

From Women's Narratives to Institutional Archive: Feminist Knowledge Production on Gendered Medical Violence

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Abstract

This article examines how feminist knowledge on violence against women and girls (VAWG) circulates, stabilises, and encounters resistance within contemporary European academic institutions. Drawing on feminist epistemology, particularly Miranda Fricker's framework of epistemic injustice, it conceptualises feminism in academia as an infrastructure of mediation through which women's testimonies, literary production, activist knowledge, and institutional frameworks intersect. Focusing on gendered medical violence as an analytically transferable case, the study combines pedagogical engagement and transnational research across Spain, Germany, Finland, and the United Kingdom. It analyses how women's credibility hierarchies shape the reception of lived-experience methodologies, how traditional quantitative paradigms continue to dominate definitions of scientific legitimacy, and how hermeneutical gaps produce institutional invisibility. This analysis further explores digital platforms as emergent feminist counter-archives in response to epistemic marginalization. By examining the role of medical humanities as preventive pedagogy in professional healthcare training and by tracing the movement from women's testimony to feminist institutional archive, the article argues that prevention depends on intelligibility since harms that lack shared interpretive resources remain normalised or dismissed. Feminism in academia operates simultaneously as analytic intervention and preventive infrastructure, challenging epistemic hierarchies while constructing interdisciplinary frameworks capable of reconfiguring institutional responses to misogynistic violence.

Keywords: Feminist epistemology, gendered medical violence, epistemic Injustice, Violence Against Women and Girls (VAWG), Medical Humanities

1. Introduction: Feminist knowledge as mediation infrastructure

Academic feminism today cannot be understood through a mere theoretical lens since its action entails an infrastructure of mediation: a space where women's testimonies, literary works, activist knowledge, and institutional frameworks intersect and coexist. To study feminism within the context of the university results in the interrogation regarding how women's lived experiences—particularly those related to violence against women and girls (VAWG)—travel through classrooms, research centres, curricula, and policy environments until they are stabilised within institutional knowledge. Yet this process of stabilisation has

historically been shaped by unequal conditions of participation in meaning-making practices. The Argentine anthropologist Rita Segato offers a crucial starting point for understanding why interpretation itself is never neutral. For Segato, violence always carries an expressive, communicative dimension that must be read and decoded by someone with the interpretive authority to do so:

Es necesario todavía entender que toda violencia, aun aquella en la cual domina la función instrumental como, por ejemplo, la que tiene por objetivo apropiarse de lo ajeno, incluye una dimensión expresiva, y en este sentido se puede decir lo que cualquier detective sabe: que todo acto de violencia, como un gesto discursivo, lleva una firma. Y es en esta firma que se conoce

la presencia reiterada de un sujeto por detrás de un acto. (Segato 39)

(It is still necessary to understand that all violence, even that in which the instrumental function dominates — as, for example, violence aimed at appropriating what belongs to another — includes an expressive dimension, and in this sense one can say what any detective knows: that every act of violence, like a discursive gesture, carries a signature. And it is in this signature that the repeated presence of a subject behind an act becomes known.)

If violence functions as a kind of discourse, which requires a “detective,” an interpreter, to trace its signatura, then the question of who is authorised to read that signature becomes central to feminist epistemology. It is precisely this asymmetry in interpretive authority that Miranda Fricker names in *Powerlessness and Social Interpretation* (2006), where women’s position during second-wave feminism was marked by a structural powerlessness that limited their participation in the very sites where collective meanings are generated:

Women’s position at the time of second wave feminism was still one of marked social powerlessness in relation to men; and, specifically, the unequal relations of power prevented women from participating on equal terms with men in those practices by which collective social meanings are generated. Most obvious among such practices are those sustained by professions such as journalism, politics, academia, and law—it is no accident that Brownmiller’s memoir recounts so much pioneering feminist activity in and around these professional spheres and their institutions. Women’s powerlessness meant that their social position was one of unequal hermeneutical participation. (Fricker, 98)

Fricker’s account of unequal hermeneutical participation clarifies why women’s experiences so often fail to achieve institutional recognition. The difficulty lies in structural epistemic exclusion from the practices through which shared meanings are produced and legitimised. Academic feminism, in this sense, intervenes

at this exact level: it seeks to recalibrate the epistemic conditions under which women’s lived realities become intelligible, credible, and ultimately institutionalised.

This article is grounded in my ongoing research on gendered medical violence at Universität Bielefeld (Germany). Throughout a comparative study between Spain and Germany (2010-2025), I analyse medical violence against women and girls (VAWG): forms of harm embedded in healthcare systems, diagnostic practices, obstetric settings, and institutional neglect, including epistemic forms of violence such as dismissal, disbelief, and interpretive erasure. While my empirical entry point is based on the Medical Humanities, I treat this case as analytically transferable to other academic fields where feminist knowledge is routinely evaluated through unequal regimes of credibility. For this, I develop a double perspective on institutionalization. First, I examine how students and trainees receive VAWG prevention when it enters academic curricula—generating tension between the desire for practical solutions and the experience of institutional inertia. This sensation of inertia can be partially understood through what Susan Sontag, in *On Regarding the Pain of Others* (2003), describes as the contradiction of spectatorship, which explains the idea that repeated exposure to representations of suffering tend to result in emotional numbness or moral fatigue instead of action. Similarly in the context of VAWG, the circulation of statistics, reports, and narratives does not automatically translate into transformative engagement; rather, it can coexist with detachment, discomfort, rejection, or paralysis. Second, I analyse how feminist knowledge is received when introduced by a woman lecturer within international academic environments. Together, these layers shed light on how institutional authority shapes what can count as knowledge. To conceptualise these dynamics, I draw on feminist epistemology and on Miranda Fricker’s framework of *epistemic injustice*, with particular attention to *testimonial* and *hermeneutical injustice*. Here, my guiding question is: under what conditions does women’s narratives, voices, and testimonies become institutional knowledge—and when do universities constrain that transformation

through credibility hierarchies and gaps in women's collective interpretive resources?

