliments meant so much to me and they fed me and gave me the purpose of my life.

Since she tried to find the meaning of her existence in the approval of others, she was fearful of being rejected. She said,

*I am so fearful about being rejected. It seems like I am not the owner of my life. I have always been swayed by other people. When other people say no to me, it means I am dead. I am abandoned.*

Because she was so afraid of being rejected, she needed to prevent future rejection by being a "yes" woman. She said "*it's very hard to say no. If I say no, that means that they might say no to me, too.*" She often felt that people were insensitive and she felt exploited by others. This made her mistrust others and feel lonely.

**I Always Waited for My Real Mom to Rescue Me**

Many participants shared their childhood fantasy about their "real moms". They felt that they were not loved by their own mothers but they didn't know why. In the process of making sense out of their experience, they came up with an idea of 'real mom'.

*I have three older brothers and one older sister. My mom poured all her effort into caring about my brothers, and my dad loved my sister. ... I don't*
have many childhood memories, but one thing that I remember is that I thought my mom was not my real mom.

I used to wait for my real mom, too. I was convinced that my mom was not really my mom and my real mom would come and take me someday. I imagined my real mom would be rich, and nice to me.

The participants shared why they were convinced that their moms were not real moms when they were little. The followings are stories of being hated or misunderstood by their own mothers, which led them to believe that they were not biologically related.

*When my father leaves for his business trip and I sleep with my mom, I hear some noises. When I open my eyes, still pretending to sleep, my mom is tearing apart my clothes, which were a present from my father, and cursing. My mom still hates me. Maybe my mom was jealous of me because I was getting attention from my father which she couldn’t get. My mom always blamed me and scolded me when I had a fight with my brother. She never tried to listen to me and didn’t want to understand the situation. "It's you, you are wrong."*
I had long hair and one morning I complained that it hurt when she combed my hair. Then the next day, all my hair was gone. My mom shaved my hair.

My mom didn't love me because I was not pretty enough and I had a darker complexion. Also she said my personality didn't go well with hers. Also she hated me because my toes were just like my father's.

What is forgiveness? If I understand someone, that means I can forgive them? My mom took things from me and gave them to my cousin. She took the best things that I had and gave them to other people. I understand that she wanted to be recognized and accepted by other people. But why did she have to exploit her own child in order to please other people? Although I understand her motivation, I can't forgive her.

My mom used to have me naked in front of my brothers and kicked me out of the house when I was little. I felt terribly ashamed of myself and totally exposed to the strangers outside. But now when I reflect back, how could a little kid possibly do something so terrible as to deserve such punishment?

They had been waiting for their real moms to rescue them from their evil step mothers but sadly it didn't happen.
Discrimination against these girls continued as they grew older. The most visible discrimination against them was over inheritance and education. Two of the participants said that their parents mostly gave their properties to their sons. And there were many cases where their brothers had more education in better schools with the help of parental support.

All the participants agreed that their brothers were more appreciated by their parents and had greater opportunities. Regardless of their age or birth order, girls in the family were expected to be responsible for their brothers' well being.

*When I went to college, I lived with my older brothers. My parents were so glad that they didn't have to worry about my brothers' meals and laundry. I was responsible for all the household chores.*

*Although I am the youngest, people expect me to take care of my brother. When my parents are not around, people keep asking me if I feed my brother well. I am the younger one, so how come I need to do his laundry, cleaning and cooking. My brother never cooked and has always waited for me to cook for him.*

When they complained about the discrimination against them, people paid no attention and it didn't change anything. Since their real moms didn't come to rescue them, they had to accept that happy endings are only for girls who are pretty and good in fairy tales. They had to adjust their lives to the tough reality.
Domestic Violence

More than half of the participants reported that they experienced domestic violence. The causes of the violence in the group were mainly two. One was their fathers cheating on their mothers and the other was their parents' beloved sons being unable to live up to their parents' expectation. One participant, recalling her childhood memory of her parents' arguments which often ended with her father's violence against her mother said,

*My father often cheated on my mom and my mom couldn't stand it.*

*Whenever she sensed that my father slept with other women, she punished him by shaming. But think, what kind of man on earth wouldn't beat his wife if he is humiliated by her?*

*I was scared to death, if I recall. It was soooo scary and soooo frightening.*

*I still remember. Each day when I heard my father's foot step outside of the door, the moment was really frightening.*

Since her parents had a severe fight with each other almost every night in front of her and her younger sisters, anticipating her father coming home was one of the scariest moments for her. She once mentioned that she was very sensitive to all kinds of sounds and it prevented her from concentrating on things. I wondered if her oversensitivity to auditory stimuli had some kind of relationship to her childhood experience.
In the old days, when a wife couldn’t bear a son, this gave her husband all the right to have an extra marital affair in order to have a son and it was encouraged by the husband’s family (Kim, 2004). However, it seems like the extra marital affairs described by these participants don’t fall into that category. It would be more relevant to think of them in terms of a sexual double standard in Korean society.

The traditional male-female double standard continues to dominate sexual roles and sexual behavior across cultures (McCarthy & Bodnar, 2005) and Korea is not an exception. In this culture, men's sexuality is considered as natural and biologically based, therefore unavoidable, while women's sexuality is considered as more emotional and passive (Sweeney, 2007). Although, in fact, there is increasing evidence of more similarities than differences between women and men, including sexual capacities, responses, and values, this attitude still strongly exists (McKarthy & Bodnar, 2005).

Reinforced by the strong authority of the husband that is supported by son preference (Anderson, 1996), a husband's extra-marital affair is considered to be natural and is easily forgiven by Korean society. When a wife struggles against this norm, it becomes problematic. There are three underlying problems. First, when a wife accuses her husband of an extramarital affair, instead of accepting and apologizing for his behavior, the husband tends to defend his behavior as natural and accuses his wife of being narrow minded.
Second, in the sexual double standard culture, while a husband's sexuality is encouraged, a wife's sexuality is suppressed. A husband is considered a sexual being but a wife is considered a nurturing figure for their children, not a sexual being who has her own desires. And in order to fulfill their sexual desires, husbands choose women outside of the marriage (Cho, 1998).

Last, since the husband's authority is very strong in the family, being against a husband's behavior is considered a challenge to his authority, no matter what. In order to keep his position untouchable, he needs to quiet his wife down and in this process violence often occurs.

The narratives of the participants described the violence of sons as well as fathers. What follows are reports of violence caused by their brothers, whose authority is second only to their fathers.

*My brother was a delinquent adolescent. I don't have many memories of childhood and I think it is because of the shock. Sometimes I have flashbacks that my brother cut himself with a knife and his blood was all over the place.*

*My eldest brother, since he was the eldest, my parents expected so many things of him but he couldn't live up to my parents' expectation. After my father passed away, he had an alcohol problem. He was drunk and broke things at home and physically and verbally abused my mom. However, my mom never stopped him or set the boundary. She was so scared of him and*
she couldn't protect me from my brother's abuse. It happened almost every other day. Throughout my adolescent years, I was under my brother's abuse. It was the first dark age in my life.

Under the culture of son preference, boys are victims as well as girls. As Anderson (1996) said, although boys have a powerful position in their family, the stress from having to be strong and able is very high and it can lead them to smoking or drinking habitually to relieve that stress. Maybe that's why Korean society is very generous in judging men's alcohol and smoking consumption. Intertwined with their inherent power in the family and problems with alcohol, their brothers' alcoholic acting out was very problematic in these participants' families. Aging parents could not set clear boundaries for the behavior of their sons, and in fact gave all power to them. As a result, both parents and daughters became victims of the sons' abusive behaviors.

Under the influence of strong son preference, fathers and brothers possess higher positions than mothers and daughters in the family, so mothers and daughters can easily become victims of domestic violence. And often such violence is justified with the idea of the male's inborn aggressiveness or the misconception that women earn violent retaliation when they hurt the self-esteem of men.

One of the participants is still experiencing domestic violence, although she said that as her husband got older, he became weaker and less violent. She
said that she had to call 911 three times to survive but never thought that she could leave him. This is a common phenomenon among battered women. They feel helpless and hopeless. It's not safe at home but they cannot trust the outside environment, either. She said,

My mom never protected me from anything. When I was under my brother's abuse, she never defended me or protected me from him. After I got married and I was having such a difficult time with my husband, she was never on my side.

As she said, her mom, her primary caretaker, could not help or even empathize with her, and offered no understanding or protection. How, then, can she trust that others can be of help? If no one can be trusted to help her, she is doomed to remain in her situation.

I Thought About Killing Myself

What could be the result of being treated like this? The participants felt unloved and situations were unfair, but it seems that nobody wanted to hear their complaints. Although they cried out for help, things hardly changed. Many people in the group seemed to have suffered in the past from undiagnosed mild to moderate depression. For some of them, it has persisted into the present.

Human beings are rational creatures. They want to understand the events of their lives and render their experiences meaningful. When the participants
experienced unfair and even violent treatment from their own families, they
naturally searched for reasons that might produce and justify such hateful
conduct. Apparently, the participants found the answers within themselves. It was
they who were not pretty enough, or not good enough. These self-perceptions led
to self hatred, low self-esteem, shame about themselves and depression. In order
to end the suffering and shame, some of the participants tried to kill themselves.

*I used to write my last will and send it to my family and I was very serious.
This tendency continued into my married life. When my husband didn't
understand me or accused me wrongly, automatically I thought about
killing myself. I felt the urge to kill myself especially when I drove a car
alone until I met my beloved Jesus Christ.*

*I also attempted suicide many times. I tried strangling myself.*

For some people suicide was looked upon as making the choice to leave
this hard life and have a better life in another world. For others, it was a desperate
attempt to let others know about their suffering so that things might be changed.

*When I think about my suicidal ideation, I feel like I wanted to show
something to other people. I wanted to let them know that I was the victim,
and that I was treated unfairly.*
These were the themes that were discussed in the group. And sadly, the participants are still under the negative influence of son preference in their current lives. In the next chapter, I will examine the lingering negative effects of son preference that are currently affecting the participants.
CHAPTER V
SON PREFERENCE AS PRESENT TENSE

Although many participants were not aware that they are still influenced by the notion of son preference, I found significant evidence that they were. Most of them were still affected by son preference and practicing it in their lives with their children.

I Prefer My Son

Although the participants were the victims of son preference, they also preferred sons. Their preference was not as explicit or intentional as that of their parents. Instead it took more subtle forms and was done on a more unconscious level.

*I have a daughter and a son. It has been an easy relationship with my son but it has been difficult with my daughter. I don't think I prefer my son to my daughter. But I know that I prefer my daughter less than my son.*

*I didn't think that I preferred my son to my daughter, but now I think I do. I always thought that my daughter pulled me into a negative dynamic. She has a typical pattern that starts from the morning when she wakes up. She*
asks me to do something annoying, then I get upset, and then she wants to 
be assured that I love her. For example, she said that she needed to study 
for her upcoming test so I woke her up early in the morning. Then she 
asked me to take her books out of her bag and put them on the desk. I 
started feeling irritated but anyway I did it and asked her "you don't need 
a pencil?" Then she asked me to bring that to her, too. So I exploded and 
ignored her need then went back into the room. My daughter had also built 
up her anger. She squeezed papers then threw them on the floor. It kept 
going on all morning. Sitting at the breakfast table, she kept being nasty 
and made the rest of the family upset. I told her that if she didn't feel like 
eating, she should stop eating. Then she said she would. I couldn't stand 
her anymore so I had to leave the table. But reflecting back, I don't think 
that I ever had such a dynamic with my son. I was thinking, what if my son 
asked me to bring the books and put them on the table? I feel like I would 
do it pleasantly and I would bring his pencils happily. If he wanted, I 
would bring drinks too. But with my daughter, I didn't want to do it. Maybe 
it wasn't my daughter. Maybe it was my attitude toward her. My daughter 
needed to get my attention although it's negative and felt reassured that we 
are connected.

This was such a realization. If this participant was not aware of how both 
she and her daughter co-created the situation, she might have blamed her daughter
for being difficult or bad. Intersubjective theory talks about how such a situation is co-created by the participants and each participant can influence the other in very subtle ways (Orange, Atwood & Stolorow, 1997). If people don't pay very close attention to the subtle give and take in a dyad, it's hard to know "who was doing what to whom, and in what order" (Ehrenberg, 1992, p.54). Since she was more permissive and willing to be responsive to her son, no underlying or reserved feelings were communicated to him. She accepts his demands naturally and in a matter of fact way. Her son also gets the message that whenever he demands something from his mom, she will listen to him and his needs will be met. There is no reason to create a drama.

But with her daughter, it seems like there were some reservations from the start. Although she said that she tried to do things that her daughter asked, her feelings were different (I am doing this for you anyway, but I don't like it). Therefore, her daughter reacted to her mother's feelings rather than to her actions (Frankel, 2004). This mother's annoyance communicated itself to her daughter. Her daughter experienced this withholding of emotion and responded by trying to elicit more emotional expression from her mother by making more unwelcome demands. Or perhaps she takes on the identity of the difficult child that her mother thinks she is, and behaves accordingly in order to feel connected to her mother (Frankel, 2004; Frenczi, 1949).

Mothers of the participants have hardly ever apologized for what they had done to their daughters. They told their daughters that it was their fault, because
they were difficult, they didn't understand, they were aggressive. According to Ferenczi (1949), the most detrimental effect of this blaming is that the child ends up feeling responsible for the attack and feels she is the bad one. The hate is introjected into daughters by the family and society.

