Feminist theorizing has had a marked impact on the field of marriage and family therapy (MFT). By connecting issues of power and societal context to the sphere of the family, feminist MFTs have been able to adapt systemic therapy models to account for pervasive social inequalities. Some scholars in the field have noted that feminist family therapy is more aptly described as a sensibility rather than a therapeutic model, as feminist therapists tend to adopt an identity that permeates their therapeutic work rather than perform a particular set of therapeutic interventions. Yet, previous research has shown that this sensibility is commonly operationalized through a number of behaviors, such as equalizing power between the therapist and client and discussing gender and other realms of social inequality with clients. To date, however, little work has examined how feminist therapists experience and apply their feminist values to professional contexts beyond the therapy room. As a result, scholarship overlooks how feminist therapists themselves are embedded in a mental healthcare system, where issues of power and societal context influence to their ability to conduct feminist therapy. The current study remedies this gap by investigating how feminist MFTs engage and enact their feminist values in professional contexts beyond the therapeutic encounter. Specifically, this study addresses three primary research objectives: (a) explore how feminist MFTs enact their values in relation to their colleagues, (b) examine strategies of feminist MFTs in relation to the overarching institutional structure of managed care, and (c) examine strategies of feminist MFTs in relation to the current diagnostic system for mental disorders. Data were gathered from 21 self-identified feminist MFTs through semi-structured qualitative interviews, then analyzed with techniques associated
with grounded theory methodology. Results revealed how feminist MFTs negotiate their feminist values and practices with respect to power and institutional structures. These findings are discussed in the context of the medicalization of mental health and the labor that feminist therapists perform in order to achieve their goal of providing clients with access to high-quality mental healthcare.