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DEVELOPING A HEALING ARTS PEDAGOGY AND PRACTICES (HAPPY) TRAINING: AN ARTS-BASED CURRICULUM FOR TRAUMA STABILISATION AND STRESS ALLEVIATION IN THE SOUTH AFRICAN EDUCATIONAL SYSTEM

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This paper discusses the theoretical foundations and pedagogical principles underlying the "Mas'phefumle" project, which explores healing arts practices and pedagogy as a response to trauma in South Africa. The authors propose that artistic research has transformed and advanced arts-based pedagogies in the country, offering impactful healing practices that can help communities during challenging times and regulate individuals after traumatic incidents. The curriculum developed, called Healing Arts Pedagogy and Practices (HAPPy), aims to establish culturally sensitive activities that promote resilience and create safe learning environments. The foundations of the curriculum are based on healing, the arts, pedagogies, and practices, integrating elements of polyvagal theory, psychotraumatology, and the African philosophy of Ubuntu. The paper describes the action research method used and presents the initial cycle of the curriculum's development.

1.0 Introduction

We are at war for hope, my friend
– Puno Selesho

At the ARA2022 International Conference on Artistic Research in Africa, held at the University of the Witwatersrand, De Beer and Draper-Clarke presented "*Mas'phefumle: Breathing Together through Trauma using Healing Arts Practices and Pedagogy*." During an experiential and participatory presentation, they invited delegates to experiment with practices designed to activate, balance and calm the human nervous system. This paper focuses on the theoretical foundation and pedagogical principles that underlie this work and offers an answer to the question of how artistic research has transformed and advanced arts-based pedagogies in South Africa.

We propose that the arts offer impactful healing practices that have been used to resource communities, particularly during challenging times, and to regulate community members after traumatic incidents. Healing here is defined as "a holistic, transformative process of repair and recovery in mind, body, and spirit resulting in positive change, finding meaning, and movement towards self-realization of wholeness, regardless of the presence or absence of disease" (Firth et al. 2015, 49).

Given the high levels of trauma, stress, and anxiety within South Africa's educational institutions, made more visible since the Covid-19 pandemic, we developed a curriculum using an action research method. The Healing Arts Pedagogy and Practices (HAPPy) teacher development curriculum came into being as an innovative response to the current educational and mental health crises within South Africa. It was developed by Welma de Beer, and supported by Manola-Gayatri Kumarswamy and Lucy Draper-Clarke.

Our research leveraged the intersection between the expressive arts, education, and mental health to develop and test a training model to support the *stabilisation and regulation* of trauma and *build resilience* for students in *safe educational settings*. This is in line with indigenous psychologies (Bojuwoye and Moletsane-Kekae 2018), since communities successfully use cultural practices, rituals, and spiritual ceremonies to restore mind, body and feelings after trauma (Malchiodi 2021).

The interdisciplinary training curriculum aims to establish equitable, accessible, culturally sensitive activities that are simple, safe, fun and practised in a community. It brings movement, music, rhythm, play, stories and moments of silence (back) into schools in a natural way that helps learners slow down, learn better, become more resilient and support each other. The curriculum makes use of neuroscientific research to select those rhythms, movements, story elements, sounds and other arts practices that offer the highest potential for stabilising and creating healthy and safe learning environments.

2.0 Theoretical Framework

The HAPPy curriculum was developed at the intersection of Western neuroscience and the African relational philosophy of Ubuntu. From neuroscience we reference polyvagal theory and psychotraumatology (used in Emergency Pedagogy), and from the philosophy of Ubuntu, we emphasise a communal approach to healing (Makanya 2014).

