A Feminist Paradigm for Drama Therapy in South Africa

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For my…

Grandmother, grandfather and my mother, who worked hard to get us ready to face the challenges of being black and women in an unjust world. Honour and respect always. May their souls rest in power.

For my sister Petunia Mlangeni with the magic of making every day worth celebrating.

Acknowledgements

Declaration

I hereby declare that this thesis is a result of my original investigation. Where otherwise stated, sources used are acknowledged and referenced in-text and in the reference list.

I declare that the thesis has not been and will not be, submitted in whole or in part to another University for the award of any other degree.

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Abstract

This research looks at the possibility of a feminist paradigm that can frame the practice of drama therapy in South Africa. The paper explores the challenges that black South African women are still battling with twenty-five years post-Apartheid. While investigating the notions of gender and the significance of the different waves of feminism, and how feminist pedagogy has come to help us understand gender as a social construct. Through five interviews with practising Drama Therapists in South Africa, the paper distils the themes that these practitioners face in their daily encounters. The research stresses the importance of feminism as a way of working towards deconstructing the taboos that inform gendered roles. It further explores the historical legacy of Apartheid in present-day South Africa. It also looks at the issues of body politics and how capitalism continues to exploit black bodies especially those of women for profit. Also, it explores silence and its uses.

Keywords: Drama Therapy, Feminism, Black Drama Therapists, Feminist Paradigm

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Chapter 1

Introduction

Gender based violence (GBV) is violence directed at a person because of their gender and gender identity. It can happen through physical violence, sexual, emotional and verbal abuse. It can also happen through economic and self-improvement deprivation in private and public life (Ott, 2017) Women and girl children are the most affected by GBV due to historical systematic gender-based inequalities against women. GBV continues to exist due to lack of justice, economic opportunities and access to education for women and girl children, pushing women in a cycle of dependency on those who continue to endanger their wellbeing (Ott, 2017). GBV can affect the mental, physical and emotional wellbeing of the individual affected. It can lead to depression and limiting an individual's ability to participate fully in their economic and emotional empowerment, due to physical and mental trauma caused by the violence (Ott, 2017). In South Africa, a woman is murdered every three hours (Stats SA, 2018). These are the alarming statistics that are experienced in various forms and spaces in South Africa. According to Nkanjani (2019) in South Africa, a woman is murdered every three hours, which is more than five times higher than the global average. Sexual violence has been on a steady increase of 53% between 2015 and 2017 (The Conversation, 2015). More recently, on March 4, 2019, South Africans woke up in horror to a viral video of a famous dancer/musician being beaten up by her producer boyfriend. In the video we see him punch and slap her and then pull her by the hair. What is particular about this video is not only the violence – something we tend to see in South Africa-, but the reactions from the public were a clear expression of women abuse. On various social media platforms, Police declared they could do nothing about this. Many men and women lamented that they are not interested in saving this woman who seemed besotted by her abusive lover.

I share the statistic and the viral abuse video story because as a female living and growing up in South Africa, I have often experienced violence from men and double violence from a society where we are not believed, and we are not protected. Walking

through Braamfontein, Johannesburg, with a female friend, a 15-year-old boy grabs a burger out my friend's hands and stands in front of us eating it and at the same time threatening us with violence. For women in South Africa GBV, has become a daily experience, our response is to run, or not say anything so as not to agitate the perpetrator. Witnesses to the violence do not intervene due to fear of repercussions against them by the perpetrator. Women feel more fragile that no one is going to help should the violence escalate. Every day we share stories of these incidences with other women, some worse than the other, but every day there is a horror story of GBV. More and more I feel imprisoned because I feel I do not have freedom of movement, nor freedom to stand up for myself, even scream, because people keep walking past the screams of women every day.

In her book, 'Organising against Gender Violence in South Africa', Hannah Britton (2006) suggests that there is a clear link between GBV and the systems of patriarchy, which formed part of colonisation and Apartheid. She writes that the widespread gender-based violence in South Africa can be traced back to the history of slavery and Apartheid. In South Africa, GBV is not new to the current generation but was a regular occurrence during colonisation and Apartheid, as a form of containing and controlling the native majority. This historical view of violence has translated to the high rates of violence experienced to the present date (Britton, 2006). Observing this continued high rate of gender-based violence in South Africa sparked my curiosity about how my field of study, that is drama therapy, engages with the gender question and gender-based violence, with particular focus on South Africa. A cursory glance through the literature, reveals there is a significant gap in research with regards to the issue of GBV in South Africa as it relates to Drama Therapy. More importantly, there is a gap in the literature of drama therapy when viewed through a feminist lens. By creating a feminist paradigm with which to practice drama therapy, this will allow us to view GBV and Drama Therapy in more precise ways.

This research seeks to find what a feminist centred practice of drama therapy looks like. Further, it seeks to consider new and exciting ways drama therapy in South Africa can address gender-based violence issues. The paper explores the challenges

that black South African women are still battling with twenty-five years post-Apartheid. While investigating the notions of gender and the significance of the different waves of feminism and how feminist pedagogy has come to help us understand gender as a social construct especially in South Africa. Through five interviews with practising Drama Therapists in South Africa, this paper distils the themes that these practitioners face in their daily encounters. This paper will also stress the importance of feminism as working towards deconstructing the taboos that inform gendered roles. It further explores the historical legacy of Apartheid in present-day South Africa. It will address the issues of body politics and how capitalism continues to exploit black bodies especially those of women for profit. Moreover, it will explore the very nuanced features of women's silence and asks the question how are we to interpret this silence in the context of GBV in South Africa?

This paper looks at the practices of social justice and feminist theatre in looking for guidelines for a feminist paradigm for the South African Drama Therapy.

1.1 Framework

I am situating the research in a feminist framework, which means, how It looks at investigating the notions of gender and exploring the significance of the different waves of feminism and how the feminist pedagogy has come to help us understand gender as a social construct. Also, to stress the importance of feminism allows me to: one, deconstruct notions of what it means to be female in South Africa; Two, use a feminist framework to create a space for the method of the story to be a knowledge making tool that can be seen as valid. Finally, feminism offers a clearing to understand the possibility of what a paradigm for Drama Therapy may suggest in deconstructing the taboos that inform our patriarchal society and its practices that allow othering and oppression of others.

What do I mean by paradigm? It is a point of view characterising a set "of beliefs, values, techniques, shared by the members of a given community" (Kuhn 1970: 35). If one looks at professions such as law, therapy and theatre, there is a base of knowledge; an understanding of how systems and principles to function. This is a paradigm. In

some of these industries, the systems and principles may be biased towards privileged individuals or certain modes of thinking. Either way, the suggestion is that these industries do not function in neutral concepts. They are rooted in paradigms, beliefs, values that are shared. These beliefs are not necessarily grounded in facts and can, therefore, change, (Aldoory 2005).

The purpose of this research is to examine how drama therapists working in South Africa are creating beliefs and values in a feminist centred manner.

1.2 Research Questions

Question 1. In what ways are South African Drama Therapists engaging with feminist ideas?

Question 2. What will a feminist paradigm in Drama Therapy practice in South Africa look like?

1.3 Overview of the paper

This paper will look at the intersectionality of the issues that still affect South African women and perpetuate hierarchal gender norms. It will look at exploring the question of gender and the power struggles inherent in the social construction of the gender question. Also, it explores feminism and social justice and how they are vehicles of social change. It will further look at the South African legacy of Apartheid and how it still influences the social consciousness of the majority of South Africans. It will further look at the notion of body politics and how women's bodies are still the source of abuse of cheap labour and other forms of mental and physical abuse. Furthermore, it will look behind the silence of women and understanding their silence.   Including, looking at other professions namely reflexivity, social justice therapy and feminist theatre, to try and find guideline that drama therapy in South Africa can use to create a feminist standpoint that is aligned and is specific to the issues South African women are confronting.

Chapter 2
Literature Review

2.1 What is gender?

Gender speaks to the roles and norms that have been prescribed to women and men by society. Every society has and holds different beliefs on what these roles and norms are (Kari 2017). Biologically people are born men or women. However, people learn how to behave male or female through social roles. How men and women express, themselves is influenced by the expectations put on them by society through the spectacle called gender, (Jennings 1997). This learnt behaviour, Judith Butler (2002) suggests, is taught by society through beliefs and norms. The teachers are both family and broader social group they are born in to (Kari 2017). If we take this to be true, then gender (being male and female) is a social construction (Kari, 2017). Drama Therapist, Mayor (2009) suggests that there is a consensus that race and sexism are a social construction. Race and gender are constructed, created, taught by a repetition of certain acts that one sees other people who are the same biological sex act. (Mayor, 2009). These acts; and performances are then held to a belief, and these become the cause of many inequalities that exist between men and women (Kari, 2017).

Drama therapist Sue Jennings (1997), writes further that the concept of gender forces women to limit themselves and become subservient to the needs of others, which means that in the moment of being taught, they are taught and have seen others in their gender act 'less than'. Jennings (1997) adds that women have been forced into less-than acts and positions and roles for so long, that their self-hold has diminished. This long-suffering experience, Managa & Chiroro (2013) argue that it plays a role in abusive situations.

There seems to be a clear relationship between, female economic dependence and abuse (Bonnes, 2016). Furthermore, there are social and cultural attitudes, which

perpetuate conditions where violence against women is or becomes acceptable and tolerated (Bonnes, 2016).

The social attitudes as explained earlier are also held by society in general and women in particular. They are stereotypes perpetuated in unfounded projections that are unconscious (Mayor 2009). It is through projecting unwanted and unwarranted difference onto the other, that in turn creates limitations that birth produces (2009). Mayor (2009) further explains that because these limitations placed on others through racism, homophobia and sexism are institutionalised. It limits the voice of the other in the process of creating change. Therefore, these limitations and beliefs become mainstream (Mayor, 2009). Grosz (1994 cited in Mayor, 2009) stress that it is through othering those hierarchies are created and kept into place. It therefore holds that if there is a consensus that race and sexism are a social construction, why is there no consensus that can be socially deconstructed? (Mayor, 2009). Managa & Chiroro (2013) advise that understanding these roles and their expectations, can help in influencing change. However, there seems to be no agreement that these socially constructed limitations on people can be socially dismantled (Mayor, 2009). Managa & Chiroro (2013) advise that, considering these roles and expectations, can help in influencing change.

In patriarchal societies like South Africa, men have access to education, political participation and economic opportunities, leading to unbalanced power dynamics between men and women. This in turn increases the risk of coercive interaction and violence in intimate relationships, which put women at a higher risk of abuse and violence (Marx, London and et al, 2018). The construction of gender is therefore crucial in how we get to understand how power and action function in a place like South Africa, how women's ideas of their social role influence how they ask or get help. This idea of a gender construct also influences how we can think of the paradigm as a construct and not as something set in stone, but a systemic set of beliefs that can be dismantled and remade.

2.2 Feminism and The Different Waves

Feminism speaks to a political, cultural or economic movement aimed at establishing equal rights and legal protection for women. It concerns itself with political and sociological beliefs and philosophies surrounding the issues of gendered roles as well as a movement that fights against gender inequality and campaigns for women's rights and interests (Gwanet 2001). Meaning, that since there are certain ways of seeing women and certain behaviour expected of women, feminism aims to speak back and address these norms, by exposing them and critiquing them as not normal. Kristin & Williams (2010) illustrate that with all the different ideologies on feminism and what feminism is, the one common point of view is the desire to remove all the humiliating perspectives created about being female. According to famous feminist Bell Hooks, who wrote, 'Feminism is for Everybody' (2000), patriarchy is a power system that is interested in oppressing others and that we should **all** be aware of. She writes that we are all participants in perpetuating sexism prejudice towards women. To end patriarchy, we must change our minds and hearts; we must let go of sexist and chauvinistic thoughts and actions and replace them with feminist thought and action. This would stop patriarchal domination over women because currently, only men benefit from patriarchy and its prejudices.

The first wave of feminism arose in the late nineteenth and early twentieth centuries, to fight for the rights of women to vote. Women organised themselves to fight for the right to vote and have a voice in the political process. This led to arguments about the difference between men and women and challenged the culture of domesticity. It also brought questions of who had better moral values, and some argued that women were morally superior and can improve the political process (Rampton, 2015). Feminists such as Chandra Talpade, Angela Davis and Alice Walker have argued that the first wave of feminism was biased towards the white, middle class and heterosexual women. However, since 1851, women of other races have had a voice in feminism and have fought to define feminism for themselves (Gwanet 2001).

The second wave of feminism started in the 1960s and lasted until the 90s. It attracted women of colour and helped develop notions of sisterhood. The movement highlighted similarities in issues of gender, class and race. American anti-war and

civil rights movements provoked this wave. It was seen as more radical; as its fight was for the equal rights, not only for white women to get the vote but also for amendments to various constitutions around the world to guarantee social equality regardless of sex and race (Rampton, 2015). Its theories were a mixture of neo-Marxism and psychoanalytical theory. The division of labour was seen as primary to the oppression of women (Naidu, 2016). Conversations began to emerge about the relationship between the oppression of women and patriarchy, capitalism, and the woman's role as wife and mother. It started making a clear differentiation between sex and gender, sex being biological, and gender, a social construct that differs from cultures and is changing with time (Rampton, 2015). The second wave was geared at getting rid of sexism from top to bottom. It gave birth to the slogan "The Personal is Political", to help women understand that, their personal lives were controlled by sexist structures of power (Gwanet 2001).

The third wave started in 1990 and was influenced by post-colonial and post-modern thinking (Rampton, 2015). It was profoundly influenced by the fight against perceived downfalls of the second wave of feminism. It challenged the class, race and monosexuality limited definitions of the second wave of feminism (Gwanet 2001). This wave saw a rise in black feminists such as Audre Lorde fighting for voices and representations of others in the movements besides the white, middle class (Gwanet 2001). The third wave saw a rise of women wanting to embrace 'looking beautiful' and be educated at the same time. In other words, women did not want to be limited in the way they chose to express themselves. It gave rise to a new wave of women fighting for their rights to define womanhood for themselves. There was a redefinition of femininity of women as subjects and not objects. It also gave rise to strong voices of women from all race, class and sex and a rejection of universal feminism (Rampton, 2015).

All these waves responded to the needs of a particular time and space and helped inspire all the other waves that have continued to evolve. We are in an era where more women are in leadership, have voices on the issues that concern their bodies such as "abortion rights; access to the pill that increased women's control over their bodies;

more expression and acceptance of female sexuality; general public awareness of the concept of and need for the rights of women" (Rampton, 2015). There is a solid foundation of organisations, studies and voices that look and represent the rights of women more than ever before, all due to the initiatives started by all the waves of feminism (Rampton, 2015).

We are now in the post-feminism wave. This wave celebrates and embraces difference in identity, gender, and sexuality including differences in ethnicity, class, sexual orientation, etc. Where reality is seen as not fixed but a performative act that, boundaries can and should be broken (Gwanet 2001). It is alive with discussion of gender oppression being fully understood through the context of the marginalised. Moreover, feminism forms part of the bigger fight against oppression through race, ageism, classism, sexual orientation and other forms of oppression and othering (Rampton, 2015). This wave is inclusive of others and allows space for togetherness (Rampton, 2015).

2.3 African Feminism and Gendered Roles

What is feminism in the African context? As seen above, the vast majority of the scholarship on feminism and different waves are Euro-American based. Since this paper is based in Africa and mainly, South Africa, there must be an attempt to conceptualise what feminism means in South Africa. In South Africa and Africa generally, there have been public debates on what it means to be feminist. With many; mostly men, suggesting that feminism is a Western concept created to distract African women from being good mothers. However, there has been a push back by women. In an article in the Mail & Guardian, journalist Jessie Cohen writes about how to make feminism fashionable. She highlights that to the average woman in the country feminism was not fashionable, "because many people do not understand what feminism is and reject the label out of fear, they will be branded man-haters" (Cohen 2015). In the same article, social activist, Sisonke Msimang is quoted as defining feminism as a movement that addresses all the forms of oppression. She goes on further to say that feminism in an African context is "one that centres issues affecting women, black people, people with disabilities and queer people" (Cohen 2015). The

reason for this all-encompassing definition, is that if feminism only addresses women's subordination, therefore what happens to women who happen to be black, poor, immigrants, lesbian, or those who are on the periphery? So, in essence, African Feminism is not only about women, and their oppression but it becomes about women and others who experience various forms of oppression.

In the American definition of black feminism, Simms (2011) argues that for black feminists, this kind of feminism is focussed on the deconstruction of black slave images that continue to plague black women in the current world. Simms (2011:880) illustrates that there are three images used to stereotype the gender of black women, therefore, keeping them out of fully experiencing social life. The stereotypes are a weaponised and thus tools of oppression which also excludes. These gender role images were perpetrated by doctrines from religion, natural science, popular literature, social science, politics, law, and philosophy; images used to control the social, political and economic. As a result, black women are marginalised and limited. The first image to be discussed is the image of 'the Mammy.'