Shame As a Woman

In Korea, there is a good deal of shame connected with a girl's body. A boy's body is perceived as superior and something to be proud of, while a girl's body is perceived as inferior and is related to its potential for arousing sexual feelings and, ultimately, sexual abuse (Kim, 2001; Yoon, 1999). A baby's hundredth day is a significant event for a family in Korea. Relatives and friends get together to celebrate the baby's first hundred days of life and wish the family good luck for the baby's future. In this celebration, taking a portrait picture of the baby is an important event. Boys used to be photographed naked, their penises exposed, while girls were photographed fully dressed.

This attitude continues as they get older. Many participants recalled that their bodily maturation process was not something to be welcomed and celebrated in their family. Instead, it was considered as a burden, something to feel ashamed of. They were not properly guided by their mothers in how to deal with their bodily changes and this reached an apex when they started menstruation.
I hated all my body changes. I felt very ashamed of my menstruation. My mom didn't even teach me how to take care of it. Also I had so much pain when I had my period that there was nothing to like about being a woman.

My mom had no sensitivity. When I was in middle school, I lived with my mom and my brother, who was in his 20's, in one small room in a commercial building. We didn't have our own bathroom, so whenever I wanted to use the restroom, I had to go up to the third floor next to a billiard parlor. I started menstruation and had to share the restroom with all the men. I felt unsafe and terribly ashamed of changing the pads. She had enough money to rent an apartment with two separate rooms and a bathroom but she didn't care about my safety or needs.

Many participants recalled that their first menstruation experience was not something they welcomed, but deeply involved shame. They also felt ashamed of their breasts growing. They tried to hide their breasts by wearing box style shirts and they had the perception that a woman with big breasts was not intelligent and cheap. They wished not to grow big breasts. Not being supported by their parents in the process of becoming a woman made these women feel uncomfortable about their own bodies.

The participants who were not properly guided as young girls and whose womanhood was uncelebrated were now reacting to their daughters' maturity. Out
of their own anxiety, they found themselves being unavailable for their daughters, just as their mothers were not there for them. One of the participants who has a daughter becoming an adolescent shared her story.

My daughter said that she had pain in her chest. I noticed that her bosom is growing. Instead of welcoming her maturity, I felt anxious and thought it's too early. When my children touch my breast, I hate it. When my daughter tried to kiss my breast in the morning, I pushed her away. I feel sorry for my daughter, because her attention is on her breast and maybe she wanted to know how I felt about it. And I feel badly that I conveyed a negative message to her about her maturity. I think my mom responded the same way that I did. Whenever I tried to touch her breast she felt very uncomfortable and pushed me away.

Daughter-In-Law

The discrimination against daughters that they experienced in the past is repeated by the participants after they get married. As Yoon (1999) mentioned, having a son means more than simply having a son. It means the son's mother is superior to a girl's mother and her power is guaranteed in the family (Kim, 2004, Yoon, 1999). Mothers are proud of their sons and mother and son are tightly intertwined emotionally. When their sons get married, mothers continue to have a strong influence on their sons' lives. Mothers want to know if their sons are still
most loyal to them, and this causes considerable conflict between wife and mother-in-law (Das Gupa et al., 2003).

Therefore, when sons get married, daughters-in-law often are not welcomed into the family. Rather, mothers-in-law try to maintain control over the lives of the couple in many ways.

*My mom is very good to her daughters-in-law. She always gives them money and buys them jewelry. She is bribing them all the time. She knows that the best way to control her sons is to control their wives.*

But in another case, a mother-in-law's intervention may be more primitive. She cannot look at her son's activities objectively because she is blinded by possessiveness. Often the husband's sisters become involved, blaming only their brother's wife for troubles that were caused by their brother. When something happens to their valuable son/brother, all the women in the family get together and exact revenge for him. The following is a recollection of one of the participants who was abused by her husband, then later was abused even further by his family members.

*I tried my best to please my husband's family. But no one acknowledged my effort and everyone took it for granted. ... When they knew that I called the police, my mother-in-law called me in. My sisters-in-law were there, too. These seven women tried to kill me because I called the police. I called 911 because my husband was physically abusive. But they wanted to*
kill me. They really shot the poisoned arrows at me. They said men can hit women because they were men. Men are entitled to do so. They said that the fact that I could call the police really proved that I am crazy. They said "we have to incarcerate this fucking bitch in a psychiatric hospital because she is crazy." I don't think they had ever been beaten by anyone. Since they never had been through this, they didn't know how frightening it was and how painful it was. I couldn't protect myself, that's why I called the police. If I wanted to leave my husband, I wouldn't have called the police, I would have just left. But I couldn't because of my little sons. I wanted to be free but I didn't know how (crying hard). I only stayed there because of my little sons. That's why I called the police. I didn't know anything else to do. My sisters-in-law said it was an unavoidable thing because I was a fatherless bitch. They said they should have known better. They shouldn't have treated me, a fatherless bitch, like a human being. They think they are angels, they are so superior. They said that they took a fatherless-raised, worthless bitch into their family, that I wasn't appreciative of their generosity and looked down on my husband (keeps crying). As you know, it wasn't true. All I wanted was to live. Anyway, only people who go through similar things as I did could understand. The people who have been severely beaten can understand.
Instead of empathizing with their daughter-in-law and sister-in-law's difficulty in going through this abuse, and correcting their son/brother, the women blamed the victim. Women became enemies of the woman and took the side of the man. In a way this is a repetition of their own childhood trauma. When they were discriminated against and unloved, people didn't listen to them; nobody was on their side. They were left alone, severely hurt and misunderstood.

Jesus Christ a Parent that I Never Had

Most of the Koreans who come to the U.S. go to church to make connections, get life information, and have a sense of belonging. For these people the Christian church serves many functions in addition to its religious activities. Its services are similar to, or even greater than the functions that a Korean community center can offer. Therefore, it has been typical for those who come to the U.S. to go to a church regardless of their former religion in Korea.

Although I posted flyers announcing the group in a number of Korean churches, I was very surprised by the fact every participant in my group was Christian. They were very devout Christians and the importance of Christianity in their lives was great.

As the sessions proceeded, I came to realize that it was more than a coincidence that all the participants were Christians and I tried to construct the meanings of Christianity in their lives. First of all, Jesus Christ was their life savior. According to them God saved their lives.
God saved me from my suicidal ideation. Ever since I met God deeply, these ideations disappeared.

If I didn't believe in God, I would have either been in a psychiatric hospital or killed myself.

I almost killed myself. I wanted to be free from everything. One night, I was standing at the window looking down. It was the fifth floor. I was in such a pain. I was thinking "I am gonna jump, I am gonna jump down." Then maybe it was because of the gravity, I felt like the earth pulled me in as if it was gonna swallow me. My body was slowly bending. At that moment, the face of Jesus Christ appeared to me. ... Jesus, I felt so sorry for Jesus Christ, I felt if I would kill myself, it would cause lots of pain in him (crying). He suffered and died because of me and I couldn't deny and ignore his sacred death. If I ignore him, it's like I do the same as the people who nailed down his body, his heart. That's why I couldn't kill myself then. If I didn't believe in God, I would have killed myself.

The church and Jesus Christ became something to hold on to in their lives, something that helped them feel safe and cared for. Usually when people try to commit suicide, they think about their parents, their children, or someone who they care about and whom they feel cares for them. But in this case, this
participant seemed to have nobody she cared about and whom she felt cared about her except for God.

Also, Jesus Christ symbolizes a parent whom they never had who can love them unconditionally, accept them as they are, and be dependable. The following is one of participant's story about how she experienced unconditional love from God.

*According to my mom and my husband, I am nothing better than a worthless worm. I have no good qualities, I am not good at anything, and I am useless. They wonder why I live. But when I went to church, they said that I am not a useless being (starts crying). I was so shocked. Throughout my life, more than 40 years, my mom and husband treated me worse than a parasitic insect on a tree. I was a useless person. But they said that God's perspective is different (sobbing). Think how much I must have been confused listening to them. According to Chung, who wrote the book "Father, I Now Can Say I Love You", people can only live when they hug another human being and say "I love you" ten times a day while listening to each other's heart beating. Only then we can live. But what about me? I always heard words that killed me. When I heard God's message at the church, it was a life saving word for me. However, although I could understand it with my brain yet I couldn't feel it in my heart. Also Bruce Thompson mentioned about pills of the truth. He said "tell yourself that you are precious, priceless, and worthy of great love three times a day."*
When I wake up in the morning I look at the mirror and whisper like chanting a spell "you are precious, priceless and important child."

God says "you are lovable as you are" but people say different things. All the people around me destroyed me, they shattered my being, my worth. They always say "look at you, scum. I knew you couldn't do it. I don't understand why I expect anything from you." As a result, I don't have any confidence in myself. I am ashamed of myself and feel inferior. I cannot stand up for myself because I am oppressed like this all the time.

They found a new family in god. Instead of waiting for their real moms to come rescue them while staying with the family who gave them so much pain, they created new families in the churches. The people in church seemed different. They were more accepting and they were much closer to them than their real families.

One of the participants who was a very devoted Christian had a difficulty as a Christian because her other family members are Buddhists.

I am ostracized by my family. On holidays, they won't invite me because I am Christian. They are Buddhists. Ever since I converted to Christianity, I lost all my siblings, lost my mom. Whenever I meet my family for occasions like weddings, I need to fast for three days and pray. I need to kill myself. Otherwise, if I am alive, we might get angry and fight with each other.
Fasting in a way kills me. It kills me and leaves only Jesus Christ in me.
Since I am dead, I don't mind when they are angry at me or do bad things
to me. I don't have energy to fight back.

In her strong Buddhist family, her converting to Christianity was
perceived as an unforgivable betrayal. Ever since she converted to Christianity,
she was cut off from all her family. Listening to her story, I wondered if she
needed to find a concrete reason for her mother's hatred of her. She was the one
who felt deeply hated by her mother and suffered from suicidal ideation. Maybe
she couldn't understand why she was so hated and discriminated against by her
mother. Having a concrete and reasonable explanation - I am different, I am not
part of my family, I am Christian- for her family's hatred is much better than
having no reason. At least, she can understand why. If she thought that she was
hated only because she was a girl, it would have been too much to handle.

Rage

Since these women were treated unfairly, they are enraged at the people
who caused their suffering. They hate their mothers and they hate their brothers,
although they continue to feel obligated to take care of them.

I was the eldest daughter so my mom asked me to take care of my younger
brothers. I didn't feel any love toward my brothers because my parents
wanted me to be my brother's little parent.
My brother demands so much from me. He needs all the attention. Whenever he says something, he expects me to respond. I hate that. A few days ago, I got a phone call from my brother when I was having lunch. I didn't pick up the phone, but it gave me an upset stomach and I had to throw up everything.

I hate my brother. I hate him. To make things even worse, my mom is always on his side. If I have a fight with him, my mom always intervenes and scolds me. No one is on my side. Maybe that's why I tried to take revenge on him so often.

I hate my eldest brother. He gave me so much pain, but my mom couldn't protect me from him. I don't understand how such a bastard can walk on the street under the sun as if he is innocent. He needs to suffer. I wish something terrible would happen to his children.

In some cases, this hatred toward their brothers generalized. They became very competitive with their male friends, colleagues and/or their husbands.

I recently broke up with my boyfriend and I saw that I vented my anger at him even before he did something wrong. I saw him suffer so much and I want to understand why I do that.
I had so much trouble when I first got married. It seems like I vent all my rage at my husband whenever I experience injustice against me. I am still struggling but it has gotten better.

Their hatred toward their brothers or men in general comes from the discrimination that they experienced. They lived a difficult life, but men seem to live an easier life because of the sufferings of women. They hate males but at the same time they envy them and want to be like them.

One participant said "I wanted to be a boy. There are so many benefits. They are always first and receive more than girls." Since they didn't have a caretaker whom they could trust and depend on, they cannot trust people easily. At the same time they are desperate to find an ideal someone who can make up for their negative past experiences with their parents. Usually they project this ideal onto a person who is in a romantic relationship with them and when their partners can't provide the functions they need, they become enraged (Bacal & Thompson, 1996; Kohut, 1977, 1984).

I think my boyfriend is my soul mate. If we are soul mates we should be able to share everything and understand everything. I have all these expectations. Therefore, when my boyfriend hurts my feelings, I can't do anything until I get his apology. Literally, I can't do anything. I call him
more than 100 times a day and show up at his apartment in the middle of the night banging on his door. I cannot go to work, I cannot function.

When I have an argument with my husband, especially when he blames me for something that I have nothing to do with, when he questions my innocent intention, automatically I think about committing suicide. If my husband doesn't understand me I have no reason to live.

Sometimes, their rage generalizes into their social relationships. I feel so many people are trying to control me. I don't usually pick up the phone because they have so many demands.

Instead of trying to negotiate with others, they often expect that their needs are not going to be met, so they give up before making an attempt. This inability makes them angry because they cannot find a way out. They feel trapped. In this situation, they need to feel in charge somehow. Being angry, venting their rage at someone, gives them a sense of power in the moment. However, anger blurs things. Often, people only see the aggression not underlying issues.

I know that I am aggressive. I don't like being angry all the time and I don't like myself being aggressive either. But the problem is that I'm the
bad guy all the time. Nobody wants to hear how I am feeling and why I am so angry. All they perceive is that I am angry, therefore I am a bad guy.

I used to be a people pleaser. I always felt that I was not good enough. I was a people pleaser because I felt that I was no good. I always kept everything inside. I was never angry in the past. However, now I have become totally the opposite. I feel like I can explode at any time. I feel like I am entitled. Whenever I see a people pleaser, I am so angry. See? I am out of that, you have to get out of It, too. I am sooo mad at those kinds of people. ... Now I am expressing everything. I complain about everything. People don't see why I have become like this. I get all the blame.