2.1 Polyvagal Theory

Research in the field of neuroscience has revealed the debilitating effects of trauma, which impacts the ability to think, feel, act, and socialise. Porges' polyvagal

theory (2011) describes the evolutionary development of the autonomic nervous system, distinguishing a hierarchy of trauma responses: 1) freeze response, where we become hopeless, overwhelmed, and unable to respond to a perceived threat; 2) fight or flight response, where there is still a sense of agency, and 3) social engagement, which is an optimal state of presence. Enabling social engagement is the key to trauma stabilisation. Using polyvagal theory, Malchiodi (2015) and Dana (2018) describe artistic and somatic practices that can support emotional regulation, provide stability and improve interpersonal relationships in situations of trauma. Once we are regulated, our awareness, concentration and focus, and ability to relate to ourselves and others with kindness, compassion and acceptance, also improve, thus allowing us to co-regulate. Van der Kolk states that "imprints from the past can be transformed by having physical experiences that directly contradict the helplessness, rage…" (2014, 4).

2.2 Psychotraumatology and the Emergency Pedagogy Organisation

Emergency Pedagogy (EP) is an international volunteer organisation using a pedagogical approach "for the stabilisation and supporting of traumatised children and adolescents" (Kühn 2009, 26) and founded on the theory of psychotraumatology (Fischer & Riedesser 2003; Ruf 2015) and neuroscience. The organisation has led numerous crisis interventions since 2006, believing its approach to be "a necessary prerequisite, accompaniment, and supplement to appropriate therapeutic processes" (Kühn 2009, 26).

Their pedagogy focuses on psychic and social stabilisation and mastery of the dysfunctional after-effects of trauma (Ruf 2015). It offers distinct ways of working with children during the stress reaction phase (Ruf 2013). Using circle practices that incorporate verse, singing and eurythmy (Mendus 2016), trauma-affected children are brought back into social engagement. This enables feeling, expressing experiences through creative forms, establishing social competencies, encouraging play, including body awareness and the senses, stimulating movement and encouraging relaxation.

2.3 Ubuntu: African Relational Philosophy

The African philosophy of ubuntu views the nature of being as relational, with a distinct focus on community (Eze 2008). "It is not, 'I think therefore I am'. It says rather, 'I am human because I belong. I participate, I share'" (Tutu 1999, 31). Le Roux asserts that "interdependence, communalism, sensitivity towards others and caring for others are all aspects of ubuntu as a philosophy of life" (Venter 2004, 149). Within this worldview, rituals and arts-based practices provide healing for individuals within communities where illness is viewed as a fractured connection between the self and the collective (Makanya 2014; Ginwright 2018).

3.0 Method

An extensive literature review was conducted, exploring the intersection between the creative and expressive arts and contemplative and cultural practices for addressing mental health challenges within the education system in South Africa. We then used the literature review to inform the first stage of the action research cycle.

The action research method is frequently used in the field of education (Stringer 2008) to develop new curricula to meet the needs of communities. Action research adopts "a methodical, iterative approach embracing problem identification, action planning, implementation, evaluation, and reflection. The insights gained from the initial cycle feed into planning of the second cycle, for which the action plan is mod-

ified, and the research process repeated" (Riding et al. 1993, 2). Zuber-Skerritt (1992) has described the distinctive features of the higher education curriculum development process as (a) critical collaborative enquiry by (b) reflective practitioners who are (c) accountable for making the results of their enquiry public, (d) self-evaluative in their practice, and engaged in (e) participative problem-solving and continuing professional development. Through action research in higher education, theories are developed and the results made public in order to create knowledge.

Action research (AR) makes visible the cyclical process of blending theory and practice, or praxis, as it is described in Freire's pedagogical approach (Mayo 2020). This ensures that theory is embodied and enacted. During Drama for Life's (DFL) Covid-19 intervention, aspects of the HAPPy place curriculum were critically evaluated through repeated cycles of implementation, both online and in person, with university students, teachers, interns, and teachers-in-training. De Beer's PhD study contextualised these findings for the pervasive situation of stress, anxiety, and trauma in South African schools. For the purposes of this paper, we narrow our focus to the theory, pedagogy and practices that have been utilised to design the HAPPy teacher development curriculum, implemented by trained interns, who assumed the role of teacher assistants in schools.