A further premise I propose is that VAWG prevention depends on intelligibility, since harms that lack shared vocabulary tend to remain normalised, delegitimised, misrecognised, or dismissed, particularly in contexts shaped by what Laurie Layton Schapira has described as the *Cassandra effect*, [1] whereby women's accounts are invalidated or disbelieved even when they are supported by evidence or later on corroborated. In academic settings, this concept can translate into hermeneutical gaps that push feminist researchers, especially those working with lived experience and trauma-sensitive approaches, towards alternative spaces of circulation. For this reason, I read digital platforms as emergent feminist counter-archives where women's credibility struggles and epistemic resistance become visible when institutional channels obscure the circulation of this information, thereby eroding the expansion of feminist knowledge. In doing so, I argue that feminism in academia can simultaneously grow as a critique and as an infrastructure since it exposes epistemic hierarchies while building interdisciplinary connections necessary for effective prevention.

Methodologically, this article combines ethnographic observation and pedagogical engagement across Spain, Germany, Finland, and the United Kingdom, including teaching and research encounters at the University of Jyväskylä, South-Eastern Finland University of Applied Sciences (XAMK), University College London (UCL), and the University of Jaén, alongside observations of how women early-career researchers discuss credibility struggles and lived-experience methodologies in digital spaces. In the next sections, I examine classroom reception and credibility hierarchies, the politics of naming and translation, the role of feminist digital counter-archives, and the use of storytelling and narrative work in feminist medical humanities as preventive pedagogy, before concluding on the effects of institutionalization. This analysis begins by examining positionality and classroom reception, considering how VAWG prevention is received within interdisciplinary teaching contexts. It then moves to a theoretical discussion

of feminist epistemology and medical authority, situating epistemic injustice within healthcare and professional training environments. From there, the analysis turns to the politics of naming and translation, showing how conceptual absence generates women's institutional invisibility. Next, I explore digital platforms as feminist counter-archives, tracing how lived-experience research circulates when academic credibility structures marginalise it. Importantly, I analyse feminist medical humanities as a form of preventive pedagogy, following the movement from narrative interpretation to professional training [2]. Finally, I conclude by reflecting on transnational circulation and institutionalization of feminist knowledge, and on the effects of embedding it within academic infrastructures, considering the university as potentially both: feminist archive and contested terrain.

2. Positionality and classroom reception: teaching Medical VAWG as an interdisciplinary encounter

Academic feminism seeks to recalibrate the epistemic conditions under which women's lived realities become intelligible, credible, and ultimately institutionalised: "The struggles involved in challenging conventional notions of expertise to make space for seemingly illegitimate forms of knowledge, connect feminism and the medical humanities" (Pattison 33-36). As a consequence to the necessity to democratize more humane and empathic medical practice towards women and girls, interdisciplinarity is amplified at an accelerated pace: "The medical humanities is an area of inquiry that is highly interdisciplinary, rapidly expanding and increasingly globalized" (Whitehead and Woods 1). In bridging the gap between statistical knowledge and lived experience, accessibility and outreach to patients, professionals, and policymakers open a new horizon of possibilities. Yet this shift is neither linear nor uncontested. While medical humanities and feminist epistemologies are gaining visibility, resistance persists—particularly in contexts where quantitative paradigms continue to dominate definitions of scientific legitimacy.

Scholars—especially women—who centre

lived experience as a legitimate qualitative framework have traditionally been evaluated as less rigorous when their analyses do not rely on numerical methods, reflecting the persistence of methodological hierarchies within academia (Westmarland 4). Empirical studies on research assessment have shown that disciplines with higher proportions of women and greater reliance on qualitative methodologies tend to receive lower evaluations of research quality and reduced funding success, suggesting that methodological bias intersects with gendered structures of credibility (James 1). This tension is not new since feminist researchers have long criticised positivist quantitative traditions for marginalising women's experiences. Ann Oakley (1974) argued that mainstream sociological methods systematically excluded women, while Stanley and Wise (1993) demonstrated how women were usually merely "added" to male-centred knowledge frameworks. In addition, Maria Mies (1983) exposed how so-called "malestream methods" were deployed to study women's lives through androcentric lenses, and Jessie Bernard (1975) questioned why certain fields of research were privileged over others, concluding that methodological priorities tend to mirror masculine norms through the ingrained male gaze. When scholars working within experiential or narrative paradigms are discredited on the grounds of insufficient "rigour," what is at stake is not a simple methodological disagreement but a lack of credibility. In such cases, Fricker's concept of *testimonial injustice* becomes analytically illuminating: prejudice against non-numerical forms of evidence leads to the devaluation of researchers and their work before the substance of their analysis is properly considered.

In response to the recurrent discrediting of women's lived experience and drawing on Robert Arnott's terminology, I conceptualize the term "feminist intersubjective knowledge":

Patients have detailed knowledge of their own experiences of illness. Doctors have detailed scientific knowledge of disease processes. These two kinds of knowledge appear very different, and bringing them together is not straightforward. If done

successfully, then both patient and doctor have a shared understanding which could be said to be "intersubjective" knowledge. (Arnott 104-105)

In this sense, academic feminism currently inhabits a double-edged landscape. On the one hand, feminist scholarship has been crucial in rendering misogynistic violence visible within formal institutional contexts. In doing so, universities have become spaces where gendered harm—previously dismissed as incidental, private, anecdotal, or marginal—acquires conceptual language, empirical grounding, and political visibility. For instance, feminist research has been instrumental in exposing how the historical construction of medicine around the male body as epistemic norm has rendered women's symptoms secondary, atypical, or psychosomatic, thereby generating forms of epistemic injustice, obstetric violence, and systemic gender, and racial, bias within healthcare systems. As physician Carme Valls argues in *Mujeres invisibles para la medicina* (*Invisible Women for Medicine*):

Es la ciencia médica, construida en base a la salud mental masculina, la que define qué es normal o no en las mujeres que atiende y trata. Etiquetar, diagnosticar y decidir qué mujeres son "normales" y cuáles están enfermas, nerviosas o locas ha colaborado en gran medida a empeorar la salud mental de las mujeres, que además de tener que luchar contra los modelos sociales que quieren encerrarlas han de luchar contra los modelos mentales de los y las profesionales que deben atenderlas. (Valls 3)

(It is medical science—constructed on the basis of male mental health—that defines what is considered normal or abnormal in the women it attends to and treats. Labelling, diagnosing, and deciding which women are 'normal' and which are ill, nervous, or mad has significantly contributed to worsening women's mental health. In addition to struggling against social models that seek to confine them, women must also contend with the mental frameworks of the professionals

responsible for their care.)