Coping

It must have been difficult for the participants to live, given their situations. In order to survive in a hostile environment, people in the study used different strategies. One of the most common coping strategies they used was numbing their feelings and dissociating themselves from the reality.

[talking about how her husband abused her] I can speak about these horrible things while smiling. You wouldn't understand how I could do this. I don't feel like I am the person who is experiencing those things. I don't feel like I am ready to deal with it because there is so much pain in it. I am so afraid of confronting.
I needed something to concentrate on. I needed to forget. Of course I didn't love studying. But I especially appreciated studying because I didn't need to deal with people and I could see the tangible result. Grades don't lie. The more I studied the better grades I got. I didn't like studying but it was an escape for me from my husband, my mom, and my in-laws.

This participant has been studying for more than ten years since she got married. She has acquired a doctoral degree in Natural Medicine and many certificates, but has never practiced. She thinks she will apply to another school soon. Throughout her life she lived in a fantasy. She loved old movies such as "Breakfast at Tiffany's" and spent much time daydreaming. She said "I hated my real situation so I lived in my dream. Within reality I don't feel much, I feel like I am dissociated from reality." Also since she was living in a dream, she didn't know how to change things in reality. She continued,

Yes, it was so hard. I hated my reality but I didn't know how to escape from it. I could have run away from home or I could have made a plan for a trip for myself. I always think about it but can't make it happen. ... I think something prevents me from doing this kind of thing, something ties me up.

In order to keep from being hurt in the future, she came to mistrust people.
Since my mom reflected a distorted image of myself, I cannot really take good things in. I cannot trust people, and I cannot totally trust God, either. I only understand it in my head. I feel like if I trust those good messages, something bad will happen to me. I know that it's a false message.

Since these women cannot trust other people, they have to manage everything themselves. They become controlling people. They can't relax.

I am so responsible. All the shoulds and musts, stress, lots of repression. If I don't do this, I always think about it. Everyday I write my "to do" list and if I don't achieve every single item, I can't sleep at night. I am a workaholic. Every morning when I wake up, all my "to do" list is waiting for me. Every single hour there is something to do.

These coping strategies or defense mechanisms helped the participants to survive in a harsh reality. This also shows how resilient they were. But if these defense mechanisms are used excessively over time, they can have negative consequences. They will prevent the participants from experiencing the full range of their lives.

I Don't Know Who I am, What I Want

It seems like their families and the society that they lived in asked these women to accept their harsh reality without complaint. They tried to meet other
people's expectations by killing their own desire and subjectivity. They tried to be good girls by developing a false self (Winnicott, 1975, 1997, 1998, 2000).

_I have been told that I am such a good girl. Sometimes it makes me angry._

_People always tell me that I am a good girl. I can't reject that and I become like that._

_I hate when people separate good people and bad people. I don't like good guys. I like bad guys. I used to be a very good girl. Such a good girl. I was so attuned to other people and I liked to be called a good girl. But I don't think it's good._

_I have been such a good girl. I never go against my parents and always try to understand their point of view (starts crying). Such a good girl. When they say that I am such a good girl, I felt loved._

_I just do whatever people ask me to do. I don't know any other way. I just listen to them and follow that. I don't have any opinion. ... I feel like I've never done anything that I wanted. You asked me to think about what I want. For me it was always what my mom wanted or my husband wanted. When I think about what I want, I need to think really hard and it seems like I don't have any strong preference. It depends on other people's preferences. I feel like I have been thinking about other people all the time._
My mom, husband, and in-laws were my priorities. Ah, also my children.

Since I was driven by what other people want, I always put aside what I really wanted.

Although they tried to be good girls by killing their own desires and subjectivities, it wasn't enough. No matter how hard they tried it didn't seem to be enough. This affected their self-esteem negatively.

I always lived my life to please my mom and my husband. Before I got married, it was ok. I could just follow whatever my mom said. But when I got married, two people tried to control me. I didn't know what to do in the middle between my mom and my husband. They always tell me "you idiot, you can't do anything right." Both of them. I can't concentrate on one person, I have to listen to this person and that person. Then I make many mistakes. But they don't see my effort to please them equally. All I hear from them is "you idiot, you can't do anything right. You empty brain." As a result, I lost my self confidence. Whenever I need to do something, I have to think "isn't it something that mom doesn't like? Isn't it something that my husband likes?"

She continues to explain how her self-esteem has been damaged by her husband's negative comments about her.
My husband always says things that kill my self-esteem. "You are useless, you are going to useless places and meeting useless people, talking about useless things. You are useless." He destroys my budding self, my self-esteem.

As a result, she couldn't self-actualize although she has so many resources. I went to school for Naturopathic Medicine and they gave me the natural doctor degree. I liked it but because of my low self-esteem... Of course, all my classmates opened their practices. They are all Americans. In my case, I have a language barrier... I can't try new things. I am so afraid of trying new things. But what about my degree? I feel so pressured. So I thought if my husband dies, nobody would know about my degree. I would go somewhere, and I wouldn't need to open my practice. I regret everything, all I have done. I regret studying, acquiring the doctoral degree. Because of that my husband expects me to do something. I feel so pressured. That's why I study acupuncture, to extend my studying period. But what if I finish this? I recently saw an advertisement. It says there is a school that gives a medical degree, so I am considering pursuing it.

Her low self-esteem made her passive and more dependent on the people who are abusive to her.
The owners of my life were my mom and my husband. I have no right to claim it as mine. I just followed them. I am very passive and dependent. If nobody picks on me, I think I might lose my motivation for my life. My life has been like this. Everyday I am scolded by someone, being compared with other people. Even my husband compares me with his nieces who are middle school kids.

I don't have any strong opinions. I don't have any energy to fight back. I am lacking the inner power to fight for what I really want. Although I hate it when my mom and husband treat me unfairly, they chase me into the corner. I hate that, but I do what they want anyway.

It seems like she lost her spontaneity. She is not fighting, not resisting and feeling helpless.

I tell myself that I am not the useless person my husband tells me I am. I am not an ugly duckling but a swan. I tell myself. But all the people around me still tell me that I am an ugly duckling. They brainwash me. I heard that there was an experiment where people tie an animal with a chain so that it can only run around the length of the chain. However, after people break the chain, the animal still runs around only the length of the chain. That animal sounds like me. I can't escape from my environment. Although the chain is broken, still I am tied to an invisible chain.
For all the participants, their experience of son preference was not limited to past events. Past experience and their recollection of it was still affecting them in their present lives like a haunting ghost.
CHAPTER VI
ROLE OF THE THERAPIST:
MUSICAL AND VERBAL INTERVENTIONS

In this chapter, I would like to invite the readers more closely into the music psychotherapy session. Many people wonder what we do as music therapists, how we use music as a therapeutic medium, how the clients respond and are affected by the session. In the descriptions that follow, it is important to distinguish the unique manner of participation of each individual. Therefore, pseudonyms will be used in order to identify the different participants.

Setting

In music therapy, the physical setting is important. Although many music therapists do not have the luxury of having their own music therapy room and have to share space with other activity therapists, it is desirable to have a room designed specifically for music therapy.

The room should be sound proofed. There was a time when I led a music psychotherapy group in a psychiatric hospital and the room was not sound proofed. In the middle of the session when a very subdued, depressed patient started expressing herself through music and the sound became louder, we had an intruder who came in and let us know that we were too loud and interrupting what others were doing. After this experience, my patient never played so vigorously again. So it is very important to
have a space in which music therapists and clients can comfortably explore whatever range of emotion they want to. The room should not be too big or too small. It should give enough personal space between people so that everyone can have comfortable boundaries. If the room is too big, it might interfere with building intimacy between the participants. It should be equipped with a variety of instruments so that participants can explore different timbres, pitches, and textures depending on what kinds of feelings they wish to express at the moment.

In order to do the son preference group, I rented a music therapy studio in mid-town Manhattan. Since participants came from New Jersey, Queens, Manhattan, and Long Island, Manhattan was the easiest place for them to meet. The room was spacious enough to accommodate nine people. There was a couch with lots of cushions and single chairs. Before the group started, I arranged the chairs in a circle so that everyone could see each other. In the middle of the circle, there was a coffee table holding small instruments such as cabasa, slit drums, all kinds of shakers, bells, xylophones, metallophones, tone bars, a steel drum, wooden flute, thumb piano, and rain stick. Behind the circle, there were standing drums, conga, bongos, guitars, gong, cymbals and a large wooden African xylophone. The electronic piano was located against the wall to the left of the couch with a piano bench and I sat near the piano. I always prepared a tissue box and put it on the coffee table so that people can easily reach it in case of crying.

There were low bookcases against the wall across from the electronic piano and they were filled with books and stuffed animals, puppets, and dolls. The room had
adjustable track lighting and I dimmed the light so that people could feel comfortable and not feel too exposed.

The music psychotherapy group for this study was designed to meet once a week for twelve consecutive times for one and a half hours. As people came in, they could chat among themselves as they waited for other members to arrive. When the whole group got together, people shared developments in their everyday lives and residual reactions from the last session. Sometimes, I addressed specific topics related to son preference and at other times, I waited for something to come up from the participants. Sometimes, I suggested improvising music as a group or taking turns with a certain topic or image in mind. After the music, we talked about the musical experience and how it related to what we were discussing and participants gave feedback to each other.

In what follows, I will describe the major musical interventions that I made and how they helped the participants explore their issues and deepen their understanding of them. Then I will discuss the participants' evaluation of the group.

Major Musical Interventions

There were four major musical interventions that I used during the group process: projective technique; vocal holding; musical support; and music and imagery. Some of these were planned in advance in order to explore certain issues
and others were my spontaneous choice based on what was happening in the group at the given moment.

Projective Technique

In the first session, I suggested that each participant choose an instrument which could represent themselves and try to make sounds. Each person chose an instrument, played it briefly and discussed the connection between themselves and the instrument. Some people chose their instruments based on their shapes and others used the quality of the sound as a basis. They were surprised at how much information about them this exercise could reveal.

MyungAh picked the metallophone and played "DoReMe" from The Sound of Music. She said that she liked the instrument because each note sounded clearly. She made a connection between herself and the instrument, saying that she was a person who was very precise. She was like the metallophone, in that she didn’t like blurry things and could not stand ambiguity. Since each note on the metallophone is distinct, it can make a clear melody, but when people play a wrong note, it will be very noticeable. She said that she has two sides. Usually she is quiet but sometimes, surprisingly, she is outgoing. Depending on how we play it, the metallophone can make a soft, clear sound or a loud and annoying sound.

SunAh picked three gato drums (wooden boxes with different pitches) and said she picked these because they looked easy to play, but still sounded good.
She said that everything takes so much energy for her that she usually goes for something easy and nice instead of challenging herself.

JinAh picked a fish shaped wood block. She commented on a fish being an instrument and said that she felt that it would be painful for a fish to be an instrument. As I pointed out her tendency of noticing the pain first, she said that she felt pressure to be more attuned to other people’s pain because of her role in her work. She continued that since her brain was “overly developed,” she tended to favor the intellectual over the emotional, and when she met people, they had difficulty connecting with her.

InAh picked a small heart shaped silver bell. She said it was small, easy to carry and therefore convenient. She emphasized how much she thinks highly of things that are convenient. And she always thinks about usage and convenience, and being flexible and adjustable to the environment. As we talked more, it was clear that she was treated as a commodity by her mom and husband and how throughout her life she tried to be a useful person and think about others’ needs first, although it caused pain in her.

Sometimes, the chosen instrument reveals characteristics of the person that are hidden. JungAh picked a bongo. She picked this because it was unfamiliar to her. She could feel the power of its sound, but it was not too loud. She felt that it had power that was not too obviously noticeable; it had inner strength. Then she talked about her role in her everyday life. Although she wanted to be a supporter, she was trained to be a leader and felt lots of responsibility. Playing this
instrument made her curious about her being stressed out in her life, which she was not really aware of.

One participant talked about her experience of the projective technique as follows.

This projective technique was very fresh and enabled us to look into ourselves. It was shocking to me. It was shocking that I projected my stuff onto the instrument. Also I was shocked by your comments. I was not aware of what I was doing at that moment but I could acknowledge that I had those kinds of thoughts. I think this is really an effective tool.

Vocal Holding


Since the group had been talking about their early childhood experiences with their mothers in the fourth session, I suggested that they do vocal holding while thinking about their early childhood relationships with their mothers. I
asked them to close their eyes if they could, and played alternating A9 and D7 chords repeatedly on the keyboard, suggesting that they join in with their voices. As they joined in, I mirrored and supported their singing with my piano playing and my voice.