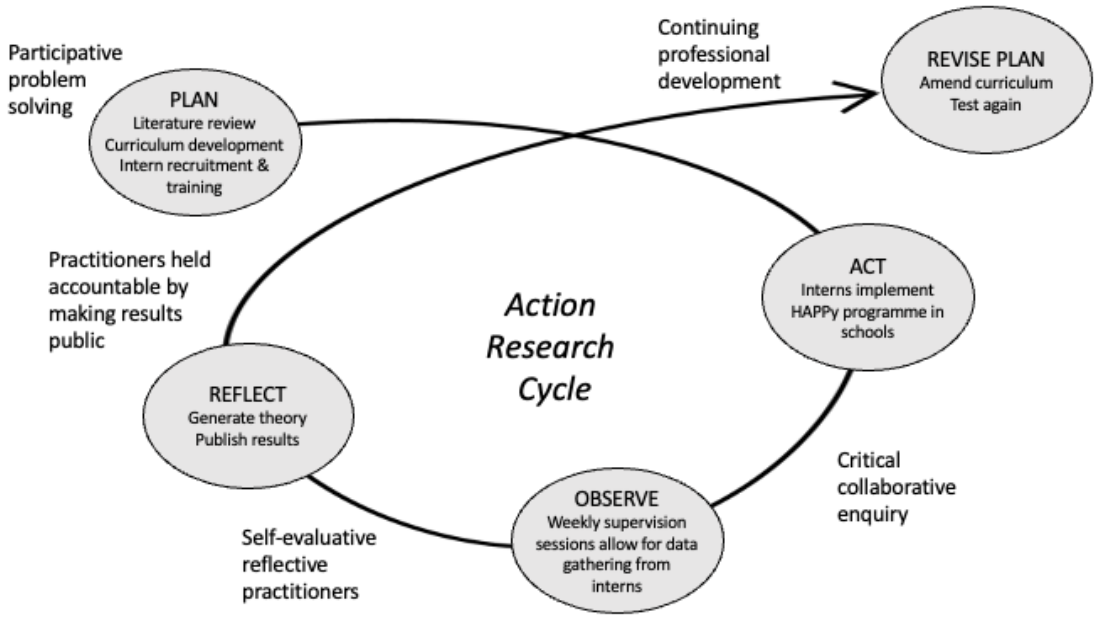


Fig 1. Action Research Cycle

This paper documents the initial cycle of the AR method, focusing on the theoretical foundations that bridge Western and African practices. We also describe drama-therapeutic principles that inform the use of distancing methods to prevent re-traumatisation, such as story, metaphor, and symbol. Other practices, drawn from the mindfulness, breathwork and embodiment fields, serve either to activate or calm the human nervous system, depending on the type of trauma response. Subsequent papers will document later cycles of the AR method.

4.0 The Four Foundations of the HAPPy curriculum

The HAPPy curriculum for teacher development has been established on four foundations, namely **H**ealing, the **A**rts, **P**edagogies and **P**ractices. These are outlined below:

4.1 Healing the Past for a Healthy Present

High rates of violence and trauma exposure necessitate this holistic healing approach. "After apartheid, high levels of often criminal interpersonal violence continued, fuelled by rapid urbanisation and ongoing socioeconomic disparities, that resulted in a high level of trauma exposure" (Atwoli et al. 2013). Published statistics illustrate the crisis:

- 99% of children living in Soweto, Johannesburg, had been exposed to violence in their own home, schools and community by the age of 24 (Richter et al. 2018).
- high levels of perpetration of violence, by children themselves (43% of children and 90% of adolescents), indicate a cycle of abuse and violence (Richter et al. 2018).
- gender-based violence in SA is also among the highest in the world (African Health Organisation 2021).