While many feminist scholars express a growing concern that academic debates remain at the level of description rather than advancing effective prevention, the proliferation of data on gendered medical violence has undoubtedly strengthened public recognition of the problem: “the potential contribution of female health workers to advancing global health remains inhibited by several factors, including those underpinned by gender power relations” (George et al. 1). In this sense, statistical representation, while politically impactful, risks obscuring the complexity, ambiguity, and silencing mechanisms embedded in women and girls’ experiences of trauma. To exemplify this gender bias in the healthcare system, recent work on violence against female health workers has adapted the classic *violence against women* iceberg model to the professional healthcare domain. As the traditional iceberg highlights how visible indicators of gender-based violence are underpinned by a much larger, hidden mass of unreported, normalized, and structurally embedded abuse, the *female health worker violence iceberg* [3] reveals how frontline violence is only the tip of a broader system of gendered harm in healthcare settings. Under the surface lie entrenched power relations, workplace cultures that normalise risk, lack of protective measures, insufficient data, and organisational practices that fail to recognise or address VAWG as a structural phenomenon. This extended iceberg metaphor sheds light on the fact that focusing on quantitative indicators exclusively, without attending to the relational and interpretive layers beneath, risks rendering invisible the very patriarchal power and control dynamics feminist research seeks to denounce and eradicate.

2.1 What does it mean to study violence against women and girls from within the university?

To study violence against women and girls within the university entails an interrogation on how knowledge hierarchies are constructed and sustained. As described in the previous section

of this article, academic feminism today faces a structural obstacle: structural asymmetries between quantitative and interpretive disciplines. This divide thus produces a theoretical gap. Quantitative studies generate figures on VAWG, but institutions still struggle to articulate what these numbers signify in lived, relational, and structural terms. A case in point is that women who report suffering intimate partner violence (IPV) or domestic abuse may retract their statement due to diverse coercive reasons such as fear of financial dependence or the abuser—the man—hurting their children:

the victim then makes the decision to formally retract their PVS by providing a PRS [...] those victims whose cases have been deemed sufficient evidentially to obtain a statement and where victims who were initially motivated to engage officially with the CJS decide to retract that statement. Timings of retraction requests can be received a few hours after the initial statements have been obtained following the arrest of the abuser, during the period of time leading up to the court case, and at times, on the actual day of the trial, with some research suggesting that a retraction typically takes place following the first five days of the DVA incident. (Birdsall and Boulton 1)

Without conceptual depth, statistics risk becoming detached from the social realities researchers attempt to measure. This does not mean these numbers—or stories—do not exist in reality. In this respect, Birdsall and Boulton advance the claim that “more sensitivity is needed in distinguishing between cases where victims may be empowered to make their own decision to withdraw, in comparison to cases where the victim may have been coerced into dropping the charges” (1). It is precisely within this gap that feminism in academia acquires methodological and political relevance. By bringing narrative analysis, feminist epistemology, and critical theory into dialogue with public health and social science research, they enable institutions to interpret quantitative findings within broader frameworks of power, vulnerability, and systemic inequality. If VAWG is itself systemic, then it must

be addressed systemically and collaboratively—through active listening, and interdisciplinary collaboration capable of linking data, testimony, pedagogy, and prevention.

The imperative necessity of this multilayered—exploring intersectional, interdisciplinary and multicultural—work became particularly evident during my research stays across European universities. While conducting postdoctoral research in Finland, I was told in an informal conversation that violence against women “is not a problem in this country”. This statement reflected a national imaginary in which structural violence becomes unintelligible when it is not explicitly framed as such. A similar dynamic emerged in a recent conversation with a physicist at a public hospital in Spain while discussing examples of medical violence against women and girls (VAWG). Upon presenting the research framework, she responded: “That does not happen here. In fact, we have many women working in our institution”. The implicit equation between the numerical presence of women and the absence of VAWG reveals a recurrent epistemic displacement. In this regard, representation is mistaken for equality, and institutional demographics are taken as evidence that structural violence is impossible. In both instances, denial does not operate through overt rejection but rather through conceptual limitation. When violence is understood only as exceptional, criminal, incidental, or external to professional practice, forms of gendered medical harm—such as dismissal, diagnostic neglect, or epistemic injustice—remain unrecognisable. These international encounters shed light on how institutional self-perception obscures systemic harm, particularly when gender parity in staffing is interpreted as proof that discriminatory gendered dynamics do not exist. The result shows a hermeneutical gap, which conveys a clear message: harm against women and girls persists, yet lacks the conceptual framework required for its acknowledgment.