The Mammy; is an image of a black woman who is a domestic worker in the house occupied by white people. The origin of the image harks back to slavery when black women were nurses and workers in the house. The image falsehood portrayed the black woman as submissive, loyal to the master and his needs. The mammy is depicted as being stupid, always ready to serve and who loves caring for the white children of the house in place of her own. She never forgets her place. She is civilised through her interaction with the white families. "She becomes socially acceptable because of the influence of the white masters and is paternalistic. This image served to enforce male dominance through stereotyping the black women only with deference to her master," (Simms, 2011:882).

The second controlling image placed upon black women was that of Jezebel. This stereotype is that of sex- hungry, immoral woman controlled by lustful desires (Simms, 2011:882-883). This stereotype justified the raping and many sexual atrocities against the black female body by the white master and his sons. The dominant image

of the Jezebel permitted the white master that; sexually ravaging the black female body, only served the black woman's desires. This absolved the domination of the white master over black female bodies through rape and other inhuman acts against the black female body (Simms, 2011:882-883). This stereotype further served to perpetuate, concretise and sustain the myth of black women being breeders and forcing young black girls to have many children before they mature into adulthood (Simms, 2011:882-883).

The third controlling image forced upon black women was that, of the mule. Stereotyping them into nonhuman and senseless animals whose value was only through their physical labour. The white master whipped and treated her body, like that of a mere mule (Simms, 2011:883). Viewing black women like beasts, authorised the white master to treat her as domestic stock, even beating and working her to death. This justified the inhuman treatment of black women and the abuse of her labour (Simms, 2011:883).

Through these images, we see how the stereotype is perpetuated and that Black women's bodies are only valued as long as they are a means of exploitation or profit-making. Black women's bodies have come to be valued only as a means to labour and profit, through a complex system of sales and marketing (Peoples, 2008 cited in, Naidu, 2016). The division of labour is primary to the oppression of women (Naidu, 2016). The abuse of Black bodies is central to colonial and post-colonial history and the primary target of subjugation, objectification and oppression. (Nuttall, 2009 cited in, Naidu, 2016).

Society has placed low value on both female and black labour. Unpaid work that is primarily carried out by women, e.g. childcare, fetching water, grinding corn, etc. is not taken into consideration in the calculation of a country's Gross Domestic Product (GDP). The work undertaken is essential and necessary (Messac, 2018). GDP provides governments and economists with an indication as to the size, wealth and effectiveness of a country's economy over some time. It is therefore significant that the unpaid labour undertaken by a significant demographic is not recognised. Domestic work, a place black woman found themselves when unskilled forced labour was

forced upon the African, was especially undervalued and still is (Naidu, 2016). Most black women found themselves having to settle for low paid and undervalued jobs. After serving the master for low pay, they have to go home and perform the same undervalued tasks. Black bodies became a source of material gain (Naidu, 2016).

Stone (2013) points to the fact that women make up half of the human resources in the world and they are the principal agents of sustainable development. An article by the World Bank shows that women usually spread wealth beyond themselves by reinvesting higher amounts to their families and communities than men. The article argues that countries with greater gender equality tend to suffer less poverty.

Schlyter (2009) says that in the globalised economy, policies by government and their parliaments have a direct contribution to the perpetuation of abuse of women's bodies, which means that with the desire for increased profits by the capitalist class, wages are suppressed due to the surplus of unskilled labour. This is that labour often attracts illegal and informal employment where work is often sporadic and performed in unsafe working conditions. Prices are controlled by the global market for demand and supply. Costs have been depressed including that of labour, promoting illegal and informal employment where working conditions are inhuman and irregular (Schlyter, 2009), which in turn places women at risk of being the informal labourer, because historically gender bias norms have always placed women at the bottom of the labour and literacy privileges (Srinivas, 1998).

Even though working informally is exploitative and hard, women often choose to be pragmatic about the need for an income, no matter the conditions (Mususa, 2009). Mususa (2009) argues that women's bodies become hidden in a patriarchal system of trade.

In her book, 'Organising against Gender Violence in South Africa'(2006), Hannah Britton reasons that, in South Africa, gender-based violence (GBV) was made standard during colonisation and Apartheid, which has translated to the high rates of violence experienced to date. Britton (2006) holds that there is a clear link between GBV and the systems of patriarchy, which formed part of colonisation and Apartheid. These systems celebrated white male rule superiority and disregarded the significance of the

Africans, especially the African woman (Britton, 2006). The South African Defence Force used rape and gang rape against civil women and political activists. South African women were at risk of abuse from both the military and within the freedom fighting movements (Britton, 2006). Britton (2006) argues that the Apartheid and colonial era strongly shaped masculinity in the new South Africa. Britton (2006) reasons that, with equal rights for all South Africans, GBV has become a way of keeping women in line.

Walters & Manicom (1996) conclude that it is the woman's body that has been the source of women's oppression. That, the female body has been seen as a source for childbearing, taking care of others and sexual abuse. Critical race argues that race and gender work together in creating and re-enforcing social inequalities (Sajnani, 2011). Further arguing that patriarchy does not only define male dominance but all forms of dominance. Where an individual or group use and oppress others for their advancement and power. Critical race theory argues that the body is a site of struggle (Sajnani, 2011). Simms (2011: 879) asserts that black feminism constitutes of the emancipation of women from the "tri-dimensionality of the oppression they experience" namely race, gender and class.

Also, women's gendered roles have burdened women with the care of the bodies of others, whether it be nurturing the family, providing health care, preparing food for others. Women are tasked with sustaining their families and their communities (Walters & Manicom, 1996). Women's roles, whether it is reproductive or, productive, centre around taking care of others' bodies and needs.   (Thompson, 1996). Furthermore, it is the women's bodies that; religious and patriarchal systems seek to control. Whether through managing women's reproduction and sexuality or to control through rape, beating, murder and all the other atrocities against women, that are geared at the women's body (Thompson, 1996).

2.4 Feminist Theatre

Feminist theatre became popular in the 1970s, its emergence was inspired by a need to celebrate women's contribution in the world. It was also born to give women the space to interpret their own stories, free from the male dominance or the male gaze

(Aston, 2011). Before this, women's stories were told by men, who believed women to be objects to be desired and portrayed them as such (Kreie, 2018). Kreie (2003) clarifies that the male gaze assumes that everything happens from a male perspective and consequently depicts women as objects to be desired. Feminist theatre emerged to allow women the space to create their own stories free from male dominance or the male gaze (Kreie, 2003). Furthermore, it was created to challenge the traditional content and forms of theatre, which were male centred and dominated (Kreie, 2003).

The birth of feminist theatre was a stand against everything being interpreted through the male gaze, it was a stand against the assumption that everything occurs through a man's perspective (Kreie, 2018). Especially since the male gaze had little or no regard for women's contribution (Kreie, 2018). In addition, feminist theatre was created to challenge the traditional content and forms of theatre, which were male centred, and male dominated (Kreie, 2018). The focus of feminist theatre is working towards women's liberation by examining gender taboos. It exposes the injustice of women's oppression and critiques systems of male dominance (Aston,2011). It also celebrates women's contributions by telling stories of women historical figures, which are often ignored by men (Kreie, 2018). Another aspect of feminist theatre is that in order to counteract the male perspective, it challenges the content and the very structure of the theatrical play (Kreie, 2018). It allows intersectional voices to influence the stories that are told. This is achieved by rejecting the notion of one director, allowing the collective to narrate a story. It allows for plays to have more than one protagonist, as a means of rejecting hierarchal formats of power. The lead roles are given to women (Aston,2011). Feminist theatre focuses on examining gender roles, by reversing or mocking them. Therefore, feminist theatre empowers women by telling stories that celebrate women she-roes and leader. Feminist theatre exposes women's oppression and tells stories that critique systems of oppression particularly against women (Kreie, 2018).

The focus of feminist theatre is to examine gender taboos through telling stories of women historical figures who, which are often ignored and exposed the injustice of women's oppression in addition to exposing and critiquing systems of male

dominance (Kreie, 2003).   In its mission to prioritise women's liberation, feminist theatre allows intersectional voices to influence the stories that are told. This is archived through rejecting the notion of one director and allowing the collective to narrate a story. Also, it allows for plays to have more than one protagonist, as a means of rejecting hierarchal formats of power and the lead roles are given to women.

In order to challenge the male perspective, feminist theatre confronts the content and the very structure of theatrical plays (Kreie, 2003). In order to archive the above, feminist theatre focuses on examining sex and gender roles by reversing or mocking them and through telling stories that celebrate women she-roes and leaders. Exposing women's oppression and telling stories that critique systems of oppression especially against women (Kreie, 2003).

Further, feminist theatre challenges the structure of theatre making from a production process, plot, structures, casting and rehearsal processes. Feminist Theatre is inclusive. It gives space for many different intersectional voices to be heard in the stories that are worked on, this is included in the rehearsals (Kreie, 2003). It also allows for collaborative working, which is its rejection of hierarchical structure and a singular authority.

Feminist theatre allows for the celebration of women's stories. As a genre it is pluralistic as it takes decision making from the director to the women participating as actors. A multitude of stories can be created and developed. Ownership of those stories are shared. It celebrates women as heroes and leaders. It is beneficial to the actors playing and embodying the roles being expressed. The performances also benefit the audience who gain from the stories being told. As a result, feminist theatre empowers.

2.5 Social Justice Feminism

In South Africa, black women are still at the forefront of categories of oppression. To name a few: economic oppression; patriarchal oppression; sexual; violent crimes and environmental degradation oppression (Schutte & Singiswa, 2013) putting therefore Black women are at the forefront of economic and structural violence.

Kristin & Williams (2010) illustrate that, with all the different ideologies on feminism and the definitions , the one common point of view within the ideologies ,is the desire to remove all the humiliating perspective created about being female; The concept of social justice started in France and Britain in 1840, in order to challenge injustices within a society at the core. It questioned the distribution of wealth and relations of power (Kristin & Williams, 2010). By the early 1890s, it had gained popularity and inspired the challenging of policies that related to capital and labour. Currently, social justice covers a plethora of areas, such as human rights, education and calls associated with diversity and antidiscrimination (Kristin & Williams, 2010).

Social justice feminism is the fight for human rights and dignity (Kristin & Williams, 2010). Moreover, social justice feminism concerns itself with the improvement of women's welfare. Social justice feminism dismisses normative gender assumptions and traditional stereotypes that portray women as weak (Kristin & Williams, 2010). Feminist social justice stands against white male dominance that concludes that once the rights of white, middle class heterosexual abled bodied females have been acknowledged, human rights norms have also been addressed. Social justice seeks to represent those voices that have been disregarded and ignored. Social justice addresses within the context of human rights ,what exactly it means to be human and which humans are held to be 'less than.' . (Kristin & Williams, 2010).

Feminist social justice believes that "respecting another person is not just limited to leaving her alone; respecting another person involves attending to the conditions that are necessary for her thriving" (Roberts and Callahan,196:151 citied in, Kristin & Williams, 2010). It argues for a social justice system that ensures necessary conditions are available for all to thrive. It seeks to break structures that perpetuate white, heterosexual, able-ism and classism privilege (Kristin & Williams, 2010).

Kristin & Williams (2010) elaborate that, the importance of this is to recognise and address oppression. Moreover, the recognition of systems of oppression lies in creating alliances across different race, class sexuality, and ethnicity to help build understanding and theories that will help overcome subordination.

Social Justice feminism focuses on making change happen from the bottom to the top. It argues that poverty affects even a mundane decision, like diet. That people sometimes are forced to support the fast food franchise selling unhealthy foods because of affordability. Moreover, sometimes people do not have access to recreational facilities to help them fight obesity caused by the foods they afford to eat (Kristin & Williams, 2010). Therefore, this raises the question of agency and autonomy, to which extent can the poor exercise agency in their lives and communities? Feminism for justice highlights the importance of law as a vehicle towards creating structural changes to ensure justice for all.

Kristin & Williams (2010) clarify the four main principles of feminism for justice. Firstly, Productivity. Thinking creatively, thinking big and inspiring thinking that, will pioneer change and yield results. Secondly, it encourages improvement and development in finding different ways to empower and unite women. Thirdly, feminism for justice endeavours to recognise the interlocking, subordinating structures by acknowledging that some women face multiple oppression. For example disabled women of colour, women of a certain age and the LGBTIQ community. Fourthly it encourages the importance of the question who is represented and who is not, to continuously aspire to inclusion and representation of all women.

Social justice feminism argues that a clear theoretical framework is essential because such a framework would offer possibilities for practice and reform and the articulation thereof. It recognises what has been done and offers possibilities to improve on it (Bartlett, 1990:247, cited in Kristin & Williams, 2010). Kristin & Williams (2010) speak to the methods used in feminism for justice. Namely, looking into history to learn about how structures of oppression have been designed using this understanding to work towards dismantling those systems that perpetuate hierarchies and inequalities. Also taking a more in-depth look at how race, class, gender and other forms of othering work to create injustice. Furthermore, making sure that the methods put in place to deconstruct the above, work from the bottom- up and are conducive as solutions.

Social justice feminism also recognises that those in power tend to write history in their favour. It then focuses also on recovering lost accounts of peoples' experiences and re-examining-how history has been written to favour the point of view of those who wrote it (Kristin & Williams, 2010). Integral to the re-examination of historical narrative, the voices and stories that were previously suppressed are now brought onto centre stage. The result of this re-examination changes the way we interpret and analyse history as well as how we view the present day. (Kristin & Williams, 2010).

Matsuba (2004:276, cited in Kristin & Williams, 2010) argues that forms of oppression have predictable patterns. "All forms of oppression involve taking a trait, X, which often carries with it a cultural meaning, and using X to make some group the 'other' and to reduce their entitlement and power. All forms of oppression benefit someone, and sometimes both sides of a relationship of domination will have some stake in its maintenance. All forms of oppression have both material and ideological dimensions. All forms of oppression implicate a psychology of subordination that involves elements of sexual fear, need to control, hatred of self and hatred of others."

In understanding the above, it can be seen how subornation is created and kept in place. Social justice feminism has its roots embedded in injustice for women. Moreover, it uses knowledge to help create new structures that are people-centred and profits the growth of all people (Kristin & Williams, 2010).

2.6 Feminist Paradigm

Feminism speaks to a political, cultural or economic movement aimed at establishing equal rights and legal protection for women. It concerns itself with political and sociological beliefs and philosophies surrounding the issues of gendered roles, as well as a movement that fights against gender inequality and campaigns for women's rights and interests (GWANET 2001). Kristin & Williams (2010) illustrate that with all the different ideologies on feminism and what feminism is, the one common point of view is the desire to remove all the humiliating perspectives created about being female. We are now in the post-feminism wave, where ambiguity is celebrated, and

limitations and exclusionary forms of thinking are rejected (GWANET 2001). This wave celebrates and embraces difference in identity, gender, and sexuality including differences in ethnicity, class, sexual orientation etc. Where reality is seen not as fixed, but a performative act, and that, boundaries can and should be broken (Gwanet 2001). Feminism forms part of the bigger fight against oppression through race, ageism, classism, sexual orientation and other forms of oppression and othering (Rampton, 2015). A feminist paradigm therefore seeks to emphasise the parity between men and women. In a gender binary of men and women, both are of equal worth.

2.7 Drama Therapy in South Africa

Drama Therapy in South Africa is a relatively new profession. Drama for Life at the University of the Witwatersrand (WITS) is the only university in Africa that offers Drama Therapy at Honours and Master's level. The knowledge generated that it is African centred, has depended on this one university in the whole continent. Also, in its ten years of existence in South Africa, it has attracted predominantly white and female practitioners. Since drama therapy is a young profession in South Africa, there is a gap in the literature that is focused and relevant to the black people (clients) in South Africa and for Africans as a whole.

2.8 Drama Therapy and Feminist Paradigm

Mayor (2009) celebrates the ability of drama therapy to see and work with clients on a point of view that they are forever evolving and becoming. Mayor (2009) supports techniques such as witnessing and being witnessed, as giving the client the opportunity to see beyond social limitations into something more profound.

The beauty of drama therapy is that it integrates healing traditions from around the African continent and other areas. (Makanya, 2004). Jennings & Holmwood (2016) point out that even though the body is a central focus in drama therapy, drama therapy still relies on words that are bound to the political realm. Drama therapy is reliant on references that are sometimes unique to a specific culture and class. For example, in a drama therapy training class, a therapist invited us into an imaginary world where we are at a pool party where we were swimming at a deep end. Most of

the black colleagues went as far as dipping a foot in a public swimming pool. We were asked to enter into a world that we could not fully embody. I wondered if the therapeutic outcomes of such moments were limited by the lack of the therapist's awareness of who their clientele/audience was.