After the exercise, JinAh said that she has been thinking about her relationship with her daughter and how she was acting childish with her daughter. This in turn reminded her of her own mother and she thought her mother was not an adult who could embrace her. She said,

*My mom had all the responsibilities as a wife, a daughter-in-law, and a mother. Imagine how hard it was for her to live her life when her husband didn't love her and didn't have any bond with her. I feel that my mom fulfilled all the responsibilities but didn't love me. Probably she didn't know how to love me. It must have been very hard for her to be a mother.*

MyungAh said that she didn't feel she was loved by her mom. However, since she could understand why she was not loved, she never complained. She said,

*Listening and singing to this music, it suddenly occurred to me that my mom was not happy. It reminded me of bedtime, when my mom was putting me into bed and singing a lullaby. It felt sad. I could feel my mom's sadness.*
When I inquired further about what could have made her mother sad, she said "not having her own life." Since she was a woman and mother, she had to stay home, not self-actualizing, and submissive to her husband. She continued,

*Although she was depressed, she had to do her job responsibly, singing lullabies and putting her children into bed. We also feel depressed sometimes but when we have children, we cannot express this feeling. But that doesn't cancel out that we are depressed. Maybe she felt many things were beyond her control. She wanted to go out toward the world but her position as a woman and mother confined her to a house. She must have had some conflict around that.*

Then she commented that it seemed like she was talking about herself. JungAh said that this music evoked a memory of a short bus trip that she had with her mom every week to see a dentist. She recalled that this was the only time that she felt she had her mother all to herself. Her mother's smell, when she put her nose down into her lap, made her fall asleep. Also a totally opposite memory of her mother was recalled. She remembered how scary it was for her when her mom disappeared without telling anyone where she was going, due to her father's possible extramarital affair. She felt abandoned by her mother and felt anxious when her mother was not around all the time.
Wiping away her tears MinAh said,

*I was thinking lots of things. My mom said that so many bad things happened to her when she was 14 years old, and I thought maybe she was developmentally arrested at that age and she raised us without ever growing up herself. I always felt that I was the victim, because I was singled out and ostracized by my family all the time. But my brothers who still cannot escape from my mother's control are the victims too. Poorer than myself. This realization hurts but I could understand my mother better.*

This vocal holding technique surely evoked many early childhood memories and feelings about their mothers, and gave the participants ways to access happy and painful memories safely.

**Musical Support**

This technique is a combination of group musical improvisation and drama therapy technique. I used this technique twice during the course of the group. The first experience was at the end of the second session when JungAh expressed her strong hatred toward her brother and her mother, who was always on her brother's side, but couldn't understand why she hated him so much. I suggested that she choose the instruments that could represent herself, her mother
and her brother. She picked the cabasa (small shaker with metal beads) as her mother because her mother keeps nagging all the time. She chose woodblocks for herself but couldn't decide what to choose for her brother.

When I asked her the quality of her brother, she said "something that doesn't make any sound even though you hit it really hard." I suggested she choose one of the stuffed animals on the shelf. She picked a teddy bear and said "my brother is slow, inactive, and doesn't really express his feelings." Then I asked her to pick a woman from the group who could best play her mom and she did. When I asked, she described a situation that captured a dynamic among her, her brother, and her mother: JungAh is exploding at her brother, but her brother doesn't respond and her mother keeps nagging at her.

I suggested that members improvise together while imagining what was happening at JungAh's home. Most of the members chose percussion instruments while carefully watching JungAh's movement. The quality of the sound JungAh made was not dynamic at all. It was very regular and had little energy but it looked difficult for her because her face got red and her body became tense. It seemed like she could not make any assertive sound even though she put a great deal of effort into her playing. Therefore, people couldn't hear her, or understand her intention very well.

After the music, I shared the thought that although she expressed herself, her sound couldn't be heard because her playing was not dynamic and had no accent. She was speaking but her point was not conveyed to others so often times
what she was saying to her brother and mother could be considered as being merely noisy or aggressive. Her feelings and the messages were not communicated to other people. It's because she seemed to be confused, didn't know what to say or how to say it. She was not clear about what kind of message she wanted to send out, so it came out in a very primitive form and, of course, other people didn't get it.

This made her think about what she wanted from this kind of a situation, and she figured out that all she wanted was her mother's love. She was angry at her brother because he got all her mother's attention. She was the victim, but nobody recognized her as a victim because her feeling hurt made her angry, and only aggressive and destructive energy was conveyed in what she expressed. Instead of her pain, people only recognized her aggression.

Another musical support exercise was done for InAh. In the sixth session, InAh's story became the focus of the group. She shared the domestic violence that she had suffered as an extension of a discussion about the participants' negative experience of son preference. The ways in which her mother, and then her husband, had killed her self-esteem were obvious. As the group continued to meet, her wish to escape from her domestic situation increased. By this session her husband seemed to notice a difference in her attitude toward him and banned her from coming to the group.
I suggested that the group improvise together, keeping in mind that we were going to support InAh. I asked her to try to make a distinctive sound in the group improvisation so that other people can hear her voice.

InAh picked the cowbell to start with then switched to the wooden shells (pieces of wood with different pitches). Other members joined in playing mostly percussion instruments. I picked the bongo and set the basic rhythm for the group and made a big sound so that InAh could feel safe to make a loud sound as well. JungAh joined in with me on a drum. For a short time, InAh played the shell loudly but soon the sound disappeared. She picked up the cowbell again but her sound was drowned out by the others. I placed the cymbal in front of InAh. She tapped it a couple of times then went back to her shells again. I gave her a harder mallet, but still she couldn't make a loud sound. Being aware of the group's time limit, I played the bongo accelerando and crescendo, informing the other members that we were heading toward the climax. People were aware of my intention and participated in playing faster and louder. Still InAh couldn't make a loud sound. Toward the end, InAh picked up the hard mallet and started to play the cymbal. She lingered there for a moment but still could not hit the cymbal with a hard stroke. The music became softer and slowed down, then ended.

After the music, I asked InAh to beat the cymbal loudly. Then, she was able to raise her arm high and beat the cymbal loudly, as if she was a student who had been given permission from her teacher to do so. The group applauded.
I acknowledged that it was not easy to make a big sound among other people and make them pay attention to her. I also explained the intention of my intervention, that I just wanted her to know that she didn't need to listen and be submissive to other people all the time. Sometimes she could make other people listen to her too. And with this exercise, I wanted her to feel what it was like for her to make other people notice her. Although she couldn't take this kind of bold step in her real life yet, she could imagine what it would feel like to be assertive and proclaim herself. Freeing her mind from the abusive situation can be the first step toward her freedom. She thanked me and we ended the session.

Nobody knew what kind of change this experience would bring to her at that point. Although her husband had banned her from coming to the session, she didn't give up. She tried to convince her husband that this group was important to her and persuade him to allow her to participate until it ended. Her level of participation in the group also increased. She started seeking out support from the other participants and me inside as well as outside of the group.

Music and Imagery

In the tenth and eleventh sessions, I used a music and imagery technique. I picked three different taped musical excerpts, hoping to access different psychic materials by inducing imagery about them. Before I played the music, I prepared the group physically and emotionally by doing relaxation exercises. The first music that I chose was Chopin's Piano Concerto No. 1, second movement, marked
Romance-Larghetto. I chose this music as the first music for this exercise because it is beautiful, has a nice balance between orchestra and solo piano, and a pretty melody line that engages people easily. Although this music is dynamic, it is not overly dramatic. Also, from my past experience as a music therapist I knew that people responded well to this music and they had safe and relaxing images. So I thought this music would suit for the first music to introduce to the participants. As I expected, most of the participants had relaxing and pastoral images.

MinAh, who didn't open her eyes until long after the music ended, shared her imagery. She said that she had an image just like the phrase in the book of Psalms, "He will be like a tree firmly planted by streams of water, which yields its fruit in its season and its leaf does not wither, and in whatever he does, he prospers." She continued,

*Birds are coming and singing and children are playing around. Then there is an old bent-over woman. It is my mom; she is coming. Taking the form of a tree, I embrace her with my branches. As I embrace and welcome her, she tries to sit on the bench under me. Then my dad comes too. When the two of them sit on the bench, they become children. They swing their feet. Although in real life they don't get along, they get along very well in my imagery. They are very close and just like kids. And then I am trying to picture my eldest brother, but I can't. Then my second brother; it's the same. Then, my third brother. Although I have never seen his baby, my third brother, his wife and his baby are standing around the bench and...*
talking. My fourth brother is also talking with his wife. And my sister and her husband. She is reading a book and her husband is leaning against me (tree). It is such a beautiful scene. My nephews are playing around. I enjoy this scene so much and then I hear you telling us to come back. I didn't want to come back, but you said we need to come back. I hated it. I really loved the scene. Since I loved the scene very much, I couldn't come back. When you insisted, my tears were falling down. It was very difficult to come back. I felt such pain to leave the scene. I don't know why.

As we explored her imagery, we were curious as to why her parents came to the scene as old people then were transformed into children. And we concluded that although our parents were adults, there existed a child inside of them and they were not ready to take care of other children, their own children. They were children themselves, too. They were not mature and not capable of embracing us as children. So as a child, we needed to grow up fast and embrace our parents (Miller, 1994).

I also asked her why she needed to be a tree when all the other members of her family were human beings. First, she said that she felt comfortable being a tree. She didn't need to be a human being. All the family members came to her because she was a tree. They leaned on her. I wondered out loud if she wanted to embrace her family even if it required her to give up her humanity. Only after she becomes a tree, meaning she can't speak, can't hear and can't move, can she be
with her family. Then she burst into tears and felt emotional pain. She said that she cannot attend a family gathering without fasting. If she goes there as a human being, she can't stand her family and they wouldn't leave her alone. So by fasting for days, she kills herself so that only the Jesus Christ part of her can exist. That means she won't respond to whatever they do, like a tree.

She continued to talk about the betrayals that she experienced in churches, too. Whichever church she went to, she had conflicts with a priest or people who were deeply involved in the church because she invited addicts and people who are mentally or physically ill to attend. She didn't understand why churches didn't want those people who really were in need. It seems like she identified herself with the people in need and when the churches rejected them, she felt rejected and hurt.

InAh had an image of two boats. She said,

*It was like a painting of Monet. There was the sea and a woman was standing alone wearing a white flare skirt and a hat. Then the scene changed into a waterfall, and then it became a stream. When the music got faster, the water became sand. It was shining sand as if it contained gold. Then the sand fell from the water and became a mountain.*

She said that it was very dynamic and she felt something had opened up inside of her. She said it felt very releasing. She interpreted it as a wish fulfillment.
She expected herself to be more active and dynamic in her daily life, living life in a lively way rather living a dead life. I shared my thought that two boats that were anchored in the sand might represent her inner resources waiting to be used. Also it was not just sand, it contained gold. Other members added that sand becoming a mountain could mean something significant too. It's not just disappearing, but builds something big. Although she was not aware, it seemed like many things were already activated inside of her and were preparing something to happen.

The second music that I prepared was "Music for String, Percussion and Celesta" by Bartok, 1st movement, marked Andante Tranquillo. The time signature of this music constantly changes and it is written without key signature. This music has lots of cacophony and a dark quality. I intended to evoke unresolved conflict in the participants.

JungAh had an image that she was standing at the top of a cliff facing the sea. She said,

[It's a] high cliff. I don't even move a bit. It feels very intense. It's very windy. It's like a scene from a movie. Lots of tension. I am not thinking about jumping into the water to kill myself. It is more like I need to make a big decision, like Hamlet in the play. "To be or not to be?" That's the question.
When I asked her if she had a big decision to make in her real life, she talked about pressure from her family to marry a man who has a very specific profession which was closely related to her father's profession. When I asked further about her imagery, she said that she felt very alone in the imagery, no one was around. All she could see was the vast sea. She felt empty. Then she said this imagery reminded her of a feeling that a politically exiled person who had to stay on a small lonely island might have felt. She felt sorry that she was born in her family. It was not her choice, but since she was born in her family she felt obligated to live up to her family's expectations. If she married the man her parents wanted, she thought that she would have to kill her individuality and only live for her husband. If she wanted to live her life, she not only had to go against their wishes and plans for her but also perhaps threaten her emotional tie to her parents. This music enabled her to be in touch with her long conflict with her family and helped her to talk about it in the group.

The last music that I chose was 'Storm' from "The Four Seasons" by Vivaldi, 2nd concerto ("Summer"), 3rd movement, marked Presto, played by Vanessa Mai. The electric violin and synthesizer sound effect is very dramatic and dynamic. This can evoke very active, dynamic images.

JungAh had an image that she was riding a motorcycle at a high speed in the dark and being chased by someone. She kept looking back to check the chaser. She passed through a tunnel and continued riding in a dark city night. At the end, she heard three gun shots and she felt everything was ended, and felt relieved. I
asked her if someone died in the gun fire and she said she was not sure who was killed. It could be her or someone else, but the important thing for her was everything was ended. She was glad that it was over by gun fire. When I asked her how she felt in the image, she said she was scared. I asked her if she had any idea of what chased her to death in her real life, but she had no idea. She only thought that she wanted to be done with the situation. She didn't care if she died or not.

This image was similar to her image of standing at the cliff. She was facing a deadly situation. Instead of trying to explore the situation and find a solution, all she wanted was to end the situation, although it could mean something very extreme. Also, she faced this dangerous, deadly situation alone. No one could help her.

InAh had an image of a ballerina spinning on the stage. Then the scene changed. There was a meadow and she was having a picnic with a bunch of children. Then they went up to the top of the mountain. There was a big lake, and the sky was very clear. All of a sudden, the picture turned upside down then came back to its original position.

It was interesting that she had contrasting images. When we heard Chopin's music she had a very active image and when we heard the very dynamic Vivaldi music, she had a less active image. I wondered out loud if it's her tendency to find what's lacking and try to provide it. It can be a very good quality
because it is complementary but if this is used extensively, she can't focus on her personal needs and can't be present.

Then, she shared what happened with her mother the previous week. She said her mother blamed her for everything and cursed at her. Although she knew that her mother was never really good to her, she felt sorry for her mother all the time. She felt that her mother was weak and poor, and she needed to take care of her mother no matter how hostile she was. She said "I try to imagine that my mother is dead and can't control me anymore but it's not easy to do. Although I feel blue today, my image is totally opposite."

I explained to her that dreams or imagery can serve the function of boosting us up. When we have a hard life, dreams or images compensate by giving us hope.

Music and imagery was a very useful tool in accessing the participants' conscious and unconscious materials. Music enriched their images and helped them access many aspects of their lives and share them in the group.