In discussions with anti-VAWG professionals working at the NGO VIOLA [4] in the Finnish city of Mikkeli explained that there is no Finnish equivalent to the Spanish legal concept *violencia vicaria* [5] :

La violencia vicaria es una forma de violencia machista. Los hijos e hijas de las mujeres víctimas de violencia de género, así como las niñas y niños menores de edad sujetos a su tutela, guarda y custodia, son víctimas directas de este tipo de violencia, tal y como recoge desde el año 2015 la Ley Orgánica 1/2004, de 28 de diciembre, de Medidas de Protección Integral contra la Violencia de Género. Además, en ocasiones estos y estas menores de edad son utilizados por el maltratador para hacer daño a la madre.
(*Violencia vicaria is a form of VAWG. The sons and daughters of women who are victims of gender-based violence, as well as minors under their guardianship, care, and custody, are direct victims of this type of violence, as recognised since 2015 in Organic Law 1/2004 of 28 December on Comprehensive Protection Measures against Gender Violence. In addition, these minors are sometimes used by the abuser as instruments to harm the mother.*)

In Finnish language, the closest available expression to “violencia vicaria” referred merely to *kolmanteen osapuoleen kohdistuva väkivalta* (violence directed at a third party) or *välillinen väkivalta* (indirect violence). These formulations and their lack of universal terminology to describe this type of VAWG dilutes the gendered intentionality and psychological dimension of the practice. This linguistic lacuna to conceptualise—and therefore effectively identify—purposeful types of abuse against women provides evidence for a broader epistemological issue: what cannot be named cannot be legitimized. Within academic and policy frameworks, unnamed forms of VAWG remaining diffuse, under-theorised, or statistically invisible makes this reality unintelligible.

The politics of translation thus become central to VAWG prevention. As Andreas Behnke explains, modern epistemologies tend to neutralise translation as a complex intercultural process by constructing a detached site of observation from which the world appears as representation (*Vor-stellung*)—something positioned before the subject’s gaze. This epistemic posture presupposes an abstract,

detached, universal observer; yet, as feminist theory has shown, such neutrality is historically coded as masculine and patriarchal. In *Visual Pleasure and Narrative Cinema* (1975) Laura Mulvey's notion of the "male gaze" further illuminates how representation is structured through asymmetrical relations of power, prioritizing the perspective of the heterosexual white man, which becomes the norm. This observing subject occupies a position of authority while the observed (female) becomes objectified, thereby losing their agency. When applied to the translation of gendered violence, this detached observational stance risks flattening lived experience into legible data, thereby reproducing the very hierarchies it claims to transcend. This decontextualised position promises a master code capable of rendering all cultural texts fully legible, "without excess or lacunae" (Behnke 91). For this reason, in my teaching and invited seminars at institutions such as University College London and the University of Jyväskylä, I have adopted a multilingual analytical approach when working with anti-VAWG concepts that lack direct equivalents across languages. In one seminar regarding sexual VAWG prevention I delivered at UCL on 26th January 2026, Prof. Ilan Kelman inquired about the English translation of *violencia vicaria*, and the absence of an established term became itself an enlightening moment of critical reflection. English-speaking students, unfamiliar with the concept due to its absence in their legal vocabulary, confronted how linguistic gaps delimit the boundaries of recognition. These "aha" moments reveal how feminist academic dialogue can expose conceptual blind spots and create conditions for epistemic expansion, positioning women and girls' experiences at the centre of analysis. More importantly, they demonstrate how epistemic absence produces institutional absence: when a form of violence lacks conceptual articulation, it struggles to enter professional training, statistical measurement, and policy design. In these contexts, women encounter material obstacles and interpretive barriers that erode their *epistemic confidence* (Fricker 49), reinforcing the very inequalities that remain conceptually—and materially—obscured.

3. Feminist Epistemologies and Medical Authority

Feminist epistemology has long interrogated how authority is unequally produced, legitimised, and distributed within institutional contexts. As Elizabeth Anderson outlines in *The Stanford Encyclopedia of Philosophy* (2024), dominant knowledge practices disadvantage women in multiple, structurally embedded ways: by (1) excluding them from inquiry, (2) denying them epistemic authority, (3) denigrating "feminine" cognitive styles, (4) producing theories of women that portray them as inferior or significant only insofar as they serve male interests, (5) generating accounts of social phenomena that render women's activities, interests, and gendered power relations invisible, and (6) producing knowledge that is either unusable for subordinated groups or that actively reinforces existing hierarchies. Such critiques challenge the presumed neutrality and universality of feminist knowledge production. Rather than being objective or detached, systems of expertise are conventionally structured through intersecting relations of power across gender, race, and class. What presents itself as a neutral method or universal theory is typically anchored in a situated—and normally masculinized—epistemic standpoint. Miranda Fricker develops the concept of *hermeneutical marginalization* (Fricker 98), emphasising that social identities are complex and stratified. In other words, an individual may be privileged along one axis while marginalised along another. In academic contexts, for instance, a woman researcher may occupy a position that formally grants her the authority to write, publish, and participate in scholarly debate, yet simultaneously encounter structural obstacles in gaining visibility, recognition, and access to career advancement. It is well-known that a woman's institutional inclusion does not necessarily translate into equal hermeneutical participation. As Fricker explains, hermeneutical marginalization prevents subjects from generating or accessing shared meanings in specific areas of social life, even if they retain fuller participation elsewhere. Unsurprisingly, such marginalization is not a

voluntary withdrawal but “is always a form of powerlessness, whether structural or one-off” (Fricker 99).

Within healthcare systems, this imbalance acquires material consequences, as it shapes whose pain is believed, whose symptoms are minimised, and whose narratives are dismissed as exaggerated, emotional, or psychosomatic. Fricker further insists that “epistemic injustice is woven into the fabric of social injustice more generally” (100), underscoring how credibility deficits mirror broader structures of inequality. Testimonial injustice, in this framework, occurs when a speaker’s account is granted less credibility due to identity-based prejudice. A contemporary example can be observed in the well-documented racial disparities in maternal mortality in the United Kingdom, where Black women are significantly more likely to die during pregnancy or childbirth than white women. These disparities have been linked not only to structural inequalities but also to credibility gaps shaped by racist stereotypes—such as assumptions that Black women are more expressive, exaggerate pain or are more resilient to suffering due to their cultural background. While structural inequalities persist, the campaign *Five X More* (fivexmore.org) has played a significant role in rendering these disparities publicly legible. Women’s contemporary literary and digital cultural productions, such as Beatriz Cabur’s *Childbirth-19* (2020), further visibilise how women’s testimonies of pain are routinely minimised within obstetric contexts, exposing the convergence of testimonial and hermeneutical injustice in medical practice. The digital play portrays a Black woman giving birth during the COVID-19 pandemic, isolated in a hospital environment where she is required to labour alone. Both she and the medical staff are masked, intensifying a sense of depersonalisation and communicative rupture. Throughout the performance, the protagonist repeatedly verbalises confusion about what is happening to her body, asking: “What is labour? The pushing moment?” Her questions do not signal ignorance, but rather the absence of adequate explanation within the clinical encounter. She is undergoing a complex physiological process without being provided the