Socio-economic disparities contribute to South Africa's trauma burden. South Africa is one of the most unequal countries in the world and due to the enduring legacy of apartheid, poverty remains concentrated in previously disadvantaged areas (Hurlbut 2018). Poverty, emotional, physical or sexual abuse, and household dysfunction and neglect, are prime indicators of Adverse Childhood Experiences (ACE). The ground-breaking ACE study of Felitti et al. (1998) found that high ACE scores correlate with higher workplace absenteeism, financial problems, lower lifetime income as well as mental disorders and physical illness, high suicidality, addictive behaviour, substance dependence, abuse, high-risk behaviours and violent relationships (Ruf 2013; Van der Kolk 2014). There is clearly a need to address adverse childhood experiences as they occur, to prevent these negative outcomes in adulthood.

Unaddressed trauma also leads to addiction and substance abuse (Ruf 2013; Van der Kolk 2014), causing a maladaptive loop. In South African schools, Burton and Leoschut (2013) found that:

- 47% of learners smoked marijuana at school,
- 31% witnessed learners who were high,
- 27% knew learners who were drunk at school.

Advances in neuroscience have given us a better understanding of how trauma changes brain development, self-regulation, and the capacity to stay focused and in tune with others (Van der Kolk 2014). This might account for the low educational outcomes experienced in South African schools:

- 27% of pupils who have attended school for six years cannot read, compared with 4% in Tanzania and 19% in Zimbabwe (*Economist* 2017).
- About 50% drop out before completing secondary education; about 25% fail the end-of-high-school examinations; and less than 5% of students end up with a university qualification (Mlachila and Moeletsi 2019).

Without some knowledge of trauma and the tools to support traumatised children, teaching is likely to be ineffectual. The HAPPy teacher development curriculum therefore helps teachers to *stabilise* and *regulate* the stress responses of trauma in South African schools, to build agency and *resilience*, and create *safety* through collaborative and communal artistic engagements.

4.2 Arts-Based Approaches

The HAPPy training positions the arts as bridging learning and well-being, education and therapy. It brings back healing arts practices into the school curricu-

lum, helping us slow down, learn better, become more resilient and support each other, while inviting systemic change. Malchiodi (2020) posits eight key reasons why arts-based practices are effective in trauma interventions: they create sensory experiences; soothe mind and body; enhance non-verbal communication; recover self-efficacy; re-script the trauma story; help imagine new means; restore our sense of aliveness; and anchor awareness through embodiment.

We know that the experiences of children are shaped both inside and outside of schools, and the pandemic created environments that prevented positive learning experiences. The situation today requires the inclusion of trauma-informed practices in the formal and informal curriculum. Artistic and performative practices serve in two ways: attuning classes and building group cohesion before teaching curriculum subjects, and regulating, stabilising, and balancing the effects of trauma throughout the school community to create 'Safe Schools.'

4.2.1 Expressive Arts

Arts-based approaches have tended to refer to a singular artistic modality. However, expressive arts-based approaches embrace and integrate all the modalities (art, dance, music and drama) including techniques such as storytelling and story making, poetry and creative writing. These practices illuminate the understanding of human experience and create a space of investigation where complexity, contradiction and confounding outcomes are validated and welcomed (Malchiodi 2020).

Expressive art is based on four indigenous healing elements, namely, movement, sound, storytelling and silence (Malchiodi 2021; Roth 2011). In Malchiodi's work, participants are encouraged to find culturally appropriate, indigenous modes of performance to facilitate dialogue, teach and heal trauma.

4.2.2 Drama therapy

Drama therapy (DT) has been extremely successful in addressing psychological trauma and injuries in children and adolescents (Jennings 2019; Jones 2007). According to Lahad (2014), DT is firmly established in PTSD treatment because it enables a dialogue between body, mind and emotions while using the imagination. Also relevant for developing the HAPPy curriculum, is that DT can be applied to different cultures (Jones 2007).

Through embodied practices, this therapeutic approach creates self-awareness, builds empathy, offers healthy distancing, activates the imagination, improves cognitive functioning, provides alternative expression, and builds critical reflection by reorganising material (Jennings 2019; Jones 2007; Van der Kolk 2014). Through a gentle, collective and 'ritualised' approach (Jones 2007) it is possible to create community and long-term peer support systems (Kingwill and Palmer 2018), and re-establish rhythm, breath and movement (Jennings 2019).