Mayor (2009) suggests that the most positive elements inherent in drama therapy are those that look at the human being not as being in a set reality but ever changing. It is a reality that includes working within a space that encompasses a diverse group of people in terms of race, gender, class, sexualities and cultures and physical and mental abilities. Working within a multicultural space stipulates that the therapist should understand their own firmly held emotions and beliefs about others (Sue and Sue, 2008). What this process should enable is empathy with others that can remove the possibility of 'othering'. "Empathy gives us common ground to allow each other to be truly heard and listened to; it allows us a space to experience some of the emotions and feelings of what it takes to be someone else" ((Perry, 2017)
Arguably, by empathising with their client(s), the drama therapist can create a safe space for the client that can enable the client to express themselves in a manner that they might not be able to outside the therapy space

Another vital aspect of drama therapy is the use of dramatic expression, which is an emotional cleansing; it tends to influence good mental health. Drama therapy uses many artistic expressions, like dance, music and art, as avenues into more in-depth, meaningful work with clients. A drama therapy session can focus on an individual or work with groups. It uses creative mediums in a remedial space to tackle thoughts and emotions and go deeper into past and present traumatic experiences (Good Therapy 2015). Drama Therapy uses dramatic elements to work through trauma, which allows for lightness and play. The mix of dramatic elements used in the processes of drama therapy can give voice and relief to those who may not even have the labels or words to speak of their trauma.

Understanding how trauma victims are empowered to transition from a mindset of a victim to that of a survivor having gone through the process of healing through Drama

Therapy can empower other organisations working with traumatised victims and empower women to live holistic lives. It is important to question whether the techniques used in Drama Therapy in South Africa fit into the South African context, in order to benefit South Africans. Especially South African women, as they are the ones who suffer the injustice of gender-based violence and the many post-Apartheid atrocities.

Sajnani (2011) speaks to the importance of feminist therapy and clarifies its importance using two primary believes of feminist therapy. One is that gender roles influence everyones' life and the institutions we function within and therefore gender enforced roles should be prioritised in therapy. This comes from the understanding that, we were taught how to behave like a man or a woman but that no one was born gendered (Miller, 2011, cited in Sajnani, 2011). With South African femicide, women advise other women to either be silent or not to fight back, anything that will allow you minimum physical hurt. We give our bags, cars and whatever the male perpetrator wants, they can take it from us, with the hope that they will not cause us more than the emotional trauma.

The South African femicide has become like the cross in ancient Rome. Where people who rebelled against the regime would be hanged and left for days so the passers-by can be reminded of what happens when one speaks or acts against the Roman empire (Kangas, 2012). Majority of the men do not speak against it or support women when it is happening because it seems to serve the male agenda to keep the woman controllable. Britton (2006) argues that with equal rights for all South Africans, GBV has become a way of keeping women in line (Britton, 2006). Evans et al., 2011, cited in Sajnani (2011), argues that social change has a direct impact on an individual, cultural and environmental transformation. Therefore, the second believe of feminist therapy is that problems should be traced back from its source, namely the politics of our social and cultural believes (Sajnani, 2011).

Sajnani (2011) clarifies that, issues such as rape, incest, sexual harassment and abuse that women battle with, have a direct link to the politics of gender. These issues have

a direct link to subjugation, oppression and women's limited power in society. Sajnani (2011) urges that feminist therapy is a means with which women can be supported and nurtured to help them create the necessary changes in their lives and the world. This article supports my research in that it explores ways in which therapy can help change the continued oppression of women. It examines how a therapy space can be a vehicle of both personal transformation and social transformation.

Mayor (2009) further argues that, if all agree that gender roles are a social construction, and then we have to agree that they can be socially deconstructed. Advising that, it is through a study of how race translates into daily life and how it is embodied that it can be deconstructed. Mayor (2009) maintains that therapy spaces can only contribute to the real transformation of social ills, only when they admit and recognise how they are encountered. Only then can a new language and techniques be formulated to address these social ills Mayor (2009). Therefore, it is arguable that without a clear feminist paradigm or framework that can guide drama therapists in helping to recognise the causes of social ills, drama therapists cannot help with deconstruction in gender roles.

Walters & Manicom (1996) clarifies that it is the woman's body that has been the source of women's oppression. The female body has been seen as a source for childbearing, taking care of others and sexual abuse. Walters & Manicom (1996) speak to the need for the feminist pedagogy, to recognise that the female body has been the source of abuse. The body remembers trauma and as a result, it has the capacity to hold onto that trauma. It is important to focus on releasing the pressure that women carry physically because of this. Walters & Manicom (1996) further argue that it is essential to know and use such pain and pressure releasing techniques, when working with women.

2.9 Race and Gender in Drama Therapy

The strength of Apartheid was in creating structural bias, that helped create and keep the power of white dominance. Population Registration Act of 1950 forced people into three categories of classification based on their appearance, social acceptance and

descent (Stanford, 2011). The brilliance of this system was in creating sustainable structural preferential treatment for whites (Stanford, 2011), with some work privileges and land ownership for coloureds and black men, leaving black women at the bottom of the food chain.

Little has been written and done about deconstructing systematic bias, restoring the dignity and safety, especially of black women, who were at the bottom of the food chain during the Apartheid. Mayor (2009), stresses the importance of having a strong theory on bias, to avoid having to translate and relay on the limited vocabulary created by white male professionals. Mayor (2009) further argues that bias is central to many peoples' experience and therefore it is vital to have a theory that helps speak to it. Furthermore, the theory can lead to helping in the reconstruction of a new perceptive (Bhabha, 1994 cited in, Mayor, 2009). Also, Mayor argues for training on how to work with race and gender for therapies, to help increase awareness of bias (Mayor, 2009). There is a need for the arts to celebrate and help build a diverse community (Mayor, 2009). Mayor (2009) further points to the lack of material that serves as a guideline on how to work in diverse spaces that are free from bias on the part of the therapist. (Mayor, 2009).

Sajnani (cited in, Mayor, 2009: 215) speaks of "minding the gap", which points out to the gaps that exist between the listener and teller, arguing that radical empathy is induced when the difference is addressed. Othering limits how we encounter each other. Therefore race, gender and class affect us individually and collectively (Mayor, 2009). The challenge of the other does have relevance in therapeutic spaces, mainly when working with power dynamics and group trauma (Mayor, 2009). Mayor (2009) clarifies the importance to recognise the effects of community in an individual's healing process and to acknowledge the impact of structural violence perpetrated by sexism, racism and classism.

Mayor (2009) cautions on the dangers of transference in the therapeutic space, where a response comes from previous experience. The danger presented here is when a white therapist works with a person of colour who has had a negative experience with

white people. This also holds for the male therapist working with a woman who has had negative experiences with men. The opportunity for transference is inherent and would prevent any therapeutic process from having a positive impact (Mayor, 2009). Mayor argues that the meeting of two people is loaded with previous experience.

Kaplan (2007 cited in, Mayor, 2009) argues for the potential of the arts to promote social change if the practitioner's practices consciousness and awareness of the client's context. Phil Jones (2008 cited in, Mayor, 2009) adds that, an individual is a total of socio-political and environmental factors and that therapy should consider this. The arts are a limitless resource. In all of its diversity and creativity, the arts can be used as a force for change when used with understanding and compassion for the other.

2.10 Potential benefits of Drama Therapy with a focus on Gender

Drama therapy has the benefit of delivering services to populations affected by collective trauma (Hudgins, 2002; Kellerman, 2007 cited in, Leveton, 2010). The techniques save time and money that would otherwise be used on individual or family evaluation. However, the success of drama therapy is more than financial: The very techniques used have been successful in reducing pain, improving communication, and suggesting solutions for oppressed and victimised groups. Healing collective trauma, elaborates on the techniques used in drama therapy to help groups deal with collective trauma.

Jones (2015:7) argues that, the dramatic process offers a language of encounter and help within the therapeutic engagement and that, the dramatic expression "cannot just be the road to expression and communication but to change." The process of dramatic expression and access to the therapeutic space, relationship and art processes are used together to awake dreaming. The trauma is transported out of the client into the therapeutic space (Jennings, 1990, cited in Jones, 2015:7). Jones clarifies how the therapeutic space created by a drama therapist, including working with groups and the processes of drama therapy, all work together to offer to relieve trauma.

Mayor (2009) speaks to techniques such as Developmental Transformations (DVT) in helping individuals rise above limitations. DVT portrays the self as evolving and become (Johnson 1991 cited in, Mayor, 2009). DVT is a technique that, utilises embodiment, where story, role and thymes are transformed (Mayor, 2009). DVT aims to help individuals to let go of attachments in the therapeutic space and their life (Mayor, 2009). DVT aims to allow for fluidity and being and to let go of rigid forms of identification (Johnson 1991 cited in, Mayor, 2009).

Another added advantage of DVT is the usage of techniques such as to-the-here-and-now that, the therapist can utilise to speak to real dynamic, such as the power dynamics between the client and their therapist (2009). DVT offers the therapist a space to show their human side and risk showing their flaws, in order to be able to connect with their client on an individual and equal basis (Mayor, 2009). Also, DVT does not see the client as good or evil but allows for the space to expose issues of power, self-exposure and privilege to be revealed so that they can be positively worked with (Mayor, 2009).

Mayor (2009) looks at the positive elements inherent in drama therapy, that which looks at the human being not as set reality but ever changing. Also, that, how we relate and encounter each other is central to the work in drama therapy (Mayor, 2009). Mayor (2009) celebrates the ability of drama therapy to see and work with clients from the point of view that they are forever evolving and becoming. Mayor (2009) supports techniques such as witnessing and being witnessed, as giving the client the opportunity to see beyond social limitations into something more profound. However, Jennings & Holmwood (2016) points out to the fact that, even though the body is a central focus in drama therapy, we still rely on words that are bound to the political realm.

Denise (1996) points out to limitations inherent in techniques such as sculpture and socio-drama, in that they involve the body in collective representation and have elements of distancing but do not acknowledge the body to be the primary source of knowledge. Denise (1996) argues that it is the female physical body that is the primary

source of oppression under gender-based oppression and violence. We need more techniques that can work with the client's body trauma. In the therapy space, the therapist is placed in a situation where they are potentially limited in the work they can do with a client. This is because the therapist can only work to transform the client's mental trauma and not the physical trauma at the same time. There needs to be further exploration as to how a drama therapist can work with a client in their totality and thus holistically.

2.11 South African Drama Therapy engages with the gender question.

Even though the field of drama therapy is still very young in South Africa, we are fortunate to have a plethora of existing theory to serve as a guideline towards creating a pedagogical understanding of intention, technique and standpoint. Gender roles influence everyone's life and the institutions we function within and therefore gender enforced roles should be prioritised in therapy (Sajnani, 2011).

Shirley and Linzi (1996) clarify that recognition that gendered roles, have put oppression on women, should inspire the creation of conditions that, help women deal with their pain. Therefore, paying attention to the feelings and emotions of women is of paramount importance in feminist pedagogy. Moreover, creating environments and techniques geared at inspiring women to open up and deal with their oppression, can be therapeutic and empowering. Most importantly the feminist pedagogy advises that there must be an understanding of how oppression gets imprinted on the body. It edges also understanding how to release the tension, to help inspire creativity and help find other ways that, women can be in their bodies (Shirley & Linzi, 1996).

Living in a country like South Africa that inherited so many social ills, we cannot avoid the issue of gender and the gender-based violence that daily grows in big numbers. We cannot turn a blind eye to those areas that need radical and immediate attention. Considering that, social change has a direct impact on the individual, cultural and environmental transformation (Evans et al., 2011, cited in Sajnani (2011). Also, vice versa, the field of drama therapy needs to have a clear voice on their pedagogical standpoint on gender. To help contribute in the transformation not only of the clients but the very social political playfield that, perpetuates the othering of black women

2.12 How will a feminist paradigm work in South Africa?

Britton (2006:) suggests that gender-based violence is closely connected to systems of male dominance. Britton (2006) illustrates that, during slavery and throughout the Apartheid regime, rape was one of the many atrocities used to control women. Britton (2006) further argues that colonisation and the Apartheid regime through male dominance and state violence helped perpetuated the high levels of rape. Including domestic violence and the many other forms of violence against women that, South Africa is battling with today.

Sajnani (2011) argues that the cornerstone of the practice of drama therapy is that of learned skills and an ethic of accountability. Also, through the many different approaches, the therapists allow embodied methods relationship responses to transformation against oppression and human suffering. Feminism was born from different groups with one mission, that of the liberation of women from patriarchal practices of oppression. Feminism concerned itself with the dismantling of male privilege culture, to a creation of an inclusive system Sajnani (2011). Sajnani (2011) clarifies that the construction of gender is man-made and plays a significant role in every individual's life and should, therefore, play a significant role in therapy. Sajnani (2011) further argues that issues need to be analysed within a socio-political and cultural context because social change affects individual and emotional change.

Feminist therapy takes from the understanding that gender is a social construction; therefore performative (Sajnani,2011). Gender is produced and reproduced all the time, and no one is born gendered (Butler (1993) cited in Sajnani,2011). Butler (1993 citied in Sajnani,2011) elaborates that, gender is scripted, and every gender has limited costumes that, offer limited choices.

Feminist therapy includes educating the client about gender socialisation, to help fulfil the four essential elements of feminist therapy (Evans et al., 2011 citied in Sajnani,2011). The four focus points of feminist therapy seek to put the feminist philosophy into practice and action (Brown, 1994 citied in Sajnani,2011). These four points of focus are inspired by Augusto Boal's believe that emotional issues are a reflection of the outer political and sociological struggles (Boal, 1979 cited in Sajnani, 2011).

The four focus points in feminist therapy are; first, the personal is political, which argues that individual transformation has a direct connection to social change — acknowledging that inequalities caused by oppression and power exist within the society and they have a direct link to the many psychological illnesses faced by communities (Sajnani,2011).

Secondly that the relationship between client and therapist should be equal. This encourages that, both the therapist and client should set therapeutic goals. Also, it encourages openness about the therapist values and beliefs about illness and health and how they plan to work with the client towards wellness. This process includes speaking openly about cost and affordability of the sessions including the benefits of therapy. This is to empower the clients with as much information as possible about the therapist. This includes the process and the cost so that they can make their decisions about therapy from an informed place. It is acknowledged that the relationship between client and therapist can never be completely equal, but the egalitarian relationship processes seek to empower the client with information to help them make informed decisions (Sajnani,2011).

The third is the privileging of women's experiences. This is inspired by the belief that the experience is defined by those who experience it (Brown, 1994 cited in Sajnani,2011). This view celebrates that lived experience differs from person to person (Sajnani,2011); The fourth is empowerment. This perspective comes from the observation that many of the issues that women bring into therapy are founded in women's experience of oppression and disempowerment. Feminist therapy seeks to

put energy in supporting women so they can make the necessary changes in their lives and the world. Empowerment being "as a process of changing the internal and external conditions of people's lives, in the interests of social equity and justice, through individual and collective analysis and action that has as its catalyst political action" (Sajnani 2011). This translates in the therapist supporting the client's strengths and their self-care. For this to happen, the therapist takes on the role of an educator. The methods used in feminist therapy are about empowering the client with an understanding of how gendered roles are created and how they impact their lives. Also, feminist therapy allows and supports the client to exercise their power in the therapy space and the world by leading them to find their own voices Finding one's voice is enabled by being equipped with the knowledge to make informed and empowering decisions (Sajnani, 2011).

Feminist therapy advises that problems should be traced back from its source namely the politics of our social and cultural beliefs (Sajnani, 2011). Sajnani (2011) clarifies that, issues such as rape, incest, sexual harassment and abuse that, women battle with have a direct link to the politics of gender. These issues have a direct link to subjugation, oppression and women's limited power in society. Sajnani (2011) urges that feminist therapy is a means with which women can be supported and nurtured to help them create the necessary changes in their lives and the world. A further question that this paper seeks to address is whether or not drama therapy in South Africa uses South African history to inform it's practice?

Techniques used to date in feminist therapy include educating clients on the ills of gender socialisation, how these gendered roles translate and affect their lives and help clients grasp the different power dynamic inherent in gender socialisation. Including, therapist and client working together to find ways in which the women can have a voice within and outside the therapy space (Sajnani, 2011). How will this technique translate into the drama therapy space to archive the goals of transformation?

Chapter 3

Research Methods and Epistemology

This chapter will explain the method used for the research and some of the logistical issues I experienced when considering the best strategies and methods I could use in obtaining data.

3.1 Epistemology

When I had first decided on what I wanted to research, I had an assumption that South African based drama therapy had developed a framework that considered the historical as well as the present-day contexts of South Africa regarding gender based violence and gender relations generally. In the review of the literature that precedes this chapter, I had established that there was a gap in the academic and empirical literature with regards to a feminist paradigm in drama therapy. Within the South African context, the enormity of the issue of gender-based violence (GBV) has been documented at length. With this in mind, the aim of the research was to bring these two identified strands together; namely the mental health effects of GBV on women in South Africa and the development of a feminist paradigm in drama therapy, that could potentially assist women living in a violent environment.