interpretive framework necessary to understand it. Instead, her pain is minimised and her agency systematically curtailed. Despite her attempts to seek clarification, she receives little meaningful communication from healthcare professionals, reinforcing her *epistemic isolation*. During her childbirth, medical procedures are carried out without adequate dialogue and her reactions are subtly infantilised. As a result, the combination of racialised embodiment, pandemic isolation, and institutional authority produces a scenario in which her suffering is not acknowledged while also rendered partially unintelligible. Therefore, Cabur’s work stages the layered dynamics of women’s credibility deficit and interpretive exclusion that characterise epistemic injustice in obstetric care.

When viewed through the lens of epistemic injustice, medical authority can be understood as a regime of recognition. Feminist epistemology reframes the central inquiry from “Did abuse occur?” to “Under what epistemic conditions does harm become recognisable?” It is at this juncture that the feminist medical humanities acquire both methodological and political significance. Through the analysis of literary narratives, autobiographical testimonies, cultural representations, and archival materials, the medical humanities illuminate how medical authority is historically constructed and VAWG becomes normalised through classificatory systems that selectively obscure or amplify particular voices. Narrative analysis makes visible patterns that statistical frameworks alone often fail to capture, such as the repetition of dismissal, the routinisation of disbelief, assumptions that women possess a higher pain threshold, the subtle disciplining of patients who question medical expertise, disproportionate waiting times, and forms of objectification embedded in clinical interaction. These recurring power dynamics reveal how epistemic injustice operates not as an isolated event, but as a patterned structure within healthcare settings. In *Powerlessness and Social Interpretation* (2006), particularly in *The Wrong of Hermeneutical Injustice*, Miranda Fricker theorises the structural dimension of interpretive exclusion:

If other women [...] had never gone to

consciousness-raising, the experience (of abuse) would have remained under wraps for much longer and would have done more to ruin the professional advancement, the personal self-confidence and [...] the general epistemic confidence of women than it was in fact allowed to do, thanks to second wave feminism. When you find yourself in a situation where you seem to be the only one to feel the dissonance between received understanding and your own intimated sense of a given experience it tends to knock your faith in your own ability to make sense of the world, or at least the relevant region of the world. We can see, then, that not only does hermeneutical injustice have knock-on practical disadvantages for the subject, it also has epistemic disadvantages associated with it. (Fricker 104)

An increasing number of feminist scholars actively resist patriarchal norms within academia by foregrounding experiential and narrative methodologies—particularly in contexts where quantitative indicators fail to capture the structural realities of VAWG prevention. What is at stake here is *situated hermeneutical inequality*, defined as “the concrete situation is such that the subject is rendered unable to make communicatively intelligible something which it is particularly in his or her interests to be able to render intelligible” (Fricker 103). This form of inequality silences and obstructs meaning-making itself. Drawing on Fricker’s distinction between “primary” and “secondary harms”, this discrimination becomes visible in academic contexts where women struggle to articulate forms of epistemic marginalisation that lack institutional vocabulary or recognition. The primary harm consists in the interpretive gap itself: experiences that remain only partially intelligible, even to those who experience them. The secondary harm emerges when this persistent misrecognition erodes epistemic confidence, discourages intellectual risk-taking, and ultimately pushes female scholars—particularly early-career researchers—towards alternative spaces of circulation, including digital platforms. In such cases, the migration to online counter-archives does not reflect a voluntary

departure from institutional life, but a response to structurally constrained hermeneutical participation.

First, what Fricker terms *the primary epistemic harm* alludes to “a patch of a woman’s social experience that was not collectively understood and so remained barely intelligible even to her” (103-104). In academic contexts, this dynamic may manifest when female researchers recognise discriminatory patterns yet lack the institutional vocabulary or collective validation necessary to articulate them. For independent scholars or early-career academics in particular, the absence of interpretive support can gradually erode what Fricker calls “epistemic confidence” (Fricker 49). This erosion has material consequences; when scholars repeatedly encounter misrecognition or methodological dismissal, intellectual risk-taking becomes costly, and withdrawal appears as a form of self-preservation. The cumulative effect contributes to structural patterns in which senior academic positions remain disproportionately occupied by men. The so-called glass ceiling, therefore, should not be understood as accidental, but as the outcome of mechanisms of epistemic marginalisation that render certain forms of knowledge—and those who produce them—less visible, less credible, and ultimately less institutionally sustainable.