Members' Evaluation of My Intervention and Music

The last session was set for the evaluation. I asked the participants about their experience in the group in six categories: topic of the group; group experience; how this group met their expectation; the experience of music in the group; therapist's role; and criticism of the group.
Topic of the Group

Many participants shared that although they volunteered to participate in this study, they had only vague ideas about son preference. Participating in the group made them more aware of the notion of son preference and its effect on their lives.

JungAh said,

*For me, the timing was very good. I had a serious issue with my brother when I started the group and now I can see how my problem is part of a bigger picture that includes my birth, and my upbringing. I was able to see the force that has been operating in the background. This group gave me a chance to see the whole picture of my life.*

She continued that before the group she was not aware of her issue with her brother but this group helped her to see the patterns of her relationship and look into her issues more deeply.

Many people said that they were not aware of the topic son preference until they participated in the group. But this group made them aware of the deep rooted problem of son preference and its impact on them. They concluded that nobody can escape from this huge problem in Korean society. It's in the family, work, and every social situation.
JungAh said,

When I talk about this issue with other people after participating in the group, my girl friends agreed that their brothers were treated specially at home. But people take this for granted. Although they are angry at their brothers, family and society, since it's everywhere, they feel like they cannot do anything about it.

MinAh said,

I didn't think that this topic had anything to do with me. I was just curious about music therapy but soon I found out that I also had deep rooted son preference. I just took things for granted. There was pain and there were wounds, and I didn't know that I could express that I have been hurt verbally. This group gave me a chance to reexamine my relationship with my family. Ever since I started the group, I started dreaming a lot about my family. Maybe it has been there repressed, unconsciously. I loved coming here because it gave me a way to reconnect with my family. Now I feel like I have the courage to visit my family. I know that I won't be welcomed, but what the heck, just seeing where they are and where I am with them wouldn't be too bad. I learned a lesson from my imagery that I need to visit my family as a tree.
JinAh said,

*I thought I was aware of this issue and I was free from the notion of son preference. I was raised as a boy and also I have a son and a daughter. However, I always wondered why I couldn't have a nice relationship with my daughter. This group made me aware that I also had son preference without realizing it.*

**Group Experience**

Instead of individual therapy, I purposely chose to lead a group for Korean women who experienced son preference. As Prozan (1992) delineates, the commentary and community approval in group therapy and this kind of modality are especially important for groups such as "women and minorities, who are belittled and denied success in the larger society except in certain traditional roles" (p. 154).

The participants seemed to have a positive experience in the group. The following are their comments about their group experience.

*I always liked groups. I can have many second-hand experiences and be exposed to different things. I like the dynamic of the group too. I get to be in touch with my own thoughts through other people. If I am alone, I might always feel that I am right but if I am in a group and share feelings and thoughts with other people, I get to know that there is no one right way
and I get to see things more objectively. In the past, I hid myself a lot. I thought that I had to hide. But as I was more exposed to the group, I became aware that sharing is really helpful to me and therapeutic. Hiding is not necessarily healthy. Since I know that if I share more, I get more things out of the group, I became more active in the group.

When I am in individual counseling, I talk about myself and some things just don't occur in the process. I could focus on myself more and think over one thing in an individual counseling session. But in the group, by sharing, I can feel my pain through other people's pain. Each one is reflecting other people. This was very therapeutic for me. I also tried to hide myself a lot, always wrapped myself up. But now I realize that if I don't open up my issues, I will never be healthy and I will have to deal with all my problems alone. I think it is not important to be sensitive about how other people might perceive me if I reveal myself because I am desperate and have impending issues. I felt everybody was telling their own truth. This group was about us, that's why we could share so much. This group made me realize many things that I was not aware of.

I felt comfortable in the group. I know that being honest and true to myself is the best way to be healed. I think I utilized the group well.
There was one member who said that she was more a listener than a speaker in the group. She said that she had to give up her chance to talk about her issues for other people in the group sometimes because other people's issues seemed more important and also she was used to being a listener. However, she also agreed that it was helpful to hear other people's sharing and the group experience was positive experience for her.

**How the Group Met Their Expectation**

According to what the participants said, they seemed to be satisfied with the group in general.

*I didn't have a high expectation of this group in the beginning because I didn't even know that I was the victim of son preference. But the outcome was great. I loved the group. Whenever I came here, there were so many things that I could bring home with me. Yes, I looked back at myself again. I started seeing my wounds and pain. After the group, on my way home, in the subway, I felt like I was reviewing a film of my life. All the memories that I was not even aware of were passing as if I was watching a movie. That hurt, and I had to suffer for one week and then come here again. I really liked the process. I have more confidence in myself now. I used to be a person who didn't share my personal things with other people, but*
since the group started, I found myself sharing my stories with other people more. Then it was amazing how much they appreciated it. I really felt that people accepted me as I am.

I also had a very positive experience in the group. Every week, I had an expectation of this group. As I told you before, I always thought about what to bring into the group each week. I was very well prepared for the group because this group made me expect more and more. I always thought about what to talk about in the group, my issues. Although it was only for three months, people seem to notice the difference in me. Many people told me that I am less aggressive, gentler.

This group met my expectation. I experienced many groups as a leader and a participant as well. I was very curious about this music therapy group because I had never experienced music therapy before. I wondered how music can be used in the therapeutic group. I felt that although verbal process is an important part and the main part, when music is used, this can touch very deep issues. Art therapy is a good tool for expressing your conscious but music can touch the unconscious. And this group made me more aware of my body and mind connection.
Music

It was the first experience of music therapy for all the participants. They had no idea how music was going to be used in the group and how they might use music personally because except for one participant, they were not musicians. What follows are the members' comments on how music was effective in the group process.

I was amazed by people's different responses to the same music. It's all up to their unconscious. I wish I knew more about music so that I can use music therapeutically on my own. It's such a fascinating medium.

I majored in music. I played music for my entire life, but I only focused on the technique side. Experiencing music in this group was like getting to know about a totally new aspect of music that I've never known. ... I thought maybe I can pursue a career in music therapy.

Definitely music facilitated what we talked about. It stopped our brains and because of that we could feel more. Especially when I closed my eyes, I could feel myself and the flow of the music. I could be guided by the flow of the music.
When we did musical support for InAh, I was amazed by the power of music. The next week when she came in, she was much more active and even her voice was louder. Music can relax us and open us up to ourselves. Expressing myself takes courage. But in the moment when we make music and create sounds, things are already happening. When I choose an instrument to play and how I play it all represent who I am in the moment. I think that in itself is therapeutic. When I become an owner of myself, that's when it is therapeutic. It was mostly for her, supporting her but I could be in the process and I felt that I was healed, too. I could make my own sound with her. It was a great experience.

Through music, we can give and receive support at the same time. This is something that words cannot do. With words, we have to listen first, then respond. People cannot listen and talk at the same time but we can listen and express simultaneously in music. This mutuality of music makes a person who is expressing feel safe to express because she is not the only one who is making sounds. At the same time, those who are supporting become very active participants in the overall process. This musical empathy makes the therapy process communal rather than an individual exercise.

Music helped them see a different side of things.

*Music enabled me to see a different side of things that I don't usually see.*

*Especially when we did vocal holding, I had an image of my mom who*
was depressed. I never had thought of my mom that way. But it made a perfect sense.

I was surprised when I played the instrument in the group. I felt myself being very careful, cautious, and self conscious. These were so out of my character.

Music can reveal many aspects of ourselves which we are not familiar with. Since we can't exercise the expressive control in music as we do in verbal communication, more things can be revealed. For the participants, music evoked deeper and repressed materials.

If we say words can connect our conscious and unconscious, music can deal with the deep material in our unconscious. Therefore with music we can go deeper. If we say words can touch the surface, music can touch much deeper places. Music can be a medium for in-depth healing.

Making music makes me active rather than passive. When I do create something, it gives me courage. Making their own sound can be very effective for those who cannot access and express their pain through talking.
Therapist's Role/Leading Style

Personally, I don't believe in such a thing as the neutral stance of the therapist. No matter how hard the therapist tries, the personality and theoretical background of the therapist will leak into the session. Therefore, instead of repressing or constraining my personal and theoretical backgrounds, I tried to utilize them as a guide in listening to the participants and making interventions.

When I began the son preference music psychotherapy group, I had been practicing music psychotherapy for more than ten years and my approach had been a combination of humanistic and psychodynamic approaches. The form of music therapy that I practiced involved the symbolic use of improvised and composed music by the client and the therapist for the purpose of transformation, integration, enhanced self-awareness and self-exploration. In my verbal processing, I attempted to relate the music to the client's presenting intrapersonal and interpersonal dynamic, to their emotional history, and to the reality outside the therapy room. In addition, I sometimes combined music therapy and body work when needed.

Three years ago, I started my psychoanalytic training at The National Institute for Psychotherapies to deepen my work and enhance my verbal interventions. In this training, I was exposed to many psychoanalytic theories and practices. Among them, I was mostly influenced by contemporary self psychology, relational theory and intersubjectivity, which stress the mutual relationship between the therapist and the clients, addressing both intrapsychic and
interpsychic issues, the concept of enactment, and different self states (Arnon, 1996; Ghent, 1989; Mitchell, 1986, 1993).

At the inception of this research study, which was five years ago, I thought I would be a very active leader in the group because I am the knower (a Korean woman who experienced son preference) and I had tried to overcome my condition. Therefore, I thought I would be a strong guide for the participants by using a good deal of self-disclosure. However, my idea around this changed over time. I became more aware of the different effects of a therapist's self-disclosure on the clients. It can open up the clients more because they feel the therapist is human too (Maroda, 1998), but it can also close off further exploration by the clients and shift the focus from the clients to the therapist (Greenberg, 1995). I became more cautious in my use of self-disclosure and providing strong leadership.

As the group proceeded, I soon realized that I didn't need to be a strong guide who let the participants know, based on my experience, what path they needed to take and how to get over the condition of son preference. I developed a trust in the participants' own pace and process. I didn't need to push them or make them do something. Everybody has their own pace. I was more respectful of each participant's own development and trusted our process more. Instead of being a strong leader, I tried to be more of a supporter, a catalyst.

This kind of leadership style was not familiar to the participants. Since Korea is a very hierarchical society, most of its leaders show strong leadership
and the people expect to be led in this way and are ready to give authority to the leader. What follows are the comments from the participants.

*I always had a strong stereotyped image of a leader as a strong guide with charisma. But your style was totally different. It felt like you didn't play a leadership role, but when you said something, sometimes, you pointed out the essential things. It gave me lots of insight and helped me to look into my issues deeper.*

*I thought you were really patient and listening. You really listened and waited until things developed themselves. If you had inserted yourself more, it would have made me change what I tried to say. I think to be able to wait is a power, a strength for you.*

*Although you were listening and patient, you guided us very well. I think you controlled the group very well.*

However, one of the participants said that she felt judged by me sometimes. She said she was very aware of my facial expression. When my face was bright, she felt that she had done the right thing, but if she felt my face was darker, she didn't feel that she did a good job. It seems that since I did not lead as
strongly as she expected, she tried to pick up all the cues from me and use them as a guide to orient herself. She said,

*If you gave us more direction, it would be nicer. I was not familiar with this kind of unstructured group. In my experience, groups always had a strong leader and structure. You didn't push us but your insight really helped me.*

Many participants mentioned my insight as a therapist.

*When you spoke about the tree, something like "only after she blocks her eyes, nose, and mouth, she can be with her family", it was such an insight. I would have never thought of those things. Those comments made us explore issues in depth and process them. Also, many times you showed me different ways of seeing things. I really liked that.*

*I liked your insight. When we have an insight many leaders try to fix the problem. But you never tried to fix the problem or insist on your insight. You suggested it but never forced us to take your view. I think it's a tricky thing as a leader.*

Some of the participants said that they wished that I were more rigid about group structure in terms of assignment (writing journals after each session and...
sharing them with me) and attendance. If I had pushed them more, they would have gotten even more out of the group.

But other people had different ideas.

*Since we didn't have such strong structure, I got so much out of this group.*
*If we had a strong structure, I might have tried to obey and follow all the rules. Many things happened in the group so naturally. It was flowing; I just was in the flow. I didn't have any obligation or expectation to meet so it made me work more.*

*This group process is like natural healing. In the natural flow, it allowed me to spend the exact amount of energy and force that I wanted to spend, and made me express as much as I wanted. It felt so natural, a natural healing. Lots of space, and people could keep their own pace. Although you gave us interpretations, it was very well contained. You didn't force us to believe it or take it so it gave us more room to reflect and made things easy.*

**Criticism**

Although the evaluation from the participants was mostly positive, there were some criticisms as well. These were mostly about the degree of structure in the group. The following are theme statements of the participants.
I wish we spent more time playing music.

I wish you pushed us more, gave us home work and made us feel more obligated. That's how it has been.

I wish we had more structure.

I wish we had more educational stuff.

As a therapist, it was difficult to deal with the participants' irregular participation in the group. The participants not coming on time and missing sessions affected the group dynamic. Also, since the participants arrived for sessions at different times, we spent much time waiting for people to come. We tried to save music for the whole group to experience, but often we ended up waiting and talking and not having enough time to play music and process it.

One of the participants thought that we spent much time not addressing the topic of son preference but talking about issues in our everyday lives. If I provided small topics for the group to concentrate on every week and provided some educational material, the group would have been more focused. Also, I could have approached the group more systematically, with a goal in mind that after twelve weeks, people would have a certain level of awareness.