3.2 Ethical considerations

As I had intended to carry out interviews, ethics clearance had to be obtained before I could commence interviewing each subject. The central tenet of this research had been to investigate a feminist paradigm for South African drama therapy. My focus had been to gather data from qualified drama therapy professionals in relation to their way of working with women clients. My aim was to investigate whether they had

developed a framework or a blueprint that centred women. For this reason, I did not interview any drama therapy clients during the course of this research.

Once ethics clearance had been granted, I gave each of the five interview participants a consent form prior to the interviews taking place. All forms were signed and returned to me. The participants agreed amongst other things that they could be quoted directly. All interviewees had the freedom to withdraw from the research at any stage if they so wished.

3.3 Method

I have engaged with several data collection tools, one method I used was the qualitative method, which refers to illustrative research data, it can be in the form of individuals own written or spoken words or observation. It is concerned with the meaning of individuals attach to their lives. It is about the understanding of people from their perspective and context (Taylor and Bogdan, 2016). Blumer (cited by Taylor and Bogdan, 2016) strongly advises that the qualitative researcher must be free of any prejudices and must-see things as though they are happening for the first time. Qualitative research helps build insights from patterns in the data (Taylor and Bogdan, 2016). The qualitative method happened through individual interviews with drama therapists. I interviewed five practising drama therapists, who have worked with women.

When conducting the interviews, I was very cognizant of my own personal beliefs as a Black South African woman as this research resonated with me. I was aware of my own biases and beliefs and as such I was conscious of ensuring the interviewees had the space to respond to my questions.

Initially, I had thought about gathering my data from the therapists by way of a discussion panel. The Drama for Life Conference held at University of Witwatersrand in November 2018 had been attended by numerous drama therapy practitioners. As a result, I hoped to arrange the panel discussion during the conference. Logistically

however, arranging for all the therapists to attend at the same time proved to be impossible. Also, on further reflection, I began to wonder if a panel discussion would be the best method for obtaining the information, I needed to further the research. I concluded both for the ease of conversation and for logistic purposes, I would interview each therapist individually.

Individual, semi-structured interviews were deemed an appropriate means of accessing the information and also personal ideas.

I interviewed:

Faith Busika, Welma De Beer, Paula Kingwill, Themba Mkhoma and Mmabatho Mogomotsi. All are qualified drama therapists and practising in South Africa. Of the five interviewees, one was a black South African man (Themba Mkhoma), and two were white South African women (Welma de Beer and Paula Kingwill). My reasons for interviewing Themba had been based on his in-depth research and knowledge on African art and methods of healing, and ceremonies, having travelled and worked in numerous African countries. Welma De Beer is a healer who works with women from diverse racial, class and cultural backgrounds. In her practice and academic work, Welma always seeks to situate perspectives from various African cultural traditions. Paula Kingwill was part of the first wave of drama therapists in South Africa. She organises writing and meditation retreats that attract predominantly women from diverse backgrounds.

3.4 **The voices the paradigm**

Name: Faith Busika

Place of work: Senior lecturer at the University of the Witswatersrand. Also practices as a Drama Therapist at the Family Holly College.

How long they have been practising: Five years

Race: Black

Gender: Female

Name: Mmabatho Mogomotsi

Place of work: Practices as a Drama Therapist at the St. Peter's Church Child Care

How long they have been practising: Two years

Race: Black

Gender: Female

Name: Themba Mkhoma

Place of work: Has a private practice as a Drama Therapist, working in addiction treatment

How long they have been practising: Two years

Race: Black

Gender: Male

Name: Paula Kingwill

Place of work: Has a private practice as a Drama Therapist. Works in addiction treatment and care worker training

How long they have been practising: Over fifteen years

Race: White

Gender: Female

Name: Wilma De Beer

Place of work: Lecturer at the University of the Witwatersrand. Also has a private practice as a Drama Therapist working with special needs children

How long they have been practising: Two years

Race: White

Gender: Female

In addition to the interviews for qualitative research, I have used a secondary research method by analysing existing research and a literature review of academic work on feminist approaches to therapy and social justice.   The secondary research showed that there was a clear gap in the research literature with regards to a feminist paradigm in drama therapy. Other disciplines such as psychology and law for example had a

feminist framework. This lacuna in the secondary literature informed the questions that I then asked of the interviewees that took part in this research.

This study aimed to access the professional experience of their work with women, especially black women and to try and gain an in-depth knowledge of what they have learned and implemented in their professional practice. I wanted to learn the extent to which they have consciously, or unconsciously developed a feminist paradigm for the South African context in their work. Because a qualitative approach is useful in bringing a person's perceptions to the fore, it was deemed most suitable for a study which would be accessing a small sample of professional drama therapists with the aim to capture their knowledge and understanding of their personal, unique experiences. The actual questions asked can be found in Appendix 4.

Chapter 4

The Historical legacy of Apartheid in present-day South Africa

Apartheid created a structural bias that helped to generate and keep the power of white dominance. Population Registration Act of 1950 forced people into three categories of classification based on their appearance, social acceptance and descent (Stanford, 2011). The brilliance of this system was in creating a sustainable structural preferential treatment for white people and with some work privileges and land ownership for coloureds and black men, leaving black women at the bottom of the food chain (Stanford, 2011).

In an interview with drama therapist, Themba Mkhoma, he points to how not much has changed for women in South Africa, even after democracy:

"Even though it is 20 years after dispensation, the conditions in the townships have not changed. A black woman still has it hard. Take the women who sell corn in the streets. They wake up early in the morning, carrying the stove that is alive with hot flames, with a baby on their back. This woman will be at the street corner from five in the morning and returning home at midnight. When they get back home, they still have to cook for their family, and in the morning before leaving home, they need to make sure that their children are prepared for school," (Mkhoma 2018 – Interview)

Post-democracy, South Africa women's realities still reflect the race, class and gender-based realities of the old South Africa. Statistics South Africa indicate that since 2011, 55% of the population lives on less than a thousand Rands per month, 50% of which is black women (Chutel, 2017). Access to opportunities is still limited to a few which shows that for black women living beyond the poverty line it is still a lived experience (Kehler, 2001). Moreover, black children born in those households get forced into the poverty cycle from an early age. About half of South African youth are unemployed, and the majority have no skills (Chutel, 2017).

The youth in South Africa form most of the country's population at 50% of the total population of the country. According to the World Bank's South Africa Economy Update, the issue of unemployment in post-Apartheid South Africa is continuing the inequalities created by the Apartheid regime. Black people are still the highest

amongst those living in poverty, at 50%, followed by coloured people at 25% and Asians and White people are at 0,5% (Chutel & Kopf, 2018)

Sadly, South African unemployment rates among the youth have increased to a shocking 50%, post-apartheid (Business Tech, 2015). It is a national crisis that, the unemployment of youth under 25 years of age is at 67,4% (Peyper, 2017). More shocking is that most of the unemployed youth do not have a high school qualification and they lack basic skills that, the labour market requires (Business Tech, 2015). This crisis was created during apartheid 1948 to 1994, by the National Party with its mission to create white supremacy, by offering black South Africans inferior education. This denied black South Africans access to higher education and therefore lowered black South Africans access to higher and professional jobs. Leaving black South Africans on the lowest wealth and education scale and the majority of black people depended on manual labour for their survival (The Venda, 2015). In post-apartheid, the majority of black people are still living in the margins of poverty and lack the necessary skills to compete in the global economy (The Venda, 2015). Abahlali Base Mjondolo Youth League (2011) points to the fact that the poverty of their parents has fallen upon them. Not only do they have no access to information and resources to empower themselves, but they are also faced with issues of dire poverty, including access to water, sanitation and security. Also, marginalised South African youth are led to a life of despondency and drugs because it seems they have no place in the world. Again, when the youth turns to drugs, it is the mothers who suffer depression over the child stealing from the home or over the child's disappearance. The Resource Centre at University of the Witwaterstand (Wits) is a 24 hours IT centre where students have access to computer, internet and photocopying facilities. At Wits, it is not uncommon to see black students forced to sleep at the resource centre because they live far away from the campus. Due to their low income, they cannot afford to pay for accommodation closer to the University or on the campus itself. Commuting to the university is not an option due to the cost of having to do so daily. Reliance on food banks and the compassion of fellow students for daily nutrition is a necessity. What compels these students to endure conditions such as this is the hope that their degree will increase their earning capacity post-graduation. Due to the 'Black Tax' that many students are subject to, the ability to financially support family members as well as themselves these sacrifices are

significant (Ndhlovu, 2013). The 'Black Tax'is a commonly used colloquialism that denotes a self-imposed obligation by an individual to give a portion of their income to close family members who are in need of financial assistance. The self-imposition comes from an understanding of the historical obstacles that have led to generational poverty.

Minister in the Presidency for Women, Bathabile Dlamini (S.A. Government news agency, 2018) argues that even though youth is supposed to be an exciting time in a person's life, most of the South African young women are faced with stress and anxiety over the uncertainty of their future. Minister Dlamini holds that this anxiety faced by young women in South Africa is due to layers and different forms of violence against women of all ages and the poverty they face.

Drama Therapist, Faith Busika has come often come face to face with black women who have experienced this generational suffering. In her work with young women, Faith Busika has asked to meet with the parents of the young women. Most of the time, it will be the mother who will attend the meetings. The issues raised in the meetings will often resonate with the mother who will confess that she too has experienced much of the abuse that her daughter has experienced. (Busika, 2018-interview).

Engel (2017) explains that the reason behind the secrecy of being sexually abused is that of shame. Shame is an intense emotional wounding woman experience after being violated sexually. These feelings are as a result of having a sense of responsibility for how women are treated and the belief that women are incapable of protecting themselves. This further creates a sense of helplessness, humiliation and powerless. For these reasons many women keep silent about their abuse and therefore carry the feeling of guilt and being dehumanised.

Minister Dlamini argues that women are more vulnerable to mental health issues because they carry responsibility for family care and suffer the atrocities of economic discrimination and psychological abuse. (S.A. government news agency, 2018). The World Health Organisation asserts that conflict and post-conflict causes displacement

and can increase the state of violence against women and births new forms of gender-based violence (WHO 2017).

A UN reporter reasons that the violence inherited from the apartheid government is still alive in today's South African society. Moreover, that South Africa is still governed by patriarchal attitudes towards the role of women, which further perpetuates the violence against women and children and has become the accepted social phenomenon (UN News Centre, 2015).

Saha (2018) further reveals that South Africa has the highest in the world in incidences of gender-based violence against women. It testifies that daily woman are murdered, physically and sexually abused and either threatened and humiliated by their intimate partners and by perpetrators.

Themba clarifies that when working with black women, one is working with people with many layers of oppression and abuse:

Themba Mkhoma stresses the importance of being aware that black women experience many atrocities. Most of the time, the abuse they face happens daily (Mkhoma, 2018-interview)

To illustrate this point, the historical context of Apartheid in South Africa has arguably laid the foundations of the toxic masculinities that confront women and girls in South Africa today. The South African Defence Force used rape and gang rape against civil women and political activists. During apartheid, South African women were at risk of abuse from both the military and within the freedom fighting movements (Britton, 2006). The Apartheid and colonial area actively shaped masculinity in the new South Africa. Moreover, with equal rights for all South Africans, GBV has become a way of keeping women in line (Britton, 2006).

To further make matters worse, often when women report these violent violations against them, they are not taken seriously by the police. This lack of support shamed and discouraged women from reporting these crimes, which led to silencing and some

mental illness (Saha, 2018). Furthermore, domestic violence and sexual abuse are normalised and are not spoken about. This points out the dynamics of male domains through gendered roles (Shirley & Linzi, 1996). Managa and Chiroro (2013) stress that gender roles and gendered expectations can and do play a role in abusive situations.

When Mmabatho Mogomotsi was growing up, men had first preference in everything. As a little girl, she was taught that the role of women was to care for men. Her mother took care of the household alone because their father worked and stayed away. However, all decisions about the children, finances and the home were made by him, and her mother always played the supporting role, never taking the lead even when she was the one left with the burden of running things. What she observed as a little girl was that an important part of a woman's role was to serve men. It took years of reading and learning about gender politics before she could emancipate herself from the doctrine of male supremacy (Mogomotsi, 2018- interview)

Lutfun & Osmani (2002) on women and development speaks of the bargaining model as evidence that gender roles have psychological effects on people and their self-perception. Lutfun & Osmani (2002: 70) firstly points to what is termed the Breakdown Position. The Breakdown position controls how well an individual can do without the other. Women are disadvantaged from having a strong bargaining power by facts such as the responsibility for childcare always falling upon the woman. Also, men are more likely to receive the privilege of education which helps them secure better-paying jobs, which allows them access to certain economic activities (Lutfun & Osmani, 2002: 71). The feminist paradigm would seek to show how gendered divisions of labour disadvantage women. This is because roles that are deemed as 'women's work' are not given monetary value as paid work, particularly paid work undertaken by men.

4.1 Body Politics

Throughout history, black women have been at the forefront of social and cultural pressure, including racial, economic and gender bias related oppression (Maynard,

2018). Maynard (2018) warns that these oppressive social norms shape identity, which can lead to many issues, including mental health impairment.

Themba Mkhoma advises that because women face so much oppression in their daily lives, it is essential for healing professions to have a deep understanding of issues relating to body politics. Themba further argues that a black woman's body is vast landscape compared to that of a black man. "so, if drama therapy is the embodiment, it means that one also needs to understand body politics concerning a woman." Themba Mkhoma stresses that when working with black women, you are working with a story with many layers of pain. Most women use the therapy space to share about their daily conditions and economic hardship (Mkhoma, 2018-interview). Whilst black men have also experienced oppression, it is argued that black women face further oppressions by virtue of their gender. The source of this oppression can come from black men as well as white.

Body politics as a concept was introduced to help deepen the understanding that gender politics are politics about human bodies. Moreover, those bodies experience human pain; they become tired and experience hunger like everyone else. This concept was introduced to help put a human face to the struggle of inequality in a way that puts flesh and blood and emotions to the people who suffer these oppressive biases. Within the context of drama therapy, putting a human face to inequality is again an advocation of engendering empathy and compassion within the therapy space. This empathy helps stress the reality that it is real human beings who suffer the ills of discrimination (Schlyter, 2009).

Lugones (2010) speaks of the "the coloniality of gender", which argues that the oppression of woman is in four folds. Namely racialisation, colonisation, capitalist exploitation, and heterosexualism (Lugones, 2010:747). The understanding of the coloniality of gender offers clarity of the complexities involved in the body politics of being a black woman (Lugones, 2010). In seeing the coloniality of gender, a deepened understanding of the reduction of human beings to inferior non-human is
made visible (Lugones, 2010: 751). Faith Busika holds that part of being a black woman is learning to be resilient. "In therapy, sometimes you have to give black women space

and time to unravel their stories." Faith Busika argues that these stories are conveyed on multiple levels. There are stories of economic and emotional struggles that talk about the daily struggles of black women. Black women will often tell you about their struggles and then share about their resilience. This is true for all ages, even teenagers (Busika, 2018-interview)

These oppressive social norms shape identity which can lead to many issues, including mental health problems. Kincaid (1969, 884 cited in Maynard, 2018) emphasises that the supremacy of whiteness has been defined by and depended on the oppression of black people. Men and women live their daily lives shaped by their everyday lived experiences, influenced by the meaning given to them by their body size, their gender and by their race, perpetuated by globalism and national beliefs (Oldfield, Salo & etl, 2009). Body politics are therefore informed by how men and women interplay these gendered roles and share space as gendered beings. Including divisions of labour and who gets access to resources. This interplay is influenced by political and social and national economies which finds its way into the home and communities (Oldfield, Salo & et al., 2009).

Themba Mkhoma reasons that gender conditioning and its limiting beliefs are reinforced on women from a young age. This conditioning is not only done by the family, but also in the very communities that women grow up in. Parents sometimes cannot even keep their daughters safe. A girl who grows up in the township develops a way of navigating the township and has to find ways to even navigate through their families. Women are always working hard for their safety, sometimes even against the beliefs within the family about how the girl child should be brought up. As a therapist when working with a woman, especially a black woman, you have to be conscious that there is a lot that you are dealing with. (Mkhoma, 2018-interview). In this instance, what the therapist has to understand is the way in which gender will limit women's experiences.

Body politics, therefore, becomes the fight for power through the body, and sometimes this struggle for dominance includes violence. Body politics manifests itself in many ways, relationally with families and communities through who gets and has access to education, freedom of expression and movement for example. It is a cycle

of power struggles that are communicated through the body daily (Oldfield, Salo & et al., 2009). This struggle is not generic, and changes face over time and space. It can be understood through who has access to everyday critical necessities for survival and who does not. It can also be seen in who has the power and the voice to affect and change legislation (Oldfield, Salo & et al., 2009).