Within what Fricker terms “secondary harms” (Fricker 58) the consequences of hermeneutical marginalisation become materially and psychologically tangible. Women may develop symptoms of stress, find themselves unable to request transfers or formally report discriminatory environments because they lack a “nameable” reason to cite, and in some cases ultimately feel compelled to leave their positions. In academic contexts, this may translate into moving to another institution, shifting research fields, or withdrawing from academia altogether in response to the cumulative erosion of epistemic confidence produced by entrenched patriarchal norms. The consequences of primary and secondary harms are epistemically significant. As Fricker further explains, when an individual is “repeatedly subject to the intrinsic epistemic insult that is the primary injustice, but where this persistent intellectual undermining causes [her] to lose confidence in [her] beliefs

and/or his justification for them, [she] literally loses knowledge" (Fricker 49). More indirectly, individuals suffer a "failure to gain knowledge" if persistent marginalisation prevents them from developing the intellectual virtues necessary for inquiry (Fricker 49). This erosion affects what James Montmarquet conceptualises as *epistemic virtues*—impartiality, intellectual sobriety, and intellectual courage. The latter, in particular, involves "the willingness to conceive and examine alternatives to popularly held beliefs, perseverance in the face of opposition from others (until one is convinced one is mistaken), and the determination required to see such a project through to completion" (Montmarquet 23). Such virtues presuppose a baseline of women's epistemic confidence; where hermeneutical injustice persists, that confidence is destabilised. As Fricker ultimately notes, the enduring loss of intellectual confidence entails a regrettable deformation of epistemic character (51). Seen in this light, the tension between data-driven public health paradigms and interpretive, narrative-based methodologies is not merely methodological; it reflects deeper struggles over what counts as evidence, whose voice is granted credibility, and how prevention itself is conceptualised.

However, feminist epistemology does not remain confined to critique. In my pedagogical work with students in nursing, public health, youth work, and literature programmes across Germany, Finland, Spain, and the United Kingdom, these epistemological frameworks operate as tools of professional reflexivity. When students engage with narratives of obstetric violence or diagnostic neglect—such as Beatriz Cabur's *The Mind-Boggling Shrinking Woman* (2021) and *Childbirth-19*—they are invited to identify credibility hierarchies embedded within clinical scenarios. These works serve as pedagogical catalysts for situating local experiences within broader transnational debates on the visibility of VAWG. On the one hand, they enable students to recognise both overt and subtle forms of abuse, including those normalised within institutional routines. On the other hand, they foreground students' own agency as emerging professionals: participants are encouraged to interrogate patriarchal patterns

of harm and to critique entrenched practices by imagining alternative responses grounded in ethical attentiveness. These exercises cultivate empathy and, essentially, forms of active listening toward women's testimonies. In classroom discussions, we examine how institutional procedures may reproduce violence through explicit hostility, patterned misrecognition and routinised disbelief. Feminist epistemology thus functions simultaneously as analytic lens and preventive infrastructure. Prevention, therefore, should not be reduced to procedural reform alone since it requires epistemological transformation. Feminist epistemologies transcend the analysis of medical authority by unsettling its asymmetries and proposing alternative frameworks capable of reconfiguring its structural effects.

3.1 *Feminist circulation and institutionalisation*

The institutionalisation of feminist knowledge takes multiple forms, such as doctoral programmes, research centres, MA curricula, and EU-funded initiatives. Each site produces tensions, such as between activism and bureaucratic funding logics, between radical critique and policy language, and between lived testimony and measurable outcomes. The two years (2024-2026) consecutive invitation to teach sexual and medical VAWG prevention to healthcare professionals in Finland's only Master's Programme in the Promotion of Sexual Health at the South Eastern Finland University of Applied Sciences (XAMK) exemplifies how feminist knowledge enters professional healthcare training. Here, prevention is not abstract since it transforms into curricular content, assessment, and professional formation addressed to healthcare professionals. Academic feminism, therefore, connects with a *transnational ecology of knowledge*.

The increasing emergence of international and interdisciplinary initiatives within European universities reflects a growing recognition that systemic issues demand collaborative responses. Another example is the Master's Degree in World Studies at Universität Bielefeld and the interdisciplinary Master's Degree in Critical Analysis of Gender Inequality and Comprehensive Intervention in Gender-Based

Violence at the University of Jaén (Spain). These programs connect knowledge from different faculties, such as science, public health, social sciences, and the humanities. More importantly, these purposeful connections are structurally necessary if VAWG is to be addressed beyond descriptive documentation, with the intention of generating real preventative and effective impact. To study feminism, and more precisely violence against women and girls, from within the university, entails to question how institutions define violence, what they render measurable, and what they leave conceptually obscured and unarticulated. This necessary paradigm shift requires treating women's narratives not as secondary qualitative supplements, but as epistemic interventions capable of challenging institutional metrics, reshaping preventive strategies, and transforming professional training in healthcare and public policy. Therefore, feminism in academia reveals the limits of existing knowledge systems while actively constructing the interdisciplinary frameworks required to confront systemic VAWG.

3.2 Language, Legitimacy, and Symbolic Domination: Women and the Right to Public Speech

One of the central questions in contemporary cultural production concerns the right for women to experience genuine legitimacy when articulating a public message. Traditional language itself has functioned as a mechanism of encapsulation and subordination. In this sense, literary and critical traditions are not neutral terrains. Their codes, hierarchies, and evaluative criteria have historically been shaped by androcentric and patriarchal assumptions that determine what counts as universal, legitimate, or canonical. As María Ángeles Cabré interrogates:

A pesar de los grandes avances sociales en cuestión de igualdad de género, la falta de paridad se está perpetuando de un modo muy peligroso en el mundo literario, uno de los ejes vertebradores del sector cultural. ¿Puede permitirse este país una visión androcéntrica tan descarada y

desacomplejada en un sector tan delicado para la construcción del imaginario colectivo? (Cabré, 2011)

(Despite major social advances in gender equality, the lack of parity is being perpetuated in a highly dangerous way in the literary world, one of the structural axes of the cultural sector. Can this country afford such an overt and unapologetic androcentric vision in a sector so crucial for the construction of the collective imaginary?)