I agree. But there were some issues around balance - how much to meet my needs and how much to meet their needs. If I considered my need to be more important, I might have tailored the group in the direction that I wanted, which
was not necessarily in accordance with the participants' needs. If I only focused on the participants' needs, I had to address their everyday life issues and the scope of the therapy group might have been too broad for twelve week short term therapy. So I had to assess constantly and carefully to find a place where both of our needs were met.

Listening to the participants' experience of the group was very helpful. I was glad that my experience and assessment of the group was close to their experience. It served a function as an informal member check.
In this chapter, I will synthesize what I learned from the study. First, I will explain the background of son preference and present important issues related to the topic in order to give a more expansive overview. Then I will discuss the importance of music therapy as a treatment modality for Korean women who experienced son preference.

Understanding Son Preference in Korean Culture

One participant said that she had no thought that she was being discriminated against when her brother went to private school while she and her sister attended public school. She thought it was natural that her brother had privilege and was treated as being most important even though her sister was the eldest child in her family. The thought that son preference existed in her family never occurred to her until her parents decided to leave their property and money solely to her brother.

Many participants stated in their evaluations that they had only a vague idea about son preference. Although this deep rooted notion is ingrained in their culture and daily activities, it was something that they were aware of only on a superficial level. They didn’t know that it was a source of problems even though
they had volunteered to participate in the group. They didn’t recognize that they were practicing son preference themselves in their daily lives. Participating in the group gave them a chance to question things that they took for granted. Raising a question is the first step in a process of change.

As they questioned their perceptions, relationships, culture and activities in relation to son preference, fragments of a global picture appeared and were pieced together like a mosaic. This process helped the group gain a broader and clearer impression of the issues that were affecting them.

Confucianism and Nam Jon Yeo Bi

As a result of my own inquiries, I have come to understand that the basis of son preference lies in Korean culture’s deep rooted and prevailing Confucianism and the notion of Nam Jon Yeo Bi. Confucianism originated with the teachings of Confucius, and is a religio-philosophical amalgam that profoundly influences the vast majority of the population of East Asian countries, including China, Japan, Korea and Vietnam. (Slote, 1992; Tang; 1992). Among these countries, Korea is the country which practices this idea in its purest form (Cho, 1998). In this Korean practice of Confucianism, which is based on strong patriarchy and hierarchy, human interaction is based on protocol, and as long as all parties learn and practice its rules, stability ensues.

In terms of the relationship between men and women, Confucianism is permeated with the notion of 'Nam Jon Yeo Bi' meaning men are respected and
women are demeaned. There are three rules that women should follow, known as
'Sam Jong Ji Do.' This means that as a child, the girl belongs to her father; as a
bride, to her husband; and when the husband dies, she obeys her sons. From this
viewpoint, sons and men are highly valued while women are considered
secondary, or objects that have no agency.

Also, Confucianism stresses hierarchy. It tells people to be obedient both
to its rules and to people who are older and in a higher position in the society.
Since the central unit of society is the family, not the individual, authority is
autocratic and hierarchical in a family (Tang, 1992). Because each person is an
integral part of the family unit, the expression of individual needs and desires is
considered selfish. Therefore, the sacrifices made by a mother and daughters for a
father and sons was appreciated but not viewed as anything extraordinary. Also as
a part of the contract between family members, it is assumed that those in
authority, that is, the older men, will know best what is necessary to maintain the
harmony and prosperity of the unit. Therefore, a child who challenges the
authority of parents or asserts personal feelings or opinions is considered
disobedient to parents or unfilial (Slote, 1992; Tang, 1992).

I find that the strict hierarchy postulated by Confucianism, and
particularly the notion of Nam Jon Yeo Bi, contain the basis for the practice of
son preference. Unless we challenge this notion that we now take for granted, we
will repeat the same path that our parents followed.
The Shared Experience of Lost Childhood by Mothers and Daughters

As I mentioned in earlier chapters, most of the participants felt unloved by their mothers. Through inquiring about this matter, a different view of their mothers began to evolve. In the beginning of the group, the participants shared a uniform view, that they were the sole victims in their relationships with their mothers. However, they began to understand their mothers' subjective experience in these relationships and to realize that their mothers were also victims of the son preference culture. They, too, were not welcomed and loved by their parents and had to live their lives in submission to their husbands, perhaps to an even greater degree than the participants. Although their mothers were adults chronologically, there was a child remaining inside each of them, because they had never been fully allowed to be children in Confucian culture. Although they had their own pain and wounds, they never had a chance to reflect or raise a question. Instead, they had to keep everything inside and bear their pain. Inside of each woman, there was a little girl who was unappreciated, developmentally arrested, and who grew up to compete with her own daughters.

As I described in an earlier chapter, one participant had an image of her parents as children when we had a music and imagery session. This clearly captures the inner child of her parents. She knew in a way that her parents couldn't provide shade and comfort for her. Instead she had to provide it for them.

This view of their mothers helped the participants become more understanding and less blaming of their mothers' behavior when they were little.
They began to see the picture of the relationship with their mothers in a bigger context, historically and socio-culturally.

**Love or Responsibility**

In the process of sharing experiences they had with their mothers, the participants started inquiring about the nature of mother's love. Was it love or mere responsibility? This issue brought considerable tension into the group, because there were members who clearly separated love and responsibility and people who believed responsibility is a form of love.

The ones who supported the idea that love and responsibility are different claimed that although their mothers provided everything that they needed, they always felt empty inside and misunderstood by their mothers. As one of the participants said, her mom provided her with food and clothing and sent her to school, but didn't know how to be intimate with her children. That's why she had been waiting for her 'real mom' to come and rescue her from the cold, icy home environment.

Parental love surely entails many responsibilities, including setting boundaries. Therefore, many people have confused responsibility with love. Some parents think that when they have performed their parental duties that they have done everything possible for their children. However, as Ferenczi (1949) delineates, it's not merely her behavior, but the mother's emotional attitude toward them that children are very attuned to. When parents only fulfill their parental
responsibilities without having and expressing loving feelings toward their children, this lack of feeling is conveyed to the children and they feel unloved no matter how many material things they receive from their parents.

The group participants believed that their mothers had to work surreptitiously and actively in order to preserve their position in the family structure. This was no mean feat when it is taken into account that they were at a serious disadvantage with regard to the male-female, mother-father, husband-wife power differential. In this process they didn't get support from others and had to manage many things alone. Living their own lives was already difficult for them and there was little or no room for their children's emotional needs. When their children asked for more attention, instead of attending to their needs, these mothers blamed their children for being needy. Since they hadn't had a childhood in any familiar sense and their own parents paid no attention to their emotional needs, many mothers of the group members didn't know how to deal with emotional needs. Their own children's emotional needs felt foreign to them.

Father's Absence

There was very little discussion among participants in the group about their fathers. This was surprising, both to me and to them, given the fact that our topic was son preference and men were very important in Korean culture. It seems that in Korea, a strong patriarchal society, fathers have the highest position in the family and their authority cannot be questioned. When participants recalled their
fathers, they said that fathers were powerful, having utmost authority, but not having close relationships with them. Fathers were absent a lot of the time. It seemed that the greatness of a father's power and authority in the household was alienating and overshadowed any personal, human qualities he might possess. Many participants didn't have memories of playing with their fathers, or they felt that they didn't have a chance to get to know their fathers.

The presence of their mothers was very strong in the lives of the participants. Of course, in the traditional culture, gender roles are very rigid and clear. Most of the fathers were breadwinners who spent much time outside of the home while mothers stayed home with their children. Despite the fact that Korean society strongly values sons and males, mothers have a strong presence in the home and are more involved in the lives of their children. In fact, it appears that Korean mothers are overly involved with their children in a solicitous and manipulative way that tends to prevent fathers from having intimate relationships with their children. According to Cho (1998) "mothers have secured their position and exercised their power within a patriarchal family system by creating focal families of their own through emotional ties of loyalty, thus binding their children to them and excluding the fathers" (p.188).

Societies strongly influenced by Confucianism guaranteed tremendous rewards for a mother's devotion through extreme emphasis on the value of motherhood. This is an example of a male dominated ideology in which women
can only attain respect from others by helping men. Such a value system excluded any other types of women's devotion or faithfulness, such as sisterhood.

**Women's Enemies Are Women**

Many participants expressed the belief that women's worst enemies are women. Women value men over women, treating them as more important. Such an attitude can be explained as "identification with the aggressor" (Freud, 1938), or as transmitted intergenerational trauma (Adelman, 1995; Miller, 1994).

However, I find that Gramsci's theory explains this phenomenon most satisfactorily. He observes that such a phenomenon often occurs in groups that are minorities or that have little power. Instead of uniting to assert their power and work for their own group's interests, they do the opposite. People in the minority group tend to identify with the values of those in power and help maintain the biases that are part of the status quo. Gramsci (1971) using the concept of hegemony, explains how the ruling class maintains control not just through violence and coercion, but also by creating an ideology that becomes the source of common sense values for all. Thus, a consensus culture develops in which people in the minority identify their own good with the good of the majority. Rebellion is rarely considered.

Women incorporate society's values – the male's values – without questioning whether they are beneficial. One participant who is single said that she prefers boys to girls because she thinks that girls are “more complicated” than
boys. And many in the group agreed that girls are “more difficult” than boys. Is this really true? Or does our culture impose and project these attributes and qualities onto girls and women? Women also tend to blame women for their problems in the case of extramarital affairs. Instead of reproaching husbands for their infidelities, wives blame and demonize lovers for seducing their husbands. Lovers in turn blame wives for no longer being desirable objects for their husbands.

Many women consider themselves to be autonomous and independent subjects who can think and act independently. However, when we inquire as to how these women see and define themselves, we soon discover that women's definitions of women are based on men's views of women, their introjected value of women (Kim, 2001). This tendency is reinforced by Korean Confucianism and Korean Confucian culture, which strongly and singularly emphasize women's value as a mother. Also, as Lee (1998) says, son preference and the rigidity of the social hierarchy within which it operates tend bring women into conflict with each other while discouraging the pursuit of other types of women’s values and camaraderie.

**Moral Defense**

One of the biggest challenges for me as a therapist and researcher was the irregular attendance of the participants. Once the participants came to the group, the level of sharing and their eagerness to explore more about themselves in the context of their family and society was very high. However, on many occasions, I
had to wait anxiously for them to come. Only two participants came on time and attended most of the sessions, while the rest were often late or missed sessions. Although they had credible reasons for being late and not coming to the sessions, I wondered if they were experiencing resistance against the therapy process. Resistance against the therapy process and/or negative therapeutic reactions happen often when clients face difficult material in therapy which they want to deny or which challenges their existing world view or organizing principle.

When I attempted to address this issue in the group a couple of times, the members denied any resistance against the group process. Therefore, we couldn't explore this issue further in the group. As a result, I spent much time in my supervision speculating on the many possible reasons for the participants' not showing up on time and missing sessions. I also discussed my feelings around this issue in my personal analysis. With the help of my supervisor and my analyst, I was able to be in touch with my past therapy experience and recall how difficult it was to face things that I didn't want to face and how scary it was to step out of the familiar pattern and initiate changes. This process helped me empathize more with the participants and be more tolerant of their resistance.

Although the participants also wanted to change, and that's why they volunteered to come to the group, there were many things happening on an unconscious level. One of the tasks that we were undertaking in the group was revisiting childhood and exploring relationships with parents. In this process,
many people explored feeling not being loved, and being hated by their parents. This led to another question: Were they bad or were their parents bad?

Fairbairn (1943) talks about "moral defense." Children need to see their parents as good, although this might mean seeing themselves as bad, which he highlights by stating "it is better to be a sinner in a world ruled by God than to live in a world ruled by the Devil"(p.66). Children cannot feel that they are good or that there is hope of love and goodness if they see their parents as bad. If the children are the bad ones, they can hope for change. If they blame themselves, there is always a chance to get better if they only try harder. If they are good enough, their parents will love them and they will live together happily ever after. However, if their parents are bad, then no matter how hard they try, the situation won't change and they will suffer forever. Therefore, using this moral defense, people not only maintain the ties to their parents which give them security, but also save hope. Challenging their view of the benevolence of their parents through the therapy process must have been difficult for them, although they were not consciously aware of this.

Actually, one of the participants became physically ill after we questioned our mothers' love (Was it love or responsibility?), and she didn't show up for the next session. Another participant was absent after a session in which she spoke of her mother's emotional abuse. Instead, she visited her mother, who was in a nursing home.
Such events helped me to achieve a balanced view of the therapy process. Though it was important to note the willingness of the participants to change and my eagerness to help them with this process, it was equally important to address and acknowledge their underlying anxiety about this very possibility.

Such realizations also impacted my conception of this study as feminist research. Although the ultimate goal of such research is to address issues of concern to women and initiate social and cultural change, it appeared that there were significant preliminary steps to be undertaken before such activities could commence. The participants were clearly having difficulty with self-awareness, self-perception, and the recollection and understanding of their own experience. Since such qualities of understanding were pre-requisite to any attempt at external change, the research process and the therapy process began in these areas. It was here that music proved an invaluable tool in enabling the participants to make progress.

**Integrating Music Therapy and Son Preference**

It is amazing the depth and breadth of experiences that the participants were able to share with me despite limited sessions and participants. If the group had used talk therapy exclusively instead of music therapy, would I have had the same result? I don't think so.
Emotional Expression in Korean Culture

Korea is a repressed society. Expressing one's emotion is not encouraged. There are several reasons why Korean culture became repressive. Korea has a long, sad history. As a small peninsula in the Pacific rim, Korea had been invaded by adjacent strong countries such as Japan, China and Russia numerous times, and the land often became a battle field of strong countries fighting against each other. As a consequence, destruction, suffering, personal loss and unbearable pain impacted the Korean people. However, since Korea was weak, fighting back or taking revenge was not an option. Korean people had to endure the pain without expressing it. Internally, old Korea had a distinct caste system where the higher caste abused and oppressed the lower caste. Under this system, people had to suffer abuse and oppression. When they expressed their anger or complained about injustices done to them, it caused retaliation and made things worse. As a result, they learned not to express what they felt, swallowing their pain and blaming their fate.