Walters & Manicom (1996) illustrates that it is the woman's body that has been the source of women's oppression. The female body has been seen as a source for childbearing, taking care of others and sexual abuse. Also, these women-gendered roles have burdened women with the care of the bodies of others, whether it is nurturing the family, providing health care, preparing food for others. Women are tasked with sustaining the body and soul of the family and the communities. Women's roles, whether it be reproductive or productive, centre around taking care of other bodies and their needs (Denise, 1996). This can help clarify that women have been taught to self-neglect and self-sacrifice — further perpetuating the lie that the woman's body is for serving others beside herself. Furthermore, it is the woman's body that religions and patriarchal systems seek to control. Whether it is through managing women's reproduction and sexuality, or control through rape, beating, murder and other atrocities against women, are geared at control of the women's body (Denise, 1996).

Mmabatho Mogomotsi argues that women not only experience violence from men but also other women. Therapy in these cases becomes about empowering the woman to stand up for themselves. It is about helping the women find their voice to express these issues that they are battling with (Mogomotsi, 2018-interview). This highlights the complexity of the issue of gender oppression. Whilst prevalent, oppression doesn't always come in the form of male oppression against women. There are some women who have accepted the 'Patriarchal Bargain.' i.e. they have chosen to uphold the patriarchal hegemonic systems rather than to challenge it. The rationale being that these women benefit from the existing system, so there is no need to change it (Deniz, 1988).

Paulo Freire (1972) argues that, once the oppressed have gained their freedom, they turn into being the oppressor. For they have been conditioned and shaped by the oppressor and they know no another way of being in power but through how they have seen power modelled to them.

Maynard (2018) reasons that the identity of black women has been made invisible by the history of oppression and through her blackness being defined through black men. The description of black women that is forced upon them is that of the superwoman who is strong. This role was perpetuated during slave time because there was a price to pay in being emotional around the slave masters (Maynard, 2018) This, in turn, has put the expectation that black women do not express emotions and have no personal needs (Beauboeuf-Lafontant 2009 cited in Maynard, 2018).

Mmabatho illustrates that women have not only been made invisible to the world but also themselves. This is apparent in therapy when instead of a woman talking about her challenges, she will speak of the challenges faced by the family and the community as a whole. It becomes about re-teaching most women that this time is about her and her needs. It always takes a while for women to adjust to talking about themselves. It is important to keep reminding them that this session is about her as the individual and not about the community and other women. It is important to continually remind women to be about their individual needs and struggles as a reminder that she too matters. (Mogomotsi, 2018-interview).

Maynard (2018) advice that through the controlling images cast upon black women, laden of racist and negative stereotypes, black women are always forced into roles, which in themselves promote the silencing of black women. Therefore, black women are always cast into roles they find themselves adopting without personal choice or free will (Maynard, 2018).

Faith Busika maintains that through gender bias, the responsibility of the children always falls onto the women. As a therapist working with young and teenage girls, most of the time when she needs to consult with the parents, it is always the woman who shows up. The men are never there for their children even when the children are

being raised by them; it is the women who always carry the responsibility of their children's well-being (Busika, 2018-interview)

Erikson (1968: 217 cited in Maynard, 2018) states that one's identity is defined through one's personality and the roles to which it plays. Identity refers to the beliefs, ideas and values that make a person, their behaviour and who they are (Cherry, 2019). Personal identity is the sense of self-made beliefs that are shaped by experiences and interactions with others (1998 cited in Cherry, 2019). In this instance, the role of the drama therapist is to help the client identify the roles, beliefs and expectations that society has imposed on them and to help the client strip away those layers to begin to understand who they are.

Nigrescence model of identity is defined as the developmental process of how a person becomes black. Being black being the process of psychologically identifying with one's race (Plummer, 1996). Cross (1995) argues that there are four stages through which one goes through in becoming fully identified as a black person.

The first stage is that of pre-encounter, where a black person identifies with whiteness and devalues blackness. The devaluing of blackness is due to a lack of knowledge of the social politics of being black (Cross, 1995 cited in Plummer, 1996). The next stage is that of the encounter; this stage occurs when the individual encounters racism. Then, the person starts to view the world according to this encounter. The next stage is that of immersion-emersion. The individual might omit everything related to whiteness from their lives; this can include changing of the style of dress, music and form of entertainment (Cross, 1995 cited in Plummer, 1996).

The fourth stage is that of internalisation. Here a person wants to be acknowledged for their blackness and has a full understanding of the socio-politics of being black. They are comfortable with themselves and others (Cross, 1995 cited in Plummer, 1996).

Plummer (1996) argues that unlike the popular cross black identity model, black children are prepared by their families and communities about the socio-political

terrain of blackness. Therefore, by the time they are adolescents, they are already internalised in their blackness and prepared to navigate a world that is biased towards whiteness (Plummer, 1996).

An individual's personality and behaviour are an automatic response to an objective of what is in their environment. Therefore, to understand behaviour, the individual's background, history, and learning experiences must be taken into consideration (Mearns, 2018). Parham (1993 cited in Plummer, 1996) clarifies that if supportive caretakers affirm one's blackness developmentally, an individual will flourish in their blackness. Also, Julian Rotter's social learning theory argues that personality is shaped by an interaction of the individual with his or her environment (Mearns, 2018). Ferguson (2016: 155 cited in Maynard, 2018) adds that how people think about an individual, influences how they answer the who am I questioning. There seems to be little personal choice in how black lives are constructed, and therefore no room is allowed for individuality in the construction of the black identity (Alexander, 2012). Too many black women have not had the privilege to have a positive identity with their womanhood and their blackness because they have been taught, whether through wider society, or through cultural norms that their gender and race makes them 'less than.'

Ferguson (2016 cited in Maynard, 2018) further argues that knowing one's identity is influenced by how the society at large views you. How then can black women have autonomy over their identity when the very society that helps shape that identity enrols her as subordinate, inferior and has no respect over her body? Furthermore, gender and racial oppression influence how an individual sees themselves (Maynard, 2018). This includes influencing how the oppressed carry, think and care for themselves (Karcher and Caldwell 2014 cited in Maynard, 2018) One presents themselves to the world in accordance to their understanding of who they are and how they desire to be received by the world. The brutal racial and gender oppression experienced by black women can negatively influence how black women feel about themselves (Aldridge, 1996 cited in Maynard, 2018).

Kincaid (1969: 884 cited in Maynard, 2018) holds that black identity is the construction of oppression. Hooks (1987 cited in Maynard, 2018) further stress that attempts by black women to define themselves for themselves may prove challenging, as it will have a direct influence in breaking down lifelong social constructions.

Schlyter (2009) further stresses that at the centre of body politics, is the struggle for the rights of women to control their sexuality and fertility without someone feeling they have authority over a woman's body. Historically women have been subjected to rules and policies concerning what they can do with their sexuality. The authority over the woman's body is in the hands of the individual men, religious institutions, their families, their communities and in some instances that of the state (Schlyter, 2009).

Bernard (2016) further argues that the body is the target of the human right violation of structural and symbolic violence. Structural violence being social systems that serve the betterment of a few and oppress the other. Bernard (2016) elaborates, "symbolic violence is a form of domination that is exercised on social actors with their involvement and complicity."

In South Africa, HIV/AIDS statistics show that teenage girls below the ages of 15 to the age of 24 are the highest in the newly detected infections (AVERT, 2019). Data suggests that this is because of income inequalities and lack of income, which lead to transactional sex. In transactional sex, the one with the money holds power to decide whether to have safe sex or not; most women find themselves engaging in unprotected sex for their survival (AVERT, 2019). Transactional sexual relationship happens where sex is exchanged for material support and other benefits. It is suggested that young women get involved in transactional sexual relationships for accessing basic needs, increasing their social status and for real expression of love (AVERT, 2019)). The article also argues that because of gender inequality, most men have a sense of ownership over their wives and intimate partners and they are the ones who have the decision on whether to use safe sex or not. This is also the source of the high rates of gender-based violence in South Africa (AVERT, 2019).

Mkhoma's warns that in understanding body politics, the therapist needs to be aware that processes which include touch, might be a trigger to some women depending on their experience (Mkhoma, 2018- interview).

Therefore, body politics should be a source of much reflection in considering how the body can hold a memory of pain. Conditions can arise that release the memory of pain from the body, and things that might be a trigger to the memory which may re-traumatise the client in the therapeutic space.

4.2 Mental health and Women in South Africa

The statistics for Mental health care in South Africa show that this is one health care area that is under-funded and under-resourced. South Africa is ranked third in the world for neuropsychiatric disorder, but due to the lack of resources, mental health care focuses on treatment for those with the severe mental disorders and does not include diagnoses and dealing with depression and anxiety and other mental disorders (SA Department of Health, 2013).

How we treat people who are challenged with mental health issues has its roots in how we see them (Pauw, 2011). Pauw (2011) elaborates that the stigma that causes the discrimination and othering of mentally ill people is a worldwide issue that dates back in ancient times. In ancient Greece mentally ill people were not welcomed in public space and if found in the streets their families would be fined. In the middle ages, people who suffered mental illnesses were labelled witches or proclaimed to be possessed by evil spirits. The medical treatment of mentally ill people in ancient times was through starving or flogging the patients (Pauw, 2011). The word stigma has its origins in ancient Greek, meaning mark. Criminals were marked to signify that they were banished and should be avoided (Pauw, 2011). Gibson (2017) elaborates that it is through the stigmatisation of mental health people fear to speak about their mental health challenges, leading to decreased quality of life, missed treatment opportunities and loss of independence.

Historically mental health care provision in South Africa was largely institutional. In 1846, Robben Island had been used to isolate people with mental illnesses, lepers and chronic patients from the 'normal people.' The National Health Act 61 of 2003 sought to deinstitutionalise mental health care provision in South Africa (Petersen, et al., 2009)

Mentally ill people are often regarded as weak and dangerous. Their mental illness is sometimes presumed to be self-inflicted. These perceptions give people the excuse to mistreat mentally ill people through verbal and physical abuse, teasing, shaming and many other forms of mistreatment (Pauw, 2011). The mistreatment of the mentally ill through mental health policy in South Africa was exemplified in the Life at Esidemini scandal. This had been one of the most significant human rights violations by the State since democracy (Nebe,2016).

South African women have been found to have higher levels of total anxiety disorder, panic disorder, phobic disorders and general anxiety orders when compared to men (Moultriei & Kleintjes, 2006)

Van der Kolk, McFarlane, & Weisaeth (1996, cited in Aydin,2017) explain that generally, trauma stuns the individual and, sooner or later, brings about a disorganisation in their psyche, while Post Traumatic Stress Disorder is basically keeping the individual's memory of the traumatic event as the dominant focus and robbing their lives of meaning and pleasure.

4.3 Understanding the silence of Women in South Africa

Motsemme (2004) speaks of how the Truth and Reconciliation Commission (TRC) was an insight into women's way of being and how the system of Apartheid changed how people and communities see each other. The TRC gave evidence of lived experience of broken people (Motsemme, 2004). A significant number of women gave oral testimony at the TRC. This is mainly because many men had been killed during the struggle against Apartheid. These women revealed the many strategies that women have used to try and protect themselves and their families and how they sometimes failed and broke down. It exhibited the women's usage of the language of silence to express their pain and grief. In this research, Motsemme (2004) highlights the effects of violence and how they have long-lasting effects that exceed the violation and violence. Mkhoma argues that in South Africa, black women battle with issues of poverty and the legacy of Apartheid. Also, they battle with the post-trauma of Apartheid that is in their communities (Mkhoma, 2018-interview)

The TRC stories also conveyed how women created new forms of agency to survive the horrors of their daily conditions (Motsemme, 2004). Motsemme (2004) points to how through the TRC, there was an exposure of how silence is also an embodiment and language that evidences agency. Moreover, how the process of the TRC evidenced the importance of giving as much focus on the messages behind the silence as we give to words and actions. To acknowledge that silence is a language through which women express volumes about their oppression and to work towards understanding this language (Motsemme, 2004).

Motsemme (2004) argues for a framework in which words, silence, dreams, gestures, tears all exist interdependently and carry meaning and the importance of realising that even the mute speaks. Speaking about the women at the TRC, Motsemme suggests that through working to understand the why and how behind the silence of the women during violent times, we may understand their narrative about remembering their oppression. Silence can be interpreted in numerous ways:

> "Silence as resistance and courage; silence as an illusion of stability; and silence as a site for coping and the reconstitution of self (Motsemme, 2004:910)."

Motsemme (2004) stresses that the language of silence forms the economy of those who are invisible and in understanding their language, we uncover their experiences of living under violence and oppression.

Motsemme (2004) argues that it is through the western tradition that we have come to honour words as the only language of communication. We, therefore, assume that those who do not give words to their suffering as unable to communicate. Motsemme (2004) speaking of the TRC, further clarifies that sometimes words cannot convey the tragedy, degradation and trauma that victims of atrocities of violence, oppression and being othered have experienced. It is those moments of dehumanisation, violation and loss that language fails to speak of the unspeakable hurts (Motsemme, 2004). It is in those moments being diminished and subjected to systematic violence and

helplessness that the role of language to explain and speak fails (Rosh White, 1998, cited in Motsemme, 2004).

Motsemme (2004) strongly argues that physical pain in situations of systematic abuse has no reference in the external world and therefore the victims have no language through which to speak. So, it is this lack of expression that keeps the terror and pain of those experiences trapped in the victim's body. Also, because of this, the victim's ability to participate in their lives is destroyed.

It is not surprising that the statistics for mental health amongst black women is growing internationally and sadly, there is little research available on black women and mental health (Ferguson, 2016).

Themba Mkhoma reasons that because black women are faced with many struggles (sometimes in therapy), they do not even touch on some of the challenges and abuses they have and continue to battle with. It is not because they do not want to talk about these issues, it is because the challenges have become part of their lives and so much of the pain has been internalised that they have normalised the abuse and the struggles and the pain has become who they are (Mkhoma, 2018-interview)

It recognises that pain does not always find expression through words, but other means of communication such as song and dance (Bakare-Yusuf, 1997 cited in Motsemme, 2004). Also, even the silence of those without verbal expression of their pain can be heard (Motsemme, 2004).

Faith Busika adds that touch is also a language that women use to communicate that which they do not have words to speak of and a language they understand deeply understand. This is so especially for older women; for them, touch can be a silent expression of how tough and hard a person's struggle is." (Busika, 2018-interview)

Motsemme (2004) elaborates that by giving the platform to speak to those who have been forced into silence by systems of dominance, is also a form of liberation. So that it is heroic when those who have been silenced by political oppression and sexual

abuse, speak in arguing for listening to that nonverbal communication that happens when the unspeakable cannot be communicated in words? It is not to disregard the power of speaking. However, to recognise that "silence within a violent every day can also become a site for reconstituting 'new' meanings and can become a tool of enablement for those oppressed (Motsemme, 2004: 917)."

Motsemme (2004) also warns that silence has many meanings and cautions against being single-minded in reading the meaning behind the silence. In some instances, silence can be used to protect others from harm, as in political wars. In this instance, silence becomes a form of resilience and recognition rather than that of ignorance

(Motsemme, 2004).

Amid the violence, oppression and hardship women face, they still undertake the responsibility of keeping the families together. This Includes keeping silent about their abuse to create a form of normality and morality for their children and their community.

Mmabatho argues that:

> "Woman always talk in generalisation, they speak about us instead of me, and there is a power when you shift the focus from us to you. They always speak of how the issues affect the community instead of how they affect them as an individual." (Mogomotsi, 2018- interview)

Sometimes even perpetuating the gender norms for the sake of holding, repairing and creating safety for their children amidst the pain of open violence against the women (Motsemme, 2004). Political Activist Mamphele Ramphele is quoted in Motsemme (2000) saying that the women have protected even the myth of a man as a supporter, protector, provider and decision maker in order to try and keep the moral and ethical fibre of the family and the community.

Women have perpetuated their oppression for the sake of keeping the family together. Furthermore, they have co-opted the gendered roles prescribed to them, even at the price of their wellbeing and censored their voice

Motsemme (2004: 921) contends that in this instance where silence is used to shield the children and community for breaking down, that in these moments silence can be as misleading as words.

In other instances, silence can become a survival strategy ("Silence and invisibility serve as a strategy to deny and acknowledge the daily survival of living under rough conditions," (Motsemme, 2004: 921).

Busika expresses that often when mothers show up to meet with her about the abuse, anxieties and stresses of their daughters, in those moments, the mother herself needs the therapy space as well. Busika finds that before the conversation can even begin about the daughter, the mother needs to talk about her anxieties and pain. It is often the case that the daughter's experiences mimic those of the mother ((Busika, 2018-interview).

Paulo Freire expresses that those who are oppressed begin to internalise this oppression. When this internalisation manifests itself over a long period, the oppressed person starts believing that there is no other way but to accept this state of being. At once, the subject begins to shape; they are according to how the oppressor stipulates (Freire, 2006). Sometimes the silence is a matter of internalising that no one will care in any event.

Motsemme (2004) further argues that women use silence of the external violence, oppression and suffering to protect their children and community from being overwhelmed by the chaos of it all. Therefore, embodying the suffering in their fight for safety for their loved ones, and being pushed further into denial about the realities of the hardships of womanhood.