The persistence of androcentric evaluation becomes visible in institutional contexts like academic institutions. In 2017, a doctoral thesis defended at Université Bordeaux-Montaigne on contemporary Spanish fiction relied on an exclusively male corpus. The female doctoral candidate acknowledged that “puede que los criterios a partir de los que selecciono lo que para mí es ‘buena literatura’ sean sesgados desde un punto de vista de género” (“it may be that the criteria from which I select what for me is ‘good literature’ are gender-biased”) (Touton 12). This is an example that sheds light on the fact that what appears as neutral aesthetic judgment typically conceals deeply internalized—and patriarchal—hierarchies. Similarly, condescending statements by influential editors reinforce these asymmetries. Jesús García Sánchez (Chus Visor) declared in an interview that “Lo siento, pero creo que la poesía femenina en España no está a la altura de la otra, la masculina, digamos...” (“I’m sorry, but I think women’s poetry in Spain is not at the same level as the other, the male one, let’s say...”) (Touton 14). Such claims are not an expression of personal taste but a contribution to the consolidation of symbolic hierarchies that shape women’s recognition and canon formation—rendering them excluded from the center and relegated to the margins.

In addition, Karnele Jaio builds on this unequal dynamic through Pierre Bourdieu’s concept of *symbolic domination*: “Dominación simbólica es, por ejemplo, que un crítico atribuya a una obra con personaje masculino un alcance universal y que reduzca el de una obra protagonizada por una mujer al ámbito de

'lo femenino', de lo particular" (Touton 13-14). (*"Symbolic domination is, for example, when a critic attributes a universal scope to a work with a male protagonist and reduces a work led by a female protagonist to the realm of the 'feminine,' of the particular"*). Here, it is clear that universality is coded as masculine since the feminine is relegated to the particular. These hierarchies are sustained not only through explicit exclusion but through internalisation. As Touton notes, the "reglas del juego (jerarquías) han sido interiorizadas 'con argumentos supuestamente racionales [...] mediante el habitus'" (*"the rules of the game [hierarchies] have been internalised 'with supposedly rational arguments [...] through habitus'"*) (13). Legitimacy ultimately depends on institutional and collective recognition: "El reconocimiento colectivo, institucional y por parte de voces autorizadas, es el que otorga legitimidad a un texto y a su autora o autor" (Touton 13). (*"Collective, institutional recognition, and recognition by authorised voices is what grants legitimacy to a text and to its (male or female) author"*).

Against this backdrop, the question becomes how women can come to feel legitimate in publicly verbalising their message. As Patricia de Souza argued:

[Hay] que ocupar el lenguaje y la vida, encarnarla, salir de esa ausencia en la que se puede vivir siendo mujer. Hay una ausencia de sujeto, de subjetividad, en la lengua, al hablar con instrumentos que no nos pertenecen. Lo que ha habido es una imagen de consenso sobre una manera de entender y leer el mundo. Lo que hubo y hay es dominación. (qtd. in Wiener)
(*[We must] occupy language and life, embody them, and step out of that absence in which one can exist as a woman. There is an absence of subject, of subjectivity, within language when we speak through instruments that do not belong to us. What has prevailed is an image of consensus about a particular way of understanding and reading the world. What has existed—and continues to exist—is domination.*)

If dominant discourse encodes structures of power, then not everything within this prevailing

masculinised linguistic order can serve emancipatory purposes. Prof. Isabelle Touton similarly observes that "No todo lo que hay en ese lenguaje masculino predominante, que sigue siendo denominador común, sirve para propiciar los cambios necesarios" (*"Not everything within that predominant masculine language, which remains the common denominator, serves to foster the necessary changes"*), and therefore insists that "Hemos de encontrar e imponer un lenguaje que genere entornos diferentes" (*"We must find and impose a language that generates different environments"*), while remaining wary of reproducing the "lengua del amo" or "lenguaje del opresor" (*"the master's language" or "the language of the oppressor"*) (Touton 69), which sheds light on the idea that the transformation required is not simply thematic but formal. As Touton notes, "Las mujeres buscan desplazar los códigos de la narrativa mediante cierta libertad formal" (*"Women seek to displace the codes of narrative through a certain formal freedom"*) (Touton 69).

If speaking entails rewriting what has already been read or heard, the important question becomes from where women read and from where they rewrite tradition. Women have long been invited to participate in cultural traditions that simultaneously exclude them, encouraged to identify with models constructed against their own subjectivity. Visibility, therefore, cannot be reduced to numerical inclusion; it requires dismantling the symbolic and affective hierarchies that determine whose discourse attains universality and whose remains confined to the particular. To feel legitimate in articulating a public message involves the confrontation of internalised hierarchies. By questioning the rules of the game, the discursive structures through which collective patriarchal imaginaries are produced experience a feminist transformation.

Conclusion

Academic feminism today grows as an infrastructure of transformation. When women's narratives and testimonies of VAWG enter literature, seminars, public health curricula, youth work programmes, and EU-funded research networks, there is a shift from women's

silenced pain to institutional knowledge. Yet this transformation is not automatic since it requires active and purposeful mediation, translation, pedagogy, and collective commitment. In this sense, the university remains a contested terrain, simultaneously enabling resistance and risking neutralisation. The challenge for contemporary feminist scholarship is to inhabit this tension deliberately: to institutionalise without losing critical force, to archive without domesticating women's speech, and to professionalise without silencing women who have been relegated to the margins but now move to the center. Academic feminism, thus, is not only a genealogy of ideas; it represents an ongoing practice of resistance enacted through classrooms, research networks, and transnational circulation of feminist knowledge.