4.3 Pedagogical Approaches

Three trauma-informed pedagogical approaches were applied in the curriculum development process to ensure experiential and communal learning. As these work most effectively within an environment of trust, cultivating safety is a key pedagogical imperative for preventing secondary trauma or re-traumatisation.

4.3.1 Paulo Freire's Pedagogy of Hope

Freire's pedagogical focus emphasises the importance of curiosity, critical thinking and ultimately, hope for learning. This educational philosophy underlies the HAPPy curriculum's intention of creating safer learning environments based on democratic

principles (Freire 2021). The approach makes use of circular co-learning spaces, where all members are visible to each other, equal and included. These 'culture circles' are mutual, collaborative and explorative, designed to create experiential learning opportunities (Ecclestone and Hayes 2019). Unlike classroom situations where learners sit behind each other and are vulnerable to activities happening 'behind their back,' the circle creates safety, inclusion, and a sense of belonging. This is essential when trying to establish safe learning spaces.

For the online training during Covid-19, the concept of 'Matrixia' was developed by Manola Gayatri, as a means of creating a transformational space of safety that was relational and co-held. The 'Matrixia' utilised creative imagination and intuition in a collective, collaborative space that supported co-learning and co-thinking. This approach helped participants to find safety online as they were in control of the level of engagement, in their own safe space.

Freire's democratic pedagogy is also adopted in the HAPPy curriculum to create safety and agency through 'voice and choice.' This is an important principle in trauma-informed work, as trauma survivors frequently feel 'speechless,' experiencing a loss of agency (Malchiodi 2021).

4.3.2 Bandura's Social Cognitive Learning

Bandura's theory asserts the "importance of modelling and observational learning for personality development" (Olson and Hergenhahn 2011, 324). Cooperative learning strategies promote self-efficacy to improve health and therapeutic behaviours as well as academic achievement (Schunk 2012, 154). Bandura's pedagogical principles map well onto the African relational approach, where children can both learn and heal in community.

The HAPPy curriculum therefore makes use of 'bite-size' theoretical information (short, simple, clear and repeated) to maintain a safe learning space. This pedagogical approach prevents the overwhelming and triggering observed in other trauma training (Carello 2018). The approach was implemented through modelling, thereby providing opportunities for observational and experiential learning.

For example, during an online version of the training, trauma information was disseminated via memes on a social media platform. The meme challenges aimed to activate responses of the sympathetic nervous system that could 1) down-regulate defensive fight-flight responses, and 2) stimulate playful, enlivening, reviving, creative play to up-regulate freeze responses. The memes typically contained a trauma fact and possible solution, followed by a healing arts invitation. Now that the curriculum is being offered in person, the bite-size trauma information is followed by embodied experiential toolkit demonstrations.

4.3.3 Healing-Centred Engagements

While Freire and Bandura offer established pedagogies within the educational field, the work of Ginwright (2018) introduces a new perspective. Instead of focusing on the trauma, he asserts that individuals are much more than their particular trauma story and therefore uses the language of Healing-Centred Engagements. In order to explore the potential of post-traumatic growth, Ginwright asserts the value of developing a curriculum that is healing-centred, sustainable, positive, artistic, non-traumatising, culturally sensitive, communal and based in collective and relational philosophies such as Ubuntu. This pedagogical approach serves to develop the human strengths and skills of the participants in the service of overcoming fear (Sajnani and Johnson 2014).

4.4 Practices

Drawing on the theory and pedagogy presented above, the HAPPy curriculum uses distinctive rituals and practices. Practices drawn from Emergency Pedagogy, Expressive Arts, Drama Therapy, Applied Theatre, Mindfulness and Somatic work, and indigenous cultural traditions, were chosen to help stabilise and regulate the nervous system whilst stimulating self-regulation.