In some ways, those are the moments where other women, especially the young, learn to be silent about their abuse and pain. Psychologist Mc Call (2011) argue that children learn from what has been modelled to them.

In an article on how to stay sane while black, Parker shares that she knew at an early age that she was a thing to be hated because of how black women were treated wherever they went. In shops black people are often asked if they are the shop keepers, her hair and skin were never good enough in how she is represented in the media (Parker, 2016).

Black women are taught to go inside and find a place of strength and to trust in prayer. Parker argues that back people are taught to pray because going to therapy is a privilege that the majority of black people cannot afford (Parker, 2016).

On the other hand, the very silence that women use to survive and create stability for their children and communities becomes a bond between mothers and the community (Motsemme, 2004).

In an article about the 'lowest in the stack', Ferguson (2016) argues that the negative perception of black women may be the most significant cause of anxiety and depression among black women. Black women suffer isolation through being othered and find comfort amongst other black women.

Busika suggests that shared experiences connect individuals and inspire compassion between them (Busika, 2018-interview).

These bonds are formed by collective experience and collective use of silence to rebel, normalise, protect and deny surviving some of the most inhuman dehumanising acts of terror against black womanhood (Motsemme, 2004).

Motsemme (2004) further argues that sometimes women use silence as a retreat into prayer. An escape into the sacred inner world of self, to collect and reclaim self (Motsemme, 2004).

Spirituality and religion play an important role in black women's lives, and it has become a way of coping, survival and maintaining one's wellbeing within African cultures and communities (Arrey, Bilsen, & et al., 2016).

> "Many women in South Africa will refer to God and spirituality, and it is important to speak to them from their point of view and that of their spiritual ties. It is the same with many African women, and they want to know that you will not judge their belief in a higher power." (Busika, 2018-interview)

To also speak to the spiritual world against the violence of daily life, in this instead women speak against everything that has come against them. This is done as a means to rise above its limitations and speak of its wrongness and hurts. Here, an inner world of imagination and a psychic resource is used by women to reimagine and validate Self-outside the abuse and oppression of daily life and cope with these challenges (Motsemme, 2004).

Scott (2016) in her paper on a spiritual approach for licensed professional counsellors, makes the point that there are benefits in using counselling methods that incorporate both spiritual and psychological concepts. The importance of this approach is that African people already rely on spirituality for their mental and physical wellbeing and this is reason enough to use methods that incorporate the two.

Drama therapy is a flexible art therapy that can incorporate different expressive embodiments in working with clients. The challenge lies in understanding the client's cultural and social expression forms.

4.4 Multicultural Awareness and Practice

Part of being a reflexive practitioner is to be a practitioner who is a multi-cultural practitioner. Multicultural counselling refers to a counselling practice that, can give conducive therapeutic intervention to culturally diverse clients. Culturally diverse

clients are inclusive of gender and gender identity, race, ethnicity, class, age, sexual orientation, religion and ability (Alliant International University, 2017).

Welma De Beer, a drama therapist, points to how sharing experience and knowing the experiences of the others help form a connection between the two:

> "I resonate with women and because I have lived the issues and I know what it means to be a woman in the world. When women walk into the therapy space, I feel that sense of we are equal, and we are sisters in our experiences of womanhood."
>
> De Beer argues that because there are many shared experiences amongst women. Being in their presence, there is a synergy rooted in trust and compassion that allows for a flow in the working together (De Beer, 2018-interview).

Sue and Sue (2008) strongly argue that to become able to work with multiple cultures requires that the individual should go through a process of experiencing their personal and deeply embedded emotions regarding those who are different to themselves. To allow themselves to experience and discuss their limitations in order to allow for the removing of the blocks that might continue the perpetuation of othering. Furthermore, to work towards seeing ourselves as part of a multicultural world, so to be able to fully listen and hear those that, are continuously oppressed and disempowered without our preconceived judgements of them (Sue and Sue, 2008)

Sue and Sue (2008) stress that the process of becoming multicultural is not depended only on cognitive competence, but it is rooted in one understanding and working through one's emotional reactions towards others. For it is in the awareness of these emotional reactions and working through them that allow for an understanding of your limitations. The understanding and working through our reactions to others is the very key to unlocking our limited conditioning to be thoroughly multicultural (Sue and Sue, 2008).

Sue and Sue (2008) suggest the following for implications for clinical practice. Active listening and being open to understanding those who are dis-empowered. Being aware of your learned prejudices and to not allow them to negate the experience of the others. Secondly, to go beyond your book learning and actively socialise with people who are different from you and be open to understanding who they are.

Thirdly, be willing to identify and explore your individual bias and work on it. Fourthly, every time you experience intense emotions of bias, be willing to work on them. Do not only dismiss, acknowledge that your upbringing has also enforced certain bias, and it is only when we that bias that we are transformed into being multicultural human beings. Fifthly, be open to talk and work through personal limiting values and beliefs that you might have about others. Sue and Sue (2008) strongly argue that it is through our silence that these limiting beliefs and bias continue to other and perpetuate prejudice.

Moreover, that, it is through understanding others, that we gain perspective into their world and who they are and through that, empathy is induced. Williams (2018) elaborates that empathy gives us access to our feeling and allows us an emotional understanding of ourselves and others. Williams (2018) further stresses that, being heard and understood forms part of the primary human needs, which allows us to connect, help and support one another.

Multi-cultural counselling advocates for the healing professions must be more empathetic to those they work with. So, for this to happen, the therapist must find compassion for themselves, so they are able to offer compassion to others and assist in the creation of a humanised human race.

Sue and Sue (2008) argue that historical and current socio-political forces that impinge on issues of race, culture, and ethnicity do come into the therapy space. Furthermore, the therapy space reflects the microcosm of race relations in our society. Lastly, the therapist often inherits the biases their race and that therapy may be the clash of our inherited biases.

Paula Kingwill a drama therapist, speaking on the South African context argues for awareness of how the historical affects the present:

> "It does feel crucial though not to be imposing any externally driven agenda around what takes place in the therapy space that might interfere with really being with and following the authentic needs of the clients." However, Kingwill further stresses the importance of Drama Therapists in South Africa to see their work on social activism level that will challenge GBV and other forms of oppression that allows inequalities to exist (Kingwill, 2018- interview).

If the therapist is unconscious about their biases and preconceived notions with their culturally different client, then the therapists are limited in their ability to help their client (Sue and Sue, 2008). This is when Freud's phenomena of transference and countertransference can dominate the therapy space. Where the client is projecting their own biases and feelings for others onto the therapist, this is transference. So, the therapist counter transfers those feelings when they unconsciously play the role the client expects them to play (Good Therapy, 2016). This runs the risk of the therapist further damaging their client, instead of helping them (Sue and Sue, 2008).

> "Male therapists working with women need to be aware of the social issues that women battle with. In so doing, the therapist is empowered to work with the different forms of transferences that might arise in therapy." (Mkhoma, 2018- interview).

It is important for therapists and those in the healing professions to understand the psychological effect of growing up in a biased society. Furthermore, to understand how these biases influence our judgment of others and inform our worldview (Sue and Sue, 2008). Lastly, it is essential to be aware of how biases affect the therapy space. It is imperative and conducive to find methods like disclosure to help bridge the

distance that can exist between client and therapist because of difference (Sue and Sue, 2008).

Sue and Sue (2008) further stress the importance of rapport between the client and the therapist. This helps create a therapy space of trust and understanding between the two and stands to yield therapeutic outcomes. For this to happen, self-disclosure at the start of the counselling needs to take place. This is when the two parties are honest about who they are. Self-disclosure can involve the therapist sharing with their client their personal belief, therapeutic practices and beliefs and their awareness of the difference between the client and self and how that will affect how they work (Sue and Sue, 2008).

This calls for self-awareness and self-understanding and more importantly being honest about who we are in the world and our standpoint. Once we have dealt with our issues, we can give more to the people who need us for their healing processes. It is also vital that we bring honest awareness of the world of bias that we live in.

Sue and Sue clarify that most of our othering are formed by not taking time to know the other and their social context and realities and assume that they are wrong cause they do and are different from what we are familiar with (Sue and Sue, 2008). It is crucial for the therapist to know their set of beliefs and be aware of the difference in the client's set of beliefs compared to their own (Sue and Sue, 2008).

Sue and Sue (2008) speak to the differences inherent in the black and white families. We can prescribe these differences within the South African context of South Africa. Black people have the challenge of most households being single parent run. This comes with economic issues and what the single parent can do with and for the child. While white families have the economic power, they also have the support of two parents; this already makes both perspectives of what family is the world apart in difference (Sue and Sue, 2008). However, it does not mean either is wrong, and it just means they are different. Besides, what will work for the black family might not work for the white family, this affects the solutions that might be given in therapy. For the

therapist to be helpful, they need to understand the differences that exist in each other's social context (Sue and Sue, 2008).

Paula Kingwill points to the challenges that come with when not having enough framework that speaks to the issues of difference and how to work with it:

> "One of the great challenges is to find a framework that can accommodate the intersection of race, class, culture, religion and sexuality in a way that is inclusive and not exclusive. This is extremely difficult (if not impossible), but we need to engage with it with openness and honesty. Even within our drama therapy community, we struggle with this (Kingwill, 2018-interview)."

Some groups are family oriented while some are community identified and this means they are less about me and more about us. There are also differences in how different communities deal with hierarchical communication patterns. Another huge difference that might exist is in how different communities in terms of emotional and verbal expressiveness. All these need to be understood by the therapist since it will affect both the diagnosis and the therapy goals (Sue and Sue, 2008).

Themba Mkhoma argues for more research by women and for women in helping to create an in-depth understanding of women and the cultures that influence their ways of doing things. He argues for going as far as examining whether the discipline of psychology is inclusive since the forefathers of psychology were predominantly white and male and researched and wrote from a patriarchal view of the world. Whilst there have been papers (Mayor, 2012 and Sanjani, 2013 for example) addressing the need for more feminist and intersectional practice within drama therapy, this is an area where more work and research is urgently needed.

> "A feminist paradigm in Drama Therapy would start with seeing the patriarchal nature of psychology as we know it today. So, we need to go

as far as even making the study of psychology culturally and gender inclusive (Mkhoma, 2018-interview)"

Mkhoma further argues that even in the stages of development of a child, the Eurocentric psychologist looks at the child's development from the perspective of the child relationship to their mother and with their father. However, for black people, many children are brought up in a community of a family with grandparents, aunts and relatives. A child has these influences from birth until they grow up. Therefore there is a need for research that shows how growing up in a community differs from growing up in a nuclear family. (Mkhoma, 2018-interview) A feminist approach would have to be that is rooted in current psychology research. It will also have to keep an open mind to also treat each client as a unique individual with their individual stories and the experiences that shaped them (Mkhoma, 2018-interview).

Paula Kingwill states that a challenge that faces South African drama therapists is knowledge production that is specific to the South African context. There is a lack of academic and theoretical research in South Africa. This is primarily caused by the fact that until recently, South African drama therapists have not been attached to a university. If drama therapists are either studying with or employed by an academic institution, there is an expectation that they will write and reflect on the field. However, when not affiliated to an academic institution, then writing and reflecting must be done in free time and with no remuneration. This can be extremely challenging and has resulted in this enormous gap (Kingwill, 2018- interview)"

Sue and Sue (2018) also argue for the importance of understanding the difference in spirituality that exists between white and black families. Black families tend to be religious and spiritual and turn to spirituality for life's challenges. While the family has various outlets for their stress release, all this difference does affect the cause of therapy. Sue and Sue (2008) speak to the importance of understating three things, namely that identity is embedded in multiple contexts, cultural identity influences attitudes and the importance of incorporating socio-cultural consideration to every client to enable a conducive therapeutic process. These are also vital for the therapist

to understand for themselves, so they can be conscious of what they bring into a therapeutic space (Sue and Sue, 2008).

Faith Busika adds that it is important to us to see the client's reference as part of creating a connection with the client. When a client refers to spirituality, it is essential for the therapist also to use those spiritual references to help make the client feel understood and to create a connection of trust between the client and the therapist. Church is a source of grounding and gathering strength for most black women because it is communal and it free (Busika, 2018- interview).

An uplifting moment in a reflection class taught by a black drama therapist took place as the academic year was drawing to a close. Everyone in the class was tired, overwhelmed and stressed. Our lecturer invited us to come into a circle, and as a group, we were invited to request from our fellow group members our favourite song or dance. Most group members requested their favourite hymns. We sang these hymns while cycling around the room. Most people had tears running down their faces as we sang and danced together. The energy was comforting and allowed for a release beyond words and that for me was the best therapy moment that day. We all entered a world of song and dance, and we released all the different loads we were carrying. As the class ended, we gave each other hugs, and I had a sense in me that I could make it to the end. This method had been close to our hearts. Singing and dancing together. It was something that was common to us. It was comfortable. It resonated to us as black students. I would argue that in a therapy space, a therapist should seek to provide methods and that have meaning to the client.

Drama therapy practice is pluralistic. It can absorb into different ethnic cultures. Methods such as transpersonal drama therapy, use spiritual practices to assist people through their uncovering and releasing of pain and trauma (Linden, 2013) However, in my study, there was little focus on such methods which in a way it is a disservice for the South African context because it is rooted in spiritual believes and practices.

4.5 Social Justice

The concept of social justice started in France and Britain circa 1840, to challenge injustices within society at its core. It questioned the distribution of wealth and relations of power (Kristin & Williams, 2010). By the early 1890s, it had gained popularity and inspired the challenging of policies related to capital and labour. Currently, social justice covers a plethora of areas, such as human rights, education and calls associated with diversity and anti-discrimination (Kristin & Williams, 2010). Sue and Sue (2008) argue that because injustice acts as a systemic force that causes most of the mental disorders such as anxiety, low self-esteem and depression. It is therefore imperative that the helping professions should concern themselves with social justice. So, work towards removing practices that perpetuate systems of oppression and bias.

Mmabatho Mogomotsi argues for a humanistic perspective that is flexible, informed and is rooted in social justice for all (Mogomotsi, 2018- interview)

Sue and Sue (2008) elaborate that social justice is about equal opportunity for all and all to be equally validated. Sue and Sue (2008) advise that therapy is about bringing the invisible into the light and to do so, one needs to be aware that the voices that are heard, are of those that hold power. Also, to recognise the importance of hearing those who are not heard. Besides, those in power define the reality of others, and unintentional oppression occurs when those in power impose their views on others. Also, when working with someone who is not self-realised, clients run the risk of being forced to conform to the very systematic forces that cause their dis-ease, instead of being empowered to overcome them. Moreover, therapy should be a place of empowerment.

Feminist social justice believes that "respecting another person is not just limited to leaving her alone; respecting another person involves attending to the conditions that are necessary for her thriving" (Roberts and Callahan,196:151 citied in, Kristin & Williams, 2010). It argues for a social justice system that ensures necessary conditions

are available for all to thrive. It seeks to break structures that perpetuate white, heterosexual, able-ism and classism privilege (Kristin & Williams, 2010).

Kristin & Williams (2010) elaborate that, the importance of this is to recognise and address oppression. Also, the recognising of systems of oppression lay in creating alliances across different race, class, sexuality, and ethnicity. To help build understanding and theories that will help overcome subordination.

Feminist therapy argues that the role of the therapist in feminist therapy is that, of empowering the client (Sajnani, 2011). Empowerment is as a process of changing the internal and external conditions of people's lives, in the interests of social equity and justice, through individual and collective analysis and action that has as its catalyst in political action (Morrow and Hauxhurst, 1998:41 cited in, Sajnani, 2011). The role of the therapist in regard to empowerment, becomes that of supporting, nurturing and strengthening women to nurture themselves and become their own advocates for change (Sajnani, 2011). This approach comes from the deeper understanding that personal distress is linked to outside social and political pressures (Boal, 1979 cited in, Sajnani, 2011).

Also, feminist therapy advocates for the relationship between the therapist and client to be that of partnership. There should be a pre-agreement on the therapy process and the therapy goals. This allows for a conversation on beliefs and values (Sajnani, 2011).

Faith Busika speaks in support of the feminist therapy method of sharing with the client the therapist beliefs and values as a way of creating a space of trust and a feeling of equality. She further supports after the session, breaking the ice between the client and therapist. It is essential to give the client a choice to decide whether they would like to work with you. Most often black women go into therapy because they have had a breakdown or because of some emergency in their lives and its either the hospital or an organisation that recommend therapy for and whom to see. So is given a choice to choose whom you want to work with is empowering because most of the time they are not offered the choice about whom they can have as their therapist (Busika, 2018-interview).

"I always introduce myself as a therapist. With older women, I go as far as telling them what I have studied and what I believe in. I have had to share authentically what therapy means to me and black women. Which sometimes is viewed as a privilege. I have to the point that out because a lot of the times black women tell me that they go to church for therapy and I encourage them in being proactive in finding a place that gives release to their daily stress. Also, encourage therapy as a place to find release from their mental and emotional challenges and hopefully as a place of transformation (Busika, 2018-interview)."