Confucianism in Korea had a big role in discouraging people's expression. Confucianism is based on strong patriarchy and hierarchy, and asks people to follow rules and obey them in order to ensure societal stability. The person in the higher position, inevitably a male, is automatically imbued with both more power and more knowledge. Obedience to this person is a given, not something to be questioned. Expressing one's needs, especially if they are different from the norm or from the needs of those in authority, is perceived as bad. Therefore, Korean
women, who are typically lower in the social hierarchy, are even more restricted in regard to the allowable range of emotional expression.

As was illustrated and codified in Sam Jong Ji Do (three rules that women should follow), women were asked to follow men throughout their lives. It was considered a virtue for women not to have their own minds and agency. There is an old Korean saying that a newly married wife has to live a life as a mute for three years, as deaf for another three years, and as blind for three more years. What can we imagine would happen to people who don't express themselves such a long time? The answer is that they would lose contact with their own feelings and become numb.

In this repressed culture, music served as an important means of addressing and expressing people's feelings in a socially accepted manner. In fact, singing songs played a significant role in the lives of Koreans. Many folk songs and lullabies had repetitive melodies and rhythms that served as a basis for improvising lyrics. In this process, people made up lyrics based on their common life experiences. They expressed the suffering, injustice, sorrow and grief in their lives as well as their joy and happiness. By singing aloud, people were able to blend and harmonize their repressed emotions and achieve a level of intimacy with others. This traditional use of music and song continues at present. In Korea, singing is not merely for the gifted vocalist, but for everyone. People sing together or take individual turns to sing at many gatherings. The presence of countless NoReBang (singing rooms; rooms with karaoke machines) attest to the
love of Koreans for singing. People of all ages have access to NoReBang. They go there individually or in groups to reduce stress, declare who they are and what they are feeling, and simply to enjoy singing.

Music Therapy and Son Preference

Korean women who experienced son preference showed me how their feelings were denied and not validated, and how their needs were not recognized and met. To be cut off from their emotional experience was normal for them in such an environment. That's why participants didn't recognize that they felt pain in our early therapy sessions. Only after their dormant and repressed feelings were touched by music and validated by the therapist could they get in touch with their feelings, own them, and further express them.

How can we access our feelings if they are buried so deeply that we don't even realize they are buried? As a music therapist, I was often faced with Korean clients who had difficulty expressing themselves. They were not sure about what they were feeling and what they were thinking. It was not because they didn't feel anything or they didn't have any ideas. It was because they didn't have access to their experiences. With the participants of this study, I had a similar experience. My challenge was to find ways to help them to express a part of themselves that they weren't even aware existed. To do this, they first needed to experience their feelings. Music was the most important medium in helping them make contact with their emotions.
In his book "The Developing Mind," Siegel (1999) says that the process of creating and listening to music is a form of emotional experience: it reveals aspects of the emotional life of the person who creates and listens. Music, among other things, is a type of affective communication. And in fact, music making in the music therapy group helped the participants experience and identify their emotions. At first, they were not aware of what they were expressing in the music. They just played or sang without any intention to evoke specific feelings. However, as they kept making music, it became clearer what they were experiencing. This in turn helped them to become more expressive, sometimes despite pain and difficulty. Moreover, since the musical form combines emotion and intellect (Cooke, 1959), music making helped the participants to talk about their feelings and the images, sensations, memories, and interpersonal experiences that were evoked in the process of making music, with which Turry (2006) would concur. That's why I was able to gather so much verbal data regardless of the limitation of time and the number of participants.

The participants in the study were women whose childhoods were lost. For them, music making in the sessions gave them an opportunity to play, both literally and figuratively (Pavlicevic, 2002). Playing a variety of instruments was a new experience for the participants. Exploring the instruments and exploring the sounds is like playing freely with toys. The instrument can be anything they want it to be, what they project or they want to express. There is no right or wrong way to play music in music therapy. The clients can choose the instrument they want
to play, and they can play in whatever way they want to, like children do with their toys. They can enjoy what they are doing without worrying about being judged. Through music making, the participants were able to have an experience akin to that of being a child and were able to reclaim, to some small degree, their lost childhood. This also was facilitated by my cultivation of a non-judgmental attitude and provision of a mirroring and holding environment.

Siegel (1999) writes that emotional processes are not easily translated into words and nonverbal expressions can transfer information about internal states of mind more fully to the outside world than words can. As a music therapist, I was trained to pay attention not only to the verbal content of the session, but also to the music itself and other aspects of nonverbal communication, such as gestures, facial expressions, music of the words, tone of voice, and mood of the participants as they talk and play. This training helped me to be extra attentive and receptive to what I was hearing from the participants. This enabled me to notice and empathize with things that they were initially not aware of, which in turn made them feel heard and seen to an unusual degree. Since the participants' feelings and needs were neither acknowledged nor validated by their parents and Korean society, having such an experience with me had a big impact on them. When they felt acknowledged and validated by me, they felt encouraged to express themselves and to further elaborate their experiences.
I would like to close this chapter with a quote from Volkman (1993) who talks about why music therapy is an important treatment modality for traumatized people.

Music can contain the paradox, ambivalence and intense passion often associated with traumatic experience. It can act as bridge for time travel, containing past, present and future simultaneously while still exemplifying the flow of process. ... Through musical improvisation, experience is reunited with affect extending into a larger social context outside the self. The instrument/music acts as transitional object, bridging internal and external worlds as well as past and present. Although circumstances of the past may not be changed, a new way of relating is discovered. Musical improvisation gives the individual the power to respond. It is what was originally taken away from a traumatized person by perpetrators or circumstance. Improvisation goes beyond the telling the details, combining the story, the emotions and an active response. (p.250)
Reflecting on my research process, I revisited my research question. "What unique factors arise when a clinician-researcher has a personal experience with the phenomenon being studied?" In this question, there are three areas that need to be addressed. First, what the possible benefits and dangers are when the therapist has encountered the same traumatizing condition as her clients, in this case as a victim of son preference. Second, what the possible benefits and dangers are when the researcher has a dual role and studies her own work in an area of trauma in which she has personal experience. Last, how conducting the research and the therapy simultaneously assists the therapy process.

**Therapist Having the Same Condition As the Clients**

In discussing Heuristic research, Moustakas (1980) talks about the necessity for the research topic to originate in the researcher's biographical concern. In his case, his experience of facing his daughter's imminent heart surgery and a premature death initiated his search into loneliness. Moreover, he delineates how his subjective experience of loneliness makes him connect, listen to and focus on the participants.
This same dynamic can happen in a therapeutic relationship, too. When the therapist and clients have similar conditions, the therapist can engage with the clients more easily, be more focused, and eager to help the clients. Of course, these positive outcomes can happen only after a therapist has worked through her issues in her own psychotherapy experience as a client and with the help of supervision.

In traditional psychotherapy, a therapist is perceived as a blank screen and an object of the patient's drives. In this model of therapy, the therapist is viewed as having an objective stance and not having his/her own subjectivity. Three hallmarks of a therapist in classical models were abstinence, neutrality and anonymity (Freud, 1958a; 1958b). In this circumstance, a therapist's countertransference is considered a problem. It is perceived as a hindrance because it discourages the patient's transference reaction. So it was something to overcome because it was seen as coming from the therapist's unresolved conflicts. Freud believed that if a therapist thoroughly worked through his issues in his personal analysis, he wouldn't be affected by his own countertransference reaction (Freud, 1957). Therefore, having a countertransference reaction means that the therapist hasn't fully worked through his/her issues. And a therapist who has countertransference reactions was considered to be lacking professionalism and/or maturity.

However, this view of the therapist's countertransference has changed over time. Among contemporary psychotherapists, it is no longer believed there can be
such a thing as a neutral stance of the therapist no matter how hard the therapist works through his personal issues in his personal analysis (Fosshage, 1995; Heiman, 1950; Joseph, 1984; Kohut, 1971). The therapist's countertransference also receives positive attention. It is considered a valuable asset in the treatment process, because the therapist's emotional response to the client can provide tools that are most useful in understanding the patient's unconscious (Bacal & Thomson, 1993).

The psychotherapist's attunement to his/her own subjective pain and corresponding resonance to their particular patient's pain may have contributed significantly to their being optimally responsive. Rogers (1995, 2006), talks about how her experience as a victim of child abuse and her personal therapy experience as a patient enabled her to hear and see her abused clients better. She was able to reach patients whom other clinicians had been unable to reach. Since her experiences similar to those of her patients, she could empathize with them more successfully. This made her clients feel understood and enabled them to trust their therapist more and open up more, which helped the therapy process greatly.

The topic of my dissertation came from my personal lived experience. Since I was a victim of son preference and knew how much this notion affected my life, I wanted to explore this phenomenon and let others know the negative impact of son preference so that we could prevent future harm to our daughters.
As I expected, what the participants shared in the group was very similar to what I experienced in my personal life and discovered in my past therapy process. My past as a woman who had experienced son preference helped me to engage better with the participants and to be more enthusiastic about the process. The high level of interest and eagerness to help, stemming from my own experience, sometimes made me slip from my role as a therapist. I found that I often extended myself too much by being available on the phone and through e-mails outside of therapy and going over our session time.

Some people might say that since I was personally involved with the participants so much, I violated therapeutic boundaries. However, Winnicott (1975, 1997) and many other therapists (Kohut, 1984; Slochower, 1996) who applied less rigid boundaries with their patients, might say my having flexible boundaries actually helped the participants feel that they were being taken care of and enabled them to trust me more, which worked positively in the therapy process.

Also there were times that I felt disappointment, despair, anger, and overexcitement toward the participants. Since I had been recording and transcribing the sessions, I was able to pick up those moments when I listened to the recordings and brought these into my personal analysis and supervision. With the help of my analyst and supervisor, I was able to reflect on what had been going on within me at those particular moments, and this helped me to be ready subsequent sessions without being driven by unconscious personal motivations.
The Clinician/Researcher

Throughout this research I was in the dual role of both researcher and therapist while also being the victim of son preference. There are concerns about studying one's own clinical work. Smeijsters (1996) says that the therapist cannot be a trustworthy observer of his or her own work and suggested the use of a research team. Although there could be issues of trustworthiness both in a researcher undertaking such self-study, and with the researcher being too close with the participants, such a researcher's relevant personal and clinical experience can also benefit the overall process by encouraging more in-depth data from the participants (Lipson, 1984). Moreover, as long as the researcher is aware of self-scrutiny and continuously engages in self-examination, the researcher can detect the stories behind the stories which are associated with thoughts, feelings and information and are not accessible under tightly controlled circumstances (Berg & Smith, 1985).

While I led the group, I was in personal psychoanalysis twice a week, which helped me identify myself with my participants and at the same time distinguish my experience from theirs. Also, having a place that I could freely explore my feelings and pain as my group vividly reminded me of my old wounds, without feeling judged, gave me an emotional outlet so that I could be refreshed when I saw the participants the following week.

At the same time, I had a supervisor whom I could meet weekly and talk to about the group. This opportunity helped me to examine myself as a clinician and be
aware of my perceptions and any biases which could get in the way of listening to the participants' narratives. And when I felt stuck, I actually got some practical help that I could apply to my group.

On top of that I met my support group which consisted of Korean music therapists and psychotherapists regularly and they were a great support throughout my research and writing process. I discussed my process and their feedback was very helpful in getting alternative perspectives and monitoring my blind spots. Most of them had been through their own dissertation writing process and they helped me trust my own process and encouraged me when I faced writer's block.

However, I cannot deny that it was challenging to have a dual role as a researcher and therapist, especially when my researcher self was anxious to get enough data within a limited time frame and pushed my therapist self. However, this tendency was soon caught in my analytic memo, supervision and peer group. Therefore, I could use my personal responses to understand what was going on within me, within the participants and between me and participants, which helped me to bracket my experience and to be there for my client-participants more.

Learning and doing qualitative research, I found that there are many similarities between qualitative research and the therapy process. Especially in contemporary psychotherapy, a therapist's personal history can be used as an effective tool to access and understand the clients, as a researcher becomes a tool in qualitative therapy. The therapist is required to explore his/her issues in order not to impose his/her personal burden on the clients, just as a qualitative researcher is required to do ongoing scrutiny.
of herself throughout the process. Being aware of the client's issues, the therapist doesn't impose what he/she thinks is important on the patient. Instead the therapist helps the client unfold and evolve in the process, just as a qualitative researcher, although she has a research agenda in mind, doesn't impose her values but instead lets the participants' agenda unfold and lets them speak their own version's of their stories. Therefore, the roles of researcher and clinician were not necessarily in conflict with each other. Rather they seemed to be compatible to me.

A strong supporter of the clinician as researcher, Aigen (1996) says "experienced clinicians working on an advanced level are in the best position to know what research topics will be applicable to their work. Using their expertise will help ensure that the products of our research are read and applied by those in the best position to make use of them" (p.18). I hope this research will get the attention of my music therapist colleagues and encourage them to find research topics which stem from their own lived experience and are more relevant to their clients.