In this article, I have argued that academic feminism today is best understood as a mediation infrastructure through which women's testimonies of violence—particularly medical violence against women and girls (VAWG)—move across disciplines, pedagogical settings, and institutional frameworks until they become stabilised as legitimate knowledge. By understanding medical humanities as an empirical entry point, this analysis has demonstrated how the circulation of feminist knowledge is shaped by unequal regimes of credibility that determine what counts as evidence, whose voices are rendered as authoritative, and which forms of experience are perceived as intelligible within universities and professional training environments—and how these patriarchal standards can change with feminist practice. Across the contexts discussed here, the institutionalisation of feminist knowledge remains unclear. On the one hand, feminist scholarship and interdisciplinary initiatives have expanded the conceptual and pedagogical capacity of universities to recognise VAWG, producing languages for forms of violence that have historically been dismissed as anecdotal, private, incidental, or clinically irrelevant, such as the analysed concept of “*violencia vicarial*” in Spanish language to name violence executed by men against their children in order to hurt the mother; a form of—often invisibilised—VAWG. On the other hand, the persistence of traditional methodological hierarchies, particularly the

privileging of quantitative paradigms as the primary marker of scientific legitimacy, continues to constrain how women's lived experience can be translated into prevention. As Fricker's framework of epistemic injustice due to the obstacles within feminist knowledge's circulation and access in academia, women's credibility deficits do not simply marginalise individual speakers, women and girls; they shape institutional cultures of recognition, which cause feminist knowledge erosion:

The (woman's) cognitive disablement is seriously disadvantageous to her. The cognitive disablement prevents her from understanding an important patch of her own experience; that is, a patch of experience which it is strongly in her interests to understand, for without that understanding she is left deeply troubled, confused, and isolated, not to mention vulnerable to continued harassment. Her hermeneutical disadvantage renders her unable to make sense of her ongoing mistreatment, and this in turn prevents her from protesting it, let alone securing effective measures to stop it. (Fricker 97)

When testimony is treated as supplementary to “real” evidence, feminist knowledge risks being instrumentalised—used to support data rather than to transform the epistemological frameworks through which violence is defined, measured, and addressed, reproducing the very same violence feminist practice seeks to eradicate. By challenging conventional forms of expression as a political act, the verbalisation of women's silenced voices enables public recognition and, consequently, the recuperation of their agency.

The politics of naming and translation further demonstrates that VAWG prevention depends on intelligibility. The case of the Spanish term “*violencia vicarial*” also sheds light on how the absence of shared vocabulary across languages and institutional settings can produce conceptual and political invisibility, limiting what can enter professional training, statistical measurement, and policy design. What cannot be named is hardly ever recognised; similarly, what is not collectively recognised struggles to

be prevented. As Fricker states:

Social understanding—in particular our understanding of our own social experiences—is a sphere of epistemic activity in which relations of identity and power can create a particular kind of epistemic injustice, with the upshot that some social groups are unable to dissent from distorted understandings of their social experiences. (Fricker 96)

In response to these expressive limitations within the patriarchal canon, digital platforms emerge as feminist counter-archives where women's experiences credibility struggles and epistemic resistance become visible, especially for early-career researchers and women whose work foregrounds trauma-sensitive, lived-experience methodologies. These spaces do not replace institutional infrastructures, yet they expose their limits and reveal how feminist knowledge continues to circulate even when formal channels remain resistant by marking patriarchal values as the canonical standard.

At the same time, this study has emphasised the pedagogical stakes of feminist knowledge production. For instance, in medical humanities teaching and interdisciplinary training, storytelling and narrative work functions as a preventive pedagogy since it equips students and professionals to identify credibility hierarchies, interpretive erasures, and patterned misrecognition within international settings. This pedagogical dimension matters because VAWG is systemic, and systemic harm requires communal and collective forms of training, collaboration, and epistemological transformation—not only procedural reform. Yet classroom reception also reveals a recurring tension based on the students' paralysis or apathy in the face of institutional inertia, which highlights the necessity to treat prevention as a set of actionable practices supported by feminist, interdisciplinary, intersectional, and decolonial networks. Finally, the university appears in this analysis as a contested archive; a space that can stabilise feminist knowledge into curricula, programmes, and research agendas, while also risking containment through bureaucratic

logics, depoliticised equality discourse, and methodological gatekeeping. The present challenge resides in developing infrastructures that enable translation without erasure within the ecology of feminist knowledge production and circulation. In doing so, women's narratives can move from marginalized—or purposefully excluded—experience to institutional—or collectively shared—intelligibility, which seems to be a more promising path towards effective prevention.

Endnotes

[1] In *The Cassandra Complex* (1988), Laurie Layton Schapira uses the figure of Cassandra to describe the recurrent discrediting of women's expression, even when their accounts are accurate. Drawing on the mythological prophetess who was destined to foresee events yet never be believed, the concept captures a structural pattern in which women's claims are systematically undermined even when corroborated. In contexts of violence against women and girls, this dynamic becomes particularly visible since women's narratives are typically framed as exaggerated, unreliable, or strategically motivated, reinforcing cultures of doubt that enable institutional minimisation and social impunity.

[2] See Heraldo de Aragón, "Las humanidades se hacen un hueco en el nuevo plan de estudios de Medicina de la Universidad de Zaragoza" ["The Humanities Find a Place in the New Medical Curriculum at the University of Zaragoza"], 28 July 2024, <https://www.heraldo.es/noticias/aragon/2024/07/28/las-humanidades-se-hacen-un-hueco-en-el-nuevo-plan-de-estudios-de-medicina-de-la-universidad-de-zaragoza-1751409.html>, reporting that the updated medical degree programme in the Spanish city of Zaragoza formally incorporates medical humanities modules, providing evidence for an institutional commitment to integrating humanities perspectives into biomedical education.

[3] See the figure of the female health worker violence iceberg in A. S. George et al., "Violence against Female Health Workers Is Tip of Iceberg of Gender Power Imbalances," *The BMJ* vol. 371, 27 Oct. 2020, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7587232/figure/f1/> — illustrating the multiple layers of violence experienced by female health workers beyond what is visible in formal statistics.

[4] Viola – Free from Violence (Viola – väkivallasta vapaaksi ry) is a Finnish non-profit organization providing counseling, guidance, and psychosocial support to women victims of misogynistic violence,

with a particular focus on post-separation violence, including persecution, high-conflict separation, financial abuse, and parental alienation. Please, see: <https://violary.fi/en/>.

[5] Ministerio de Igualdad (España), "Violencia vicaria," <https://violenciagenero.igualdad.gob.es/otrasformas/violenciavicaria/> — official policy definition framing violencia vicaria as violence exercised against children in order to harm their mother, recognised within Spain's legal framework on gender-based violence.

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