This includes a conversation on the therapist's perspectives on the underlying issues of the client's challenges. This is to ensure that the client is empowered with as much information as possible on the therapy journey, they are about to undertake. It is empowering the client to be an agent of their wellbeing (Sajnani, 2011).
Busika stresses the importance of understanding the social and political beliefs of the client so that the therapist knows what is important to them and work with them from those premises (Busika, 2018-interview).

Sajnani (2011) suggest that therapy should form part of a response against oppression and suffering. To contribute to the awareness of the socio-political and cultural experiences that inform our identification and our roles.

 Additionally, Paula Kingwill cautions that:

"However, I think as South African drama therapists, we do need to see that part of our work is also some level of social activism (possibly in the public domain) which challenges the status quo in which violence against women thrives and patriarchy is perpetrated. We need to constantly be aware of how these issues both historical and current influence all the institutions and systems in which we work and threaten to undermine the

needs of the client. We need to make our voices as drama therapists heard around these issues Kingwill, 2018- interview).”

South Africa has a history of racism that created strong notions of 'the other' which still inform how we see and interact with each across gender and racial lines. Sajnani (cited in, Mayor, 2009) speaks of minding the gap which points out to the gaps that exist between the listener and teller. Arguing that radical empathy is induced when the difference is attended to. Othering limits how we encounter each other. Therefore race, gender and class affect us individually and collectively (Mayor, 2009). The challenge of the other does have relevance in therapeutic spaces, mainly when working with power dynamics and group trauma (Mayor, 2009).

A feminist therapy also allows for acknowledging that nothing is set in stone and that a continuous open conversation will allow for opportunities to produce insights that represent diverse lived realities and help mobilise them (Sajnani, 2011).

Faith Busika (2018) stresses the importance to mobilise women through validating how far they have come. Validation serves as a mirror of their ability and their capabilities as change agents for their lives and their conditions.

Validation is about speaking life into a person. It is a process of painting a picture of how far they have come and how much they have overcome so that they can see and own their own strength (Busika, 2018-interview)

Psychologist, Stosny (2012) explains that validation can help distressed clients develop the agency to create value, meaning, and purpose in their lives. Busika further explains that it is about allowing the client to share their story, the therapist becomes that mirror that reflects their capabilities and how much they are able to overcome (Busika, 2018)

De Beer supports the importance of reminding women that they have what it takes to continue growing through validating them by affirming their strength:

"Another thing that I have found is that it is much easier for me to witness women and the positive qualities that they bring in and the courage they have. So, I am much more open to giving that to women and to also affirm them. So, mirroring their courage and affirming them, creating a space where women can make themselves whole and providing a safe space so women can heal themselves (De Beer, 2018)."

Busika further illustrates that when using validation, one has to be conscious that it does not come from a place that is patronising the client and making them feel like the other. Validation that comes from a place of seeing the other and recognising their courage and speaking life to those parts of themselves that are whole. This allows the strength to flow towards those parts that need restoration. It is about creating a safe space where women can openly share their stories of strength, of giving up and being broken. A space where they can be seen and validated for their strengths and be held through transforming those parts in themselves that need healing (Busika, 2018-interview)

Sometimes what women need, is a space to feel safe so they can reflect and re-energise themselves. The therapy that they need is someone to give them space and the time so they can offload. It's never about the solutions a therapist can give but to be seen, heard and to feel safe in their sharing (Busika, 2018-interview)

Welma De Beer advocates for collaborative work with women with women for women:

"We can talk about the hierarchies that exist and the fact that we are equal. We can maybe talk about collaborations and about how to bargain for self and about self-value (Welma De Beer, 2018- interview)."

In feminist theatre, the director empowers the women actors by allowing their input to influence the flow of the play and the final piece.

Mmabatho Mogomotsi argues that in a therapeutic space, it is vitally important to use resources and materials that are relevant to the people one is working with. She argues

that we need to tailor-make even the game we use to fit the audience we are working with, so not to lose their engagement with the therapeutic process (Mogomotsi, 2018-interview)

Lustria (2017) on message tailoring in health and risk messaging, elaborates the importance of tailoring techniques. The value of the technique is that it stands to speak directly to the client. Therefore, influencing the individual to be receptive because tailored techniques take into consideration an individual's, needs, beliefs and motivations and speak directly to the client. Tailoring enhances perceived relevance and captures an individual's attention and stands to have desirable effectiveness. Mkhoma explains that he prefers using objects that are neutral like a stone or a leaf. I like using symbols that do not have a concrete meaning and significance. This is important especially in his work with female clients. It is important to be aware that the objects that are in the space can either limit the client or assist them in sharing their story. Working with the abstract always helps the client distance themselves and project with ease into the abstract world, or through the abstract resource in the therapy space (Mkhoma, 2018-interview).

Feminist theatre encourages the director to allow for alternative narrative structures and exclude linear narratives, often choosing open-ended, circular or episodic plots to allow different narratives and voices to heard (Kreie, 2003).
Also, feminist theatre celebrates women's experience by putting a female character at the centre of the action and the use of ensemble casts, rather than a storyline with one single clear protagonist (Kreie, 2003).

Welma De Beer argues that because drama therapy is an embodied experience, it works well for women. Also, because the body carries pain, working with the body allows for the release of that pain we carry. The awareness of pain staying in the body and working with the body to bring about awareness of the pain is better than talking awareness. Drama therapy also allows for the mystical, the spiritual and for the irrational and that speaks to Black women, and women can use that medium to bring about awareness and help inspire transformation. (De Beer, 2018-interview).

Welma De Beer advocates for collaborative work with women with women for women:

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> and about self-value (Welma De Beer, 2018- interview)."

In feminist theatre, the director empowers women actors by allowing their input to influence the flow of the play and the final piece.

Mmabatho Mogomotsi argues that it is also what is brought into the space, i.e. props, attitude and therapeutic techniques that encourage women to share their stories openly. (Mogomotsi, 2018-interview).Everything that is used in the space are symbols that have meaning to the women. That space seeks to empower. There is no lead individual. Women share the space as a collective where they can celebrate each other.

Busika stresses that something within women makes them into nurturers and most of the time never allow for others to be othered. Mothers who are real mothers come from a place of equality and love. So, a place that is for women should be one that holds human beings and treats them the same. Also, when working with seniors, our approach should that of meeting them from a place of being humble and respect.

Conclusion

A feminist paradigm is not a practice that works to exclude or is against men, but is about standing for the emancipation of all those who have been downtrodden and abused for so long and side-lined for centuries. A feminist paradigm is a practice rooted in the knowledge of how the systems of oppression have structurally limited women. It is further based on the understanding that the subtle differences that exist between men and women are not based on how systematic biases have prescribed gendered roles. Also, these gendered roles have been a cause of much suffering, limitations and unspeakable pain and loss by women. Acknowledging that the rules, structures and systems that govern most professions are designed according to how men function, these structures serve men at the expense and oppression of women. Women, especially black women are excluded from these rules and structures. A feminist paradigm is, therefore, a set of principles to promote and include women. It is also rooted around the needs, transformation, advancement and empowerment of women. Guided by a set of practices, it is woman-centred and rooted in the emancipation of women

For a feminist paradigm to work, it must have a clear outcome that will help inform the basis of that paradigm.   It will have specific target areas that seek to bring about the much-needed change in women's oppression. It will thrive for an understanding and be willing to hear and see both the courage and hurt of being in a constant battlefield for ones being. In the reading, I did not find any research or drama therapy framework that could provide guidelines to working with black women. Welma Da Beer talked about creating a space for women to share their experiences of trauma and oppression. Faith Busika talked about the use of touch as reassurance during periods of silence within the therapy space. Themba Mkhoma discussed the lack of trust that can be exhibited between a male therapist and a client. Mmabatho Mogomotsi, talked about the use of physical props that are brought into the therapy space that are meaningful for the women involved. All of these methods served as important tools to achieve understanding and compassion and to help and provide the affirmation that women in the therapy space have said they want.

The feminist paradigm will be deeply rooted in the understanding and compassion of the struggle and oppression of women. It will endeavour to work towards supporting women towards healing from the abuse that they face and supporting them through reclaiming their voices. The Paradigm will also work to empower women in re-imagining themselves without the limitations of systematic mental conditioning and oppression. It will be a source of encouragement, transformation and inspiration to women in their ability to make the necessary desired changes in their lives and the lives of other women. It will also use methods that centre around the nature of women and their way of doing things.

It will work to affirm, validate and restore without further perpetuating the structural biases that undermine and neglects black women as human beings with feelings and needs and most importantly, that promotes women's individuality and understand the collective struggles. A feminist paradigm for South African drama therapy would be rooted in a deep understanding of injustice and seek to work towards contributing to social justice. Therefore, it would be an educational and empowering paradigm which uses inclusive methodologies.

The Paradigm will seek to inspire multicultural counselling, that will empower the therapist to understand their learned prejudices in order to transform them. Also, to have a deeper understanding of the lived experiences of black women and how the historical, structural oppression has been the cause of the present daily struggle of black women. In addition to understanding how a therapy space can be a place of re-traumatising, projections or transformation. Understanding the diagnosis is as important as understanding the client group and tailoring methods according to diagnosis, demographics and history.

More research and collaborative work amongst drama therapists and women will help create an area of focus and formulating guidelines for a feminist standpoint in South African Drama Therapy.

Reference List

Abahlali base Mjondolo Youth League 2011. *What is the Future for the Youth of South Africa?* [Online] Available at: http://abahlali.org/node/8316/ [Accessed 2 March 2018]

Aldoory, L. 2005. A (Re)Conceived Feminist Paradigm for Public Relations: A Case for Substantial Improvement. *Journal of Communication*, 55(4), pp. 668–684.
Aldoory, L. 2005. A (Re)Conceived Feminist Paradigm for Public Relations: A Case for Substantial Improvement. *Journal of Communication*, Volume 55, Issue 4, 2005,668–684.

Alexander, M. 2012. *The New Jim Crow. Mass Incarceration in The Age of Color blindness.* 1st Edition. The New Press: New York

Alliant International University. 2017. *Why Multicultural Counselling is Essential to the Success of Today's Therapist.* [Online] Available at: https://www.alliant.edu/blog/multicultural-counseling/ [Accessed 11 May 2018/05/18]

Arrey, A.E, Bilsen, J; Lacor, P and Deschepper, R. 2and et all. 2016. Spirituality/Religiosity: A Cultural and Psychological Resource among Sub-Saharan African Migrant Women with HIV/AIDS in Belgium. *PLos ONE*, 11(7), pp. 1-22

Aston, E. 2011. *Feminist theatre*. [Online] Available at: https://www.dramaonlinelibrary.com/genres/feminist-theatre-iid-2485 [Accessed 02 February 2020]/02/2020]

Aydin, C. 2017. How to Forget the Unforgettable? On Collective Trauma, Cultural Identity, and Mnemotechnologies. *Identity: An International Journal of Theory and Research*, Vol. 17(3), pp., No. 3, 125–137. Available: https://www.tandfonline.com/doi/pdf/10.1080/15283488.2017.1340160?needAccess=true [07/06/18]

AVERT. 2019. Young People, HIV and AIDS.*YOUNG PEOPLE, HIV AND AIDS.* Global information and education on HIV and AIDS. Oct 10. Available at: https://www.avert.org/professionals/hiv-social-issues/key-affected-populations/young-people [Accessed 18 February 2020] 18/02/20]

Bernard, H. 2016. *Under Development: Gender. Gender, development and Social Change.* New York: Palgrave MacMillan

Boal, A. 1979. *Theatre of the Oppressed*. 1st Edition. London: Pluto Press.

Bogdan, R & Taylor, S,J. 2016. *Qualitative Research Method – A Phenomenological Approach to the Social Sciences*. 1st Edition. New York: John Wiley & Sons.

Bonnes, S. 2016. Education and Income Imbalances Among Married Couples in Malawi as Predictors for Likelihood of Physical and Emotional Intimate Partner Violence. *Violence and Victims*, Volume 31 (1), pp. 51-70

Britton, H. 2006. Organising against Gender Violence in South Africa. *University of Kansas Journal of Southern African Studies,* Vol 32 (1), pp.145-163

Business Tech. 2015. *South Africa unemployment is worse now than at the end of Aapartheid*. [Online] Aug 17. Available at: https://businesstech.co.za/news/government/95983/south-africa-unemployment-is-worse-now-than-at-the-end-of-apartheid/ [Accessed 02 February 2019]

Butler, J. 2002. *Gender and Sex*. Modules on Butler. *1 Gender and Sex*. 2002. [Online] July 17. Available at : https://www.cla.purdue.edu/english/theory/genderandsex/modules/butlergendersex.html [Accessed 11 March 2019]

Chutel, L. 2017. *Post-apartheid South Africa is failing the very people it liberated*. [Online] Quartz Africa. Available at: https://qz.com/africa/1061461/post-apartheid-south-africa-is-failing-the-very-people-it-liberated/ [Accessed 15 January 2019]

Cherry, E .2019. "Not an Environmentalist": Strategic Centrism, Cultural Stereotypes, and Disidentification. *Sociological Perspectives*. Special Issue: Civic Responses to Environmental Issues: How Culture Matters. Volume: 62(5) pp. 755-772.

Chutel, L and Kopf, D. 2018. *All the charts that show South Africa's inequality is only getting worse.* Quartz Africa. [Online] Available at: https://qz.com/africa/1273676/south-africas-inequality-is-getting-worse-as-it-struggle-to-create-jobs-after-apartheid/ [Accessed 12 January 2019]

Cohen, J. (2015). *The bokkie stops here: Let's make feminism fashionable again* [online] The Mail & Guardian. Available at: https://mg.co.za/article/2015-03-27-the-bokkie-stops-here-lets-make-feminism-fashionable-again/ [Accessed 10 March 2019].

Thompson, Denise. 1996. *Against the dismantling of Feminism: A Study in the Politics of Meaning.* New South Wales: School of Sociology and Social Anthropology, University of New South Wales

Engel, S. 2017. Shame, Poverty and Development Studies. *International Development,* Volume 29 (8), pp. 1031-1232

Ferguson, A. 2016. *'The lowest of the stack': why black women are struggling with mental health.* The Guardian. [Online] Feb 8. Available at: https://www.theguardian.com/lifeandstyle/2016/feb/08/black-women-mental-health-high-rates-depression-anxiety [Accessed 04 March 2019]

Freire, P. 2006. *Pedagogy of The Oppressed.* 30th Anniversary Edition. New York, London: The Continuum International Publishing..

Freire, P. 1972. *Pedagogy of the Oppressed.* [Online] Available at: https://selforganizedseminar.files.wordpress.com/2011/08/freire_pedagogy_oppresed1.pdf [Accessed 07 June 2018] 07/06/18]

Good Therapy. 2015. *Drama Therapy.* Good Therapy. [Online] Available at: https://www.goodtherapy.org/learn-about-therapy/types/drama-therapy [Accessed 20 February 2019]

Good Therapy. 2016. *Countertransference.* Good Therapy. [Online]. Available at: https://www.goodtherapy.org/blog/psychpedia/countertransference [Accessed on 15 October 2018]

Gwanet. 2001. *History and Theory of Feminism.* [Online] Available at: http://www.gender.cawater-info.net/knowledge_base/rubricator/feminism_e.htm [Accessed on 10 August 2017]

Harcourt, W., 2016. Conclusion: Body Politics and the Making and Unmaking of Gender and Development. In: Verschuur, C., Guérin, I., Guétat-Bernard, H. eds. *Under Development: Gender.* 1st Edition. Palgrave MacMillan. New York, pp. 306-316

hooks, bell. 2000. *Feminism is for Everybody: Passionate Politics*. 1st Edition. London: Pluto Press

Jennings, S. 1997. *Drama Therapy. Theory and Practice. Volume 3.* 1st Edition. New York: Routledge

Jennings, S & Holmwood, C. 2016. *Routledge International Handbook of Dramatherapy.* London, New York: Routledge, Taylor Francis Group

Jones, P. 1996. *Drama as Therapy: Theatre as Living*. 1st Edition. London: Brunner Ridge

Jones, P. 2015. Trauma and dramatherapy: dreams, play and the social construction of culture. *South African Theatre Journal*, 28(1), pp.4-16

Kandiyoti, D. 1988. Bargaining with Patriarchy. *Gender and Society*, 2(3), pp. 274-290

Kangas, B. 2012. *The Shame of The Cross.* The Orant. [Online] Available at: https://www.patheos.com/blogs/billykangas/2012/01/the-shame-of-the-cross.html [Accessed 20 February 2019]

Kari, A. 2017. *Gender, equity and human rights.* [Online] Available at:

http://www.who.int/gender-equity-rights/understanding/gender-definition/en/

[Accessed 7 August 2018]

Kehler, J. 2001. *Women and Poverty: The South African Experience.* Journal of

International Women's Studies, 3(1), 41-53. [Online] Available at:

https://vc.bridgew.edu/cgi/viewcontent.cgi?referer=https://www.google.com/&

httpsredir=1&article=1595&context=jiws [Accessed 22 October 2018]

Kreie, H. 2018. *Feminism in Theatre: History & Examples*. Chapter 6/ lesson 11.