**Conducting Therapy and Doing Research Simultaneously**

There are some concerns about researching a course of therapy while it is in progress. Some researchers argue that research can change the therapist's intervention and therapy process, and these changes are negative for the client regardless of the precautions taken. Therefore, they believe that any research on clinical work should take place only once the client has finished treatment.
However, Aigen (1996) disagrees with this idea. According to him, first, the potential conflicts or drawbacks for the clients can be managed through the supervision process. Second, if we know a course of therapy will be researched, just waiting for the therapy to end in order to start research doesn’t ensure that the same potential problems will not be activated. Third, there are benefits to clients in having their therapy researched. Since a therapy that is researched will undergo more scrutiny than a non-researched therapy process, the clients will benefit from this increased attention.

His last point was especially true in terms of my experience. Since I knew that this therapy group was also my research group, I paid extra attention the group process. My session notes were longer and more detailed than my regular session notes. Since qualitative research required recursive data analysis, I had to revisit my sessions several times. Whenever I revisited them, I had more understanding, more layers of the stories, and more layers of the session. Therefore, the client-participants received more attention from me than my regular clients. Also they were somewhat proud of themselves in the sense that they were contributing to a body of knowledge that will help other people understand the phenomenon of son preference.

Usually the data collection and analysis begin simultaneously in qualitative research. From the first session, I was very engaged with the therapy and the research process. After each session, I wrote down the session notes and if I found a chunk of time, I sat down and transcribed the session verbatim. If I
could not do it in the same day, I made sure that I transcribed it before the next session.

As Aigen (1996) says, the process of practicing therapy and doing research at the same time worked well in my case. As I mentioned before, being a therapist and being a qualitative researcher share much common ground. Therefore, analyzing the sessions as a therapist and analyzing the data as a researcher informed each other and this ongoing and recursive analysis process gave me a focus for subsequent sessions and further data gathering, and broadened and challenged my perspectives.

Implications for Further Research

This study focused on Korean women's lived experience of son preference. Since qualitative research is value bound, my understanding and findings regarding this phenomenon can only present a part of the full reality of Korean women who experienced son preference. Because all the participants happened to be born in Korea and came to the U.S. later in their lives, the focus was limited to their experience of son preference in Korean culture in Korea. Other issues that I expected to come up in the session such as racism, loneliness, alienation or bi-cultural issues in relation to, or on top of the issue of son preference were not addressed sufficiently.

In addition, it is possible that the sample only represents a certain type of Korean woman who suffered from son preference. Because all the participants were Christian, this sample only represents women who sought connection and help.
Therefore, the sample can be said to be limited to women who are struggling to overcome their wounds.

As addressed in the participants' discussion, under the culture of son preference, although men get more attention and importance in the family and society, they are victimized as well through the pressures from family and society to be strong and able. Since they know that their being means a lot to their family, they feel tremendous responsibility. One of the participants said that when she saw the recruiting flyer for this study in her church, the male friend who also read the flyer said that it was not fair that the researcher was only recruiting female participants. He said that he was the victim of son preference too but people only recognize women as victims.

For future research, it would be interesting to study a mixed group of male and female client-participants in a music psychotherapy setting with the same topic so that we can compare the lived experience of son preference in both male and female participants' lives. Also it would be intriguing to see the dynamics of the male and female participants in verbal and musical interaction and their attitude toward a female therapist-researcher.

Since son preference is a notion that is shared in many East Asian countries, conducting cross-cultural research on this topic can be interesting too. What are the similarities and differences in the experience of son preference among participants from different countries and how can the universal language of music help bridge different cultures, and the conscious and unconscious experiences of the participants?
Some people might wonder about my musical choice. Why I predominantly used western style music although all the participants were Korean and we dealt with a very Korean phenomenon. It's sad to admit that Korean culture is saturated with Western culture, especially American. After the Korean War, in order to overcome ingrained poverty and advance economically we indiscriminately accepted Western culture and standards. Western culture was perceived as something new, sophisticated, and desirable while Korean culture was perceived as something old, primitive, therefore not worthy of pursuing. In this process, we didn't value our culture and began to lose our cultural identity. In terms of music, Korean people are much more familiar with Western style music and Korean traditional music feels foreign to them. Although there is a movement to restore our own cultural roots, still Western culture is pervasive in Korea. It will be interesting to conduct research on this topic using Korean traditional music to see if there will be any different results.

Studying my own work was a very challenging and interesting experience. It gave me an opportunity to learn more about myself as a person and as a therapist as well as about my clients. Also, my understanding of myself and clients enabled me to work more effectively with my client-participants.

Throughout this therapy and research process, I was glad that I utilized the voices, feelings, thoughts and meanings of the participants. I cannot thank the participants in this study enough. They have allowed me and the readers of this study to enter into their private lives, showing their pain, healing and hope. Throughout the process of therapy and research, I felt more dedicated to working for women's mental
health and raising people's consciousness so that we can prevent future harm. I hope parents, educators and policy makers will be more aware of the impact of son preference on the budding selves of children through this study and reflect what they learn in child rearing practices, educational methods and policies free of gender bias in their conception and administration. And more, I want to encourage music therapist colleagues to join with me in this effort. This study presented both the clients' pressing clinical issues and the socio-cultural background relating to them. I hope it will be helpful for music therapists in integrating both these domains in music therapy sessions.
BIBLIOGRAPHY


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APPENDIX A

RECRUITING FLYER (ENGLISH)

Music Psychotherapy Group with Korean Women
Who Experienced Son Preference

Have you experienced discrimination against you because your family had a
tonight of son preference? If yes, here is a place to share your experience with
other women who have similar issues with you. Hea-Kyung Kwon who is a
doctoral candidate from the Music Therapy program in the Department of Music
and Performing Arts Professions in the Steinhardt School of Education at New
York University NYU is looking for people who are willing to participate in a
music psychotherapy group which will explore the issues of son preference.
Participating in this group may give you a chance to reflect on your life which can
facilitate the choices you make and to have a broad perspective of son preference.
This music psychotherapy group will be conducted as a part of Hea-Kyung
Kwon’s doctoral dissertation and her faculty sponsor is Barbara Hesser. Hea-
Kyung Kwon is recruiting Korean female participants over 18 who experienced
son preference throughout their lives. Eligible participants will engage in a 12
week music psychotherapy group.

For more information, please contact:

Hea-Kyung Kwon. M.A., NRMT, LCAT

HQK6439@nyu.edu 917-250-3224
APPENDIX B
RECRUITING FLYER (KOREAN)

남아선호 사상을 경험한 한국 여성들을 위한
음악 심리치료 그룹에 참가하실 분들을 모집합니다

가족들의 남아선호 사상으로 인해 마음의 상처를 받은 적이 있으신가요? 만약 그렇다면 여기 당신과 비슷한 문제를 가진 여성들과 자신의 경험을 나눌 장소가 있습니다. 뉴욕대학교 슈타인하르트 교육대학 음악치료학과 박사과정에 있는 음악치료사 권혜경이 남아선호 사상이라는 주제를 탐색할 음악심리치료 그룹에 참가할 분들을 찾고 있습니다. 이 그룹에 참가하시는 분들은 자신의 삶을 되돌아 볼 수 있는 기회를 가지게 될 것이고, 이는 살아가면서 보다 나은 선택을 하는데 도움을 줄 수 있습니다. 또한 이 과정을 통해 참가자들은 남아선호 사상에 대한 보다 폭넓은 시각을 가지게 될 것입니다. 이 음악 심리치료 그룹은 음악치료사 권혜경의 박사과정 논문의 일환으로 수행되는 것이고, 연구자의 지도교수는 뉴욕대학 음악치료학과 학과장인 바바라 헤서 교수입니다. 이 그룹의 음모 대상자는 남아선호 사상을 경험한 18세 이상 한국 여성들이며, 참가자는 일주일에 한번씩 90분 동안 음악 심리치료를 12주 동안 받게 됩니다.

보다 자세한 정보를 원하시면 아래로 연락을 주세요.

한국, 미국 공인 음악치료사 권혜경(MT-BC, NRMT, LCAT)

E-mail: HOK6439@nyu.edu / kwonheakyung@yahoo.co.kr
Cell: 917-250-3224
CLIENT CONSENT FORM

The purpose of this study is to investigate the impact of son preference on Korean women’s lives through music psychotherapy group process. Son preference is a condition that strongly exists in a number of Asian countries. This study will be conducted by Hea-Kyung Kwon from the Music Therapy program in the Department of Music and Performing Arts Professions in the Steinhardt School of Education at New York University. This study is being conducted as a part of her doctoral dissertation. Her faculty sponsor is Barbara Hesser who can be contacted at NYU Music Therapy Program (212) 998-5452.

If you agree to be in this study, you will be asked to do the following:
1. come for a one and a half hour long music psychotherapy group for twelve consecutive weeks.
2. make music together instrumentally and vocally
3. share your feelings and thoughts as well as your experience of son preference through music and discussion.
4. keep journals throughout the sessions and share them with the investigator.

The music psychotherapy group will be carried out at a studio in mid-town Manhattan. To insure that the investigator is not missing anything, she will tape record the sessions and transcribe them verbatim. You will have the right to listen to the materials and request that all or any portion of the tapes be destroyed. And you will have the right to decline to submit the journals.

The investigator will use pseudonyms when the tapes of the group sessions are transcribed and leave out any other identifying information to maintain confidentiality. No identifying information will be included in any of the data materials that are shared with the investigator’s support group or academic/clinical supervisors. The investigator will hold all the individual’s information confidential and all group members will be highly encouraged to do the same. However, there are the limits of confidentiality inherent in a group situation. The investigator cannot guarantee that other members of the group will hold all the individual information confidential. The actual tapes, session notes
and, journal entries will be kept and stored in a locked storage area with strict attention paid to the security of this system. Only the researcher will have a key to the locked storage container where all written, audio taped material will be kept. This material will be kept for a period of at least three years after the study is completed. The investigator will strictly maintain confidentiality of your research records with the following exception: the investigator is required by law to report to the appropriate authorities, suspicion of harm to yourself, to children, or to others.

The benefits of participating in this study include having a chance to reflect on your life and being more conscious of the impact of son preference in your life which may facilitate the choices you make. Also, you will be contributing to an important body of knowledge that others will learn from and deepen their understanding of the impact of son preference in Korean women’s lives and how music psychotherapy can help explore and work through the issues related to son preference.

The risks in being involved in this study are all an important part of normal therapy process. These may include talking about things that you may not have talked about before and may have reactions that you do not expect, like being sad, or angry, or hurt, or excited. Having these reactions may mean that you will be uncomfortable or want to do something that will change how things are. In case of any prospected problems, the investigator will discuss any of your assumptions, problems or possible negative side effects of our work together. If you want to seek out
additional counseling or psychotherapy during or after this study due to emotional distress, the investigator can provide a list of resources.

If there is anything about the study or your consent that is unclear or that you do not understand, if you have questions or wish to report a research-related problem, you may contact the investigator Hea-Kyung Kwon at (917) 250-3224 or hqk6439@nyu.edu or her faculty sponsor Barbara Hesser at (212) 998-5452 or barbara.hesser@nyu.edu

For questions about your right as a research participant, you may contact the University Committee on Activities Involving Human Subjects, NYU at (212) 998-4808 or human.subject@nyu.edu

Your participation is completely voluntary. If at any time you do not want to participate in music making process or share about a particular subject, you are free to do so. Also, you may withdraw from the study at any time.

I am grateful that you have chosen to participate in this study.

Agreement to participate

Participant’s signature               Date
D의사

이 연구의 목적은 남아 선탕사황이 한국 여성들의 삶에 미치는 영향을 음악
심리치료그룹 과정을 통해서 알아보는 것입니다. 이 연구를 수행하는 연구자는
뉴욕대학교 슈타인하르트 교육대학 음악치료학과 박사과정 학생인 권혜경입니다. 이
연구는 연구자의 박사과정 논문의 일환으로 수행되는 것입니다. 연구자의 지도
교수는 바바라 헤서(Barbara Hesser)이며, 뉴욕대 음악치료 학과 212-917-5452 로 연락을
하시면 됩니다.

만약 이 연구에 참여하시면, 아래 사항이 요구될 것입니다:

1. 12주 연속 1시간 30분 동안 진행되는 음악 심리치료 그룹에 참가하는 것
2. 함께 악기를 연주하고 노래 하는 것
3. 음악과 토토를 통해 자신의 견해, 생각, 느낌을 공유하는 것
4. 그룹에 참여하는 동안 일기를 쓰고 그 내용을 연구자와 공유하는 것

음악 심리치료 그룹은 멘하탄 미드타운에 있는 스튜디오에서 진행될 것입니다.

연구자가 연구 내용을 짧고없이 이해하도록 모든 세션은 녹음될 것이고 그 내용은
기록될 것입니다. 참가자 여러분들이 원하시면 녹음 테이프를 들으실 수 있고 그
테이프의 어떤 부분 혹은 전체를 과거 하도록 연구자에게 요청할 권리가 있습니다.
또한 일기를 연구자와 공유하고 싶지 않으면 안셔셔도 됩니다.

세션을 기록할 때 연구자는 참가자의 설명이 아닌 음량을 사용할 것이며 참가자의
신분 노출의 위험이 있는 특이 사항은 모두 삭제할 것입니다. 연구자의 지지
그룹이나 학과/임상 지도자와 공유하는 모든 문서에서도 참가자의 신분 노출의
가능성이 있는 자료는 제외될 것입니다. 하지만 이 연구에는 여러 사람이 참여하기
때문에, 비록 연구자가 모든 참가자들의 개인 정보를 비밀리에 유지하더라도, 다른
그룹 참여자들도 마찬가지로 이를 비밀에 부친다는 것을 보장할 수는 없습니다. 녹음
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참가 동의서

참가자 성함

날짜