The following practices were used to develop and enhance a sense of safety in learning spaces:

- structured, rhythmic practice (Emergency Pedagogy)
- imagination, metaphor, and story (Drama Therapy)
- embodiment (Drama Therapy and Somatic work)
- regulating toolkit practices (Applied Theatre/Expressive Arts/Emergency Pedagogy)
- mindfulness and contemplative practices for self-regulation (Mindfulness and Somatic work)

4.4.1 A Structured, Rhythmic Practice

The curriculum follows a repetitive structure to create consistent, predictable rhythms that establish a sense of safety. Each module consists of a self-care moment, metaphor and story, theoretical sharing, and toolkit applications. Each activity was structured to provide activation and calming down moments, including set breaks to give participants time to integrate and assimilate experiences.

Each training day started with an opening ritual consisting of a verse, song and rhythm as used by Emergency Pedagogy. Speaking, singing, and moving in rhythm, creates harmony, attunement and safety as groups start to co-regulate and increase their sense of belonging. The same three elements in reverse order are used to complete and close the day's learning. This ritualised opening and closing provides clear boundaries of time, stabilisation, self-awareness, co-regulation and activating practices.

4.4.2 Imagination, Metaphor and Story

Trainers in trauma workshops frequently revert to using real traumatic incidents as examples to explain stress reactions or developmental stages of trauma. These *real traumas* cause secondary traumatisation and may even trigger participants, causing re-traumatisation.

Imagination, metaphor and story are therefore used in this curriculum to create 'distance' and encourage empathy. Distancing is a drama therapeutic tool that encourages the development of perspective while making room for empathy (safe emotional resonance, involvement and identification) (Jones 2007). Utilising imagination, metaphor and story can potentially prevent re-traumatisation and create a sense of safety, while making the content clear and accessible. A variety of stories have been chosen from different cultures to ensure distancing and multicultural representation.

Using the imagination to create a fantasy or imaginative role enables participants to establish a safe distance from which to explore a life situation (Jones 2007). Imagination stimulates portions of the neocortex and the thalamus (which can be impeded by trauma experiences) (Malchiodi 2020) and therefore works to re-establish executive function. The curriculum included imaginative drama games, positive visualisations and artistic work.

Using symbolic and metaphoric reality can explore a distanced way of "relating to problematic issues from life" (Jones 2007, 242). The theory was introduced

using metaphors such as Trauma as a Wound, a Cramp and a Threshold, as well as Post-Traumatic Growth. Six other metaphors have been developed to illustrate the impact of trauma on our thinking, behaviour and feeling capacities. "In drama therapy the therapeutic potential of symbols and metaphors is connected to dramatic scenarios – stories, improvisation, object play" (Jones 2007, 256). Our research found that stories provided opportunities to expound the metaphors. Dramatisation of the story safely enriched the learning experiences and provided embodied knowledge. After participants had come out of role, and during reflective discussions, it became clear that archetypal and symbolic images deepened learning.

4.4.3 Embodiment

Jones (2007) notes that embodiment "enables [clients] to represent together a trauma and to start to express responses towards it" (159). In the HAPPy curriculum, instead of merely teaching theoretical definitions of trauma, embodied investigations of trauma reactions are used to explore and conceptualise its impacts and effects. Careful use of image theatre techniques, theatre games, play and reflections are incorporated into the curriculum to provide distance yet allow empathy.

4.4.4 Regulating Toolkit Practices that Address Trauma Responses

The HAPPy curriculum offers a toolbox drawn from Emergency Pedagogy, Expressive Arts and Applied Drama to address trauma. In-person drama activations that include singing, dancing, movement and enactments, directly up-regulate the nervous system, restore brain function, and build communal harmony. Team- and trust-building games encourage resilience and co-regulation. Down-regulation happens when we engage in visual art creations that encourage silence – drawing, painting, sculpting, listening to stories, as well as breathwork and mindfulness. Arts-based activities can therefore down-regulate (calm down) hyperarousal or up-regulate (activate) hypoarousal, increasing levels of tolerance and response flexibility (Siegel 2012).