[Online] Available at: https://study.com/academy/lesson/feminism-in-theatre-

history-examples.html [Accessed 01 February 2020]

Kristin, K & Williams, L. 2010. Social Justice Feminism. *University of Cincinnati*

College of Law Scholarship and Publications. 1(1), pp.131-193

Kuhn, T.S. 1970. *The structure of scientific revolutions*. 2nd Edition. Chicago: University

of Chicago Press.

Leveton, E. 2010. *Healing Collective Trauma Using Sociodrama and Drama Therapy*.

[Online] Available at: http://lghttp.48653.nexcesscdn.net/80223CF/springer-

static/media/samplechapters/9780826104861/9780826104861_chapter.pdf

[Accessed 22 February 2019]

Linden, D.S. 2013. *The Heart and Soul of Psychotherapy*. Bloomington: Trafford

Publishing.

Lorde, A. 2007. *Sister Outsider: Essays and Speeches*. New York: Crossing Press

Feminist Series.

Lugones, M. 2010. Toward a Decolonial Feminism. *Hypatia*, 25(4), pp.742-759

Lustria, M.L.A. 2017. *Message Tailoring in Health and Risk Messaging.* Communication and Technology, Health and Risk Communication, Mass Communication. July. [Online] Available at:

http://oxfordre.com/communication/view/10.1093/acrefore/9780190228613.001.0001/acrefore-9780190228613-e-323 [Accessed 06 March 2019]

Lutfun N & Osmani, K. 2007. A breakthrough in women's bargaining power: the impact of microcredit. *Journal of International Development*, 19 (5), pp. 695-716.

Makhanya, S. 2014. The missing links: A South African perspective on the theories of health in drama therapy. *The Arts in Psychotherapy,* 41, pp. 302–306.

Maynard, R. 2018. *Policing Black Lives: State Violence in Canada from Slavery to the Present.* New York: Fernwood publishing.

Mayor, C. 2012. Playing with race: A theoretical framework and approach for creative arts therapists. *The Arts in Psychotherapy,* 39 (3), pp 214-219

Mayor,C. 2009. *Playing with Race: Drama Therapy, Critical Race Theory and Performance.* (NYU Thesis). [Online] Available at: https://docslide.net/documents/playing-with-race-a-theoretical-framework-and-approach-for-creative-arts-therapists.html [Accessed 27 July 2017]

Managa, A and Chiroro, B. 2013. *The scourge of gender based violence in South Africa.* [Online] Available at: https://www.pambazuka.org/gender-minorities/scourge-gender-based-violence-south-africa [Accessed 22 February 2017]

Marx. F, London. L, et al. 2018. *Missing knowledge of gendered power relations among non-governmental organisations doing right to health work:* A case study from South Africa. BMC International Health and Human Rights. [Online] Available at: https://bmcinthealthhumrights.biomedcentral.com/track/pdf/10.1186/s12914-018-0172-4 [Accessed 01 February 2020]

McCall, C. 2011. *Overcoming Child Abuse. Children Learn What They Live.* Psychology Today. [Online] Available at:

https://www.psychologytoday.com/gb/blog/overcoming-child-abuse/201112/children-learn-what-they-live [Accessed 04 March 2019]

Messac, L. 2018. *Women's unpaid work must be included in GDP calculations:* lessons from history. The Conversation. [Online] Available at:

https://theconversation.com/womens-unpaid-work-must-be-included-in-gdp-calculations-lessons-from-history-98110 [Accessed 08 March 19]

Mearns. 2018. *The Social Learning Theory of Julian B. Rotter.* [Online] Available:

http://psych.fullerton.edu/jmearns/rotter.htm [Accessed 16 February 2020]

Motsemme, N. 2004. The Mute Always Speak: On Women's Silences at the Truth and Reconciliation Commission. *Current Sociology*, 52(5), pp.909-932

Moultriei, A and Kleintjes, S. 2006. Women's mental health in South Africa. *South African Health Review.* Vol 2006 (1)., pp.347-366.

Mususa, P. 2009. Contesting Illegality: Women in the Informal Copper Business. In: Fraser, A & Larmer, M. *Zambia, Mining, and Neoliberalism: Boom and Bust on the Globalized Copperbelt.* Palgrave Macmillan, New York,pp. 185-208.

Naidu, M. 2016. *Wrestling with standpoint theory. some thoughts on standpoint and African feminism.* [Online] Available at:

http://www.tandfonline.com/doi/abs/10.1080/10130950.2010.9676289 [Accessed 19 September 2018]

Ndhlovu, N. 2013. *Desperate student sleeps on chairs.* IOL News. [Online] Available at:

https://www.iol.co.za/news/south-africa/gauteng/desperate-student-sleeps-on-chairs-1496848 [Accessed 04 March 2019]

Nebe, W. (2016). *Redefinition, Resilience, Restoration:* Drama Therapy for Healing and Social Transformation. [Online] Available at: https://www.dramaforlife.co.za/news/2018/aic-arts-mental-health-and-human-rights [Accessed 09 Jun 2018]

Nkanjeni, U. 2019. *Crime stats revisited: Murder, rape and violent crime* – these are the numbers. [Online] Available at: https://www.timeslive.co.za/news/south-africa/2019-09-10-crime-stats-revisited-murder-rape-and-violent-crime-these-are-the-numbers/ [Accessed 18 February 2020]

ODCCP. 2002. *Global Illicit Drug Trends.* [Online] Available at: https://www.unodc.org/pdf/report_2002-06-26_1/report_2002-06-26_1.pdf [Accessed 18 August 2018]

Oldfield, S; Salo, E & Schlyter, A. 2009. Body Politics and Citizenship. *African Gender Institute. Feminist Africa,* Issue 13, pp. 1-10

Ott, M. 2017. *Gender-based violence (GBV) includes physical, sexual, verbal, emotional, and psychological abuse, threats, coercion, and economic or educational deprivation.* [Online]Available at: https://www.womenforwomen.org/blogs/series-what-does-mean-gender-based-violence [Accessed 01 February 2020]

Parker. M. 2016. *How to Stay Sane While Black.* New York Times. [Online]. Available at: https://www.nytimes.com/2016/11/20/opinion/sunday/how-to-stay-sane-while-black.html [Accessed 04 March 2019]

Pauw,I. 2011. *The stigma of mental illness.* Health24. October. [Online]Available at: https://www.health24.com/Mental-Health/Living-with-mental-illness/The-stigma-of-mental-illness-20120721 [Accessed 04 Jun 2018]

Perry, C. 2017. *The Value of Empathy.* American Counselling Association. [Online] Available: https://www.counseling.org/news/aca-blogs/aca-member-blogs/aca-member-blogs/2017/04/19/the-value-of-empathy . [Accessed 15 February 2020]

Petersen, I; Bhana, A; Campbell-Hall, V; Mjadu, S; Lund, C; Kleintjies, S; Hosegood, V; Flisher, A.J. 2009. Planning for district mental health services in South Africa: a situational analysis of a rural district site. *Health Policy and Planning*, 24 (2), pp.140-150

Peyper, L. 2017. *Youth unemployment in SA a national crisis – economists.* Fin 24, City Press. [Online] Available: https://www.fin24.com/Economy/youth-unemployment-in-sa-a-national-crisis-economists-20170807 [Accessed 02 March 2018]

Plummer, D, L. 1996. Black Racial Identity Attitudes and Stages of the Life Span: An Exploratory Investigation. *Journal of Black Psychology*, 22 (2), pp.169-181

Rampton, M. 2015. *Four Waves of Feminism*. October. Available: https://www.pacificu.edu/about-us/news-events/four-waves-feminism [Online] [Accessed 10 August 2018]

SAHA. 2018. *The state of mental health in South Africa* : A focus on women. South African History Archive. [Online]Available: http://www.saha.org.za/news/2018/August/the_state_of_mental_health_in_south_africa_a_focus_on_women.htm [Accessed 22 January 2019]

Sajnani, N. 2011. Response/ability: Imagining a critical race feminist paradigm for the creative arts therapies. *The Arts in Psychotherapy 39*. Elsevier Inc. pp.186– 191

Schlyter, A. 2009. Introduction. In: Schlyter, A; Kondwani, L.C; Dellenborg, L; Diallo, A; Espling, M; Lewis, D; Malmström, M; Mkhwanazi, N, Munalula, M.M;

Mususa, P and Mählck, P, eds. *Body Politics and Women Citizens – African Experiences.* Stockholm: Sida, pp. 11-24

Schutte G & Singiswa, S. 2013. *The Ten layers of Oppression When You are Black and Poor in South Africa.* The South African Civil Society Information Service. [Online] Available at: http://sacsis.org.za/site/article/1844 [Accessed 22 October 2017]

Scott, C.M. 2016. *A Spiritual Approach for Licensed Professional Counselors in Private Practice:* Treating African American Women's Psychological Pain. Indiana University of Pennsylvania Knowledge Repositor*y*. [Online]Available at: https://knowledge.library.iup.edu/cgi/viewcontent.cgi?referer=https://www.google.com/&httpsredir=1&article=2282&context=etd [Accessed 04 March 2018]

Srinivas, K.M. 1998. Spirituality-at-Work in the Land of Dollar God. *Journal of Human Values*, 4 (1), pp.45-64

Shirley, W & Linzi, M. 1996. *Gender in Popular Education. Methods for Empowerment.* [Online] Available: http://files.eric.ed.gov/fulltext/ED398449.pdf [Accessed 13 August 2017]

Simms, R. 2011. Controlling Images and the Gender Construction of Enslaved African Women. Sociologists for Women in Society, *Sage Publications*, 15(6). pp.879-883

South African department of health. 2013. *National Mental Health Policy Framework and Strategic Plan 2013-2020.* [Online] Available at: https://www.health-e.org.za/wpcontent/uploads/2014/10/National-Mental-Health-Policy-Framework-and-Strategic-Plan-2013-2020.pdf [Accessed 01 Jun 2018]

South African government news agency. 2018. *SA shines spotlight on gender inequality on World Mental Health Day.* South African government news agency. [Online]

Available at: https://www.sanews.gov.za/south-africa/sa-shines-spotlight-gender-inequality-world-mental-health-day [Accessed 22 January19]

South African Government News. 2018. *Gender based violence on the rise*. South African Government News Agency. [Online]. Available at: https://www.sanews.gov.za/south-africa/gender-based-violence-rise [Accessed 20 Febuary 2019]

Standford. Education. 2011. *The History of Apartheid In South Africa*. [Online] Available: http://www-cs-students.stanford.edu/~cale/cs201/apartheid.hist.html [Accessed 22 October 2018]

Stats SA. 2018. *Crime against Women in South Africa*. An in-depth analysis of the Victims of Crime Survey data. Crime Statistics Series Volume V. [Online] Available at: https://www.statssa.gov.za/publications/Report-03-40-05/Report-03-40-05June2018.pdf [Accessed 18 February 20]

Stosny, S. 2012. *Validation and Empowerment:* The necessary balance for self help. Anger in the Age of Entitlement. Psychology Today. [Online] Available at: https://www.psychologytoday.com/hk/blog/anger-in-the-age-entitlement/201208/validation-and-empowerment?amp [Accessed 05 March 2019]

Sue, D.W & Sue, D. 2008. Sociopolitical Implications of Oppression: Trust and Mistrust in Counseling/Therapy. In: Sue, D.W & Sue, D. *Counselling the Culturally Diverse*. 5th edition. Hoboken, New Jersey: John Wiley & Sons, pp.79-104

The Conversation. 2018. *Survivors of sexual violence in South Africa are finally finding their voices*. Nov 14. [Online] Available at: http://theconversation.com/survivors-of-sexual-violence-in-south-africa-are-finally-finding-their-voices-106458 [Accessed 18 February 2020]

The Venda. 2015. *The Economic Ripple Effects of the Apartheid*: Wealth Disparities in Johannesburg. SASA Blog. [Online]. Available at: http://blogs.elon.edu/sasa/2015/01/26/the-economic-ripple-effects-of-the-apartheid-wealth-disparities-in-johannesburg/ [Accessed 02 March 2018]

The World Bank. ND. *Why is women's economic empowerment important for development?* World Bank Group US. [Online] Available at: https://siteresources.worldbank.org/INTGENDER/Resources/womens_economic_empowerment.pdf [Accessed 06 March 19]

UN News Center. 2015. *Fight against Sexual Violence in Conflict Reaches* 'New Juncture', Security Council Told. United Nations. [Online] Available at: https://www.un.org/press/en/2015/sc11862.doc.htm [Accessed 02 February 2019]

Walters, S & Manicom, L. 1996. *Gender in Popular Education*. Methods for Empowerment. Bellville: CACE Publications

Williams, J. 2018. *What Is Empathy and Why Is It Important*? [Online] Available at: http://blog.heartmanity.com/what-is-empathy-and-why-is-it-important [Accessed 11 May 2018]

Williams, A.L. 2018. *Integrating Health Humanities, Social Science, and Clinical Care:* A Guide to Self-Discovery, Compassion, and Well-Being. New York: Routledge

World Health Organization. 2017. *Violence against women*. World Health Organization. [Online]. Available at: https://www.who.int/news-room/fact-sheets/detail/violence-against-women [Accessed 22 January 2019]

Appendices

Appendix 1

Appendix 2

Participants information sheet

Study title: Towards a feminist practice: conceptualizing a feminist approach for drama therapy in South Africa

Locality: University of the Witwatersrand (Drama for Life)
Course: Masters in Drama Therapy
Investigator: Patience Mlangeni
Contact phone number:
Email address:
Supervisors:
Contact phone number:
Email address:
Dear Sir/ Madam

My name is Patience Mlangeni and I am a Master student in Drama Therapy at Wits University in Johannesburg. As part of my studies I have undertaken a research project, and I am investigating a feminist approach for drama therapy in South Africa.

As part of this project I would like to invite you to take part in an interview through email or by a face to face interview, on a one a one to basis and not in a group setting. The interviews will be about re-imagining a feminist paradigm in drama therapy in South Africa. Each interview will be no more than sixty minutes long and will be audio recorded so that interview can be transcribed for further analysis.

Should confidential information be disclosed during the course of the interview, that information can be redacted on request.

This research seeks to find methods that will include a feminist pedagogy within the field of drama therapy in South Africa. Taken from the following: social justice feminism; feminism therapy; gender and race in drama therapy. The research investigates the importance and need for a feminist pedagogy within the practice of drama therapy in South Africa. To encourage dialogue on a topic that is not often discussed, the research will engage different generations of drama therapy practitioners to investigate how drama therapy in South African can include a feminist standpoint within the practice.

This research looks at investigating what could be the guiding principles, with which drama therapy in South Africa can contribute towards deconstructing these taboos that inform and perpetuate gender-based violence. What will be expected from the participants will be to share their professional experience and be part of the brain storming conversation around the possibility of a feminist paradigm within Drama Therapy and help imagine the pedagogy of such a praxis. There will be no financial gains to be made through the research nor from participating in the research.

If you have concerns, questions, or would like to know more about the research you may call the Human Research Ethics Committee on

Yours Sincerely
Patience Mlangeni

Appendix 3

Consent Form:

Investigating a feminist paradigm for Drama Therapy in South Africa

I have read the participants information sheet and I understand what is required of me.	
I understand that I may skip any questions or tasks that I do not wish to answer or complete	
I understand that the consent form will be kept separate from the data records to ensure confidentiality.	
I may withdraw at any time during the study without penalty.	
I agree to have my verbal responses audio recorded and transcribed for further analysis.	
I understand that upon completion, I will be able to review my response	
I understand that the are no financial gains to be made from participating in the research.	
I understand that I have given my formal consent to participate in this research by signing this consent form	
I understand that confidentiality cannot be guaranteed in the resulting reports, theses and/or publications	
I understand that anonymity cannot be guaranteed in resulting reports, theses and/or publications	
I agree to be quoted directly if my name is not published and a made-up name (pseudonym) is used.	
I wish to review the notes, transcripts, or other data collected during the research pertaining to my participation.	
I agree to be quoted directly.	
I agree that the researchers may publish documents that contain quotations by me	

Consent to Participate

Print Name: _____

Signature: _____   Date: _____

Appendix 4

Semi-Structured interview questions

Q. 1   Is there anything you do differently when you are working with a group of women?

Q.2   Can there be a feminist paradigm in drama therapy and what would be its primary focus?

Q.3   Do you foresee a need for feminist theatre in drama therapy?

Q.4   Women sometimes use silence as a means to fight back or as the means of taking their power back- how do you work with silence in therapy?

Q.5   How could drama therapy help contribute to remedying the oppression both on the mind and body brought about gendered roles on the women