The HAPPy curriculum was presented to four interns of the Masphefumle Project who were placed in a distressed school in Gauteng. This project has as its vision the establishment of safe school spaces in all schools in South Africa through collaborative and communal engagement. It aims to implement a programme that stabilises and supports children through integrating and innovating pedagogical practices to enhance teaching and learning, while also nourishing the teachers, interns, mentors and researchers. The interns shared the toolkit practices from the training, whilst engaging in finding culturally appropriate alternatives and innovating new activities. Their experiences were shared during weekly supervision and data collection meetings.

4.4.5 Mindfulness and Contemplative Practices as Self-Care

Mindfulness practices, using both movement and breath, are included as part of the self-care section of this curriculum. While these are often associated with Eastern traditions, the work of Draper-Clarke and Green (n.d.) identifies contemplative practices from the African continent. "For nearly all of history, healers and shamans have called on drumming, dance, song, and visual arts to bring healing and balance. Despite ever-growing technological advances, the healing practices rooted in our ancestors remain powerful today" (Bopp et al. 2019). Such ancient rituals and practices have been shown to be effective for "nervous system regulation, developing pro-social qualities and community cohesion and inspiring a sacred sense of purpose," thus enhancing embodied and communal healing, wellbeing and flourishing (Draper-Clarke and Green n.d.).

In spiritual and cultural practices in South African communities, aspects of the arts are readily employed to teach people their own histories and share the wisdom of their ancestors for everyday living. Rituals conducted in community settings also engage people's natural healing and co-regulation capacities.

5.0 Discussion

We have outlined the theoretical underpinnings of the HAPPy curriculum, as well as the pedagogies and practices that have inspired this approach. Zuber-Skerritt's (1992) five distinctive features of action research guided our interdisciplinary approach to curriculum development. Drama therapists, applied drama practitioners, educators and contemplative practitioners collaborated to address the needs of learners and recommend ways of implementing the curriculum in order to respond, systemically, to distressed school communities. As reflective practitioners, De Beer and Draper-Clarke have put the theory into practice, evaluating its effectiveness during the first action research cycle. The results have been made public at a series of academic events (IDIERI 2022; ARA 2022; DFL Conference 2022) to seek feedback from the community and engage in participatory problem-solving.

Having observed university students, schoolchildren, teachers, lecturers and teaching assistants move from the fight/flight response to trauma, to a freeze response, we believe that it has become imperative for all South Africans, especially our teachers, to be empowered with knowledge and tools that address stress and anxiety, and the challenge of how to stabilise and regulate children immediately after traumatic experiences.

6.0 Conclusion

Hope is a form of planning'
– G Steinham

The HAPPy curriculum is currently being implemented in pilot schools in Gauteng as the Mas'phefumle project ('let's breathe together'). Trained interns have been placed in schools as teacher assistants to explore ways in which to support teachers and learners through these arts-based practices. They are also using the practices to self-regulate and resource themselves. Weekly reflection sessions with the teacher assistants have revealed how they are using the creative arts to support their school communities through playful, safe and collective ways that are culturally sensitive, inspire hope and positivity, activate self-healing and build resilience in children and adults alike. Research findings from this pilot project will be presented in due course, to make recommendations for scaling the project nationwide. There is an urgent need to address the trauma associated with cycles of violence, poverty and inequality in South Africa. Working in spaces of distress (schools), and working with the most vulnerable (children) steeped in historical trauma environments (distressed communities) is ethically complex and warrants careful research. We believe that by empowering teachers, who have the opportunity to co-regulate whole communities with Healing Arts Practices, we have an opportunity to change the South African trauma narrative.

Ethics Statement

The studies involving human participants were reviewed and approved by the Ethics Committee of the University of the Witwatersrand, protocol number H20/09/07.

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