

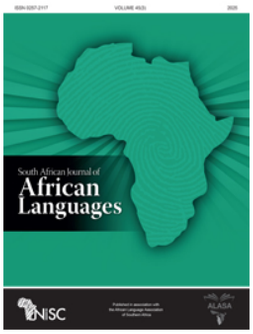
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South African Journal of African Languages

ISSN: 0257-2117 (Print) 2305-1159 (Online) Journal homepage: www.tandfonline.com/journals/rjal20

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To cite this article: Ntokozo Gqweta (2025) Psychotherapy in South African indigenous languages: Positioning isiXhosa as a language of symbolisation, South African Journal of African Languages, 45:3, 354-367, DOI: 10.1080/02572117.2024.2441764

To link to this article: https://doi.org/10.1080/02572117.2024.2441764

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Published online: 22 Jun 2025.

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South African Journal of African Languages 2025, 45(3): 354–367
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South African Journal of African Languages
ISSN 0257-2117 EISSN 2305-1159
https://doi.org/10.1080/02572117.2024.2441764

Psychotherapy in South African indigenous languages: Positioning isiXhosa as a language of symbolisation

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The sociopolitical history of language use in South Africa is controversial and complex. This article utilises postcolonial theory to problematise the historical pattern of language use in South Africa to oppress black people. African psychology and Afrocentricity are used to centre isiXhosa as the language of symbolisation in psychotherapy for amaXhosa, aiming to effectively address the needs of the people. A narrative literature review approach and qualitative research paradigm frame the discussion, focusing on the historical and contemporary state of language use in psychotherapy. The findings revealed two themes: i) the historical and current patterns of language use in South Africa; and ii) centring indigenous African languages (e.g. isiXhosa) as languages of symbolisation in psychotherapy. These themes underscore the negative impact of historical discriminatory language practices in South Africa, while highlighting the importance of centring the ontological and epistemological assumptions of African indigenous knowledge systems when practising psychotherapy in isiXhosa. This has implications for theory, practice and education, as they should be rooted in African indigenous knowledge systems if they are to appropriately respond to the needs of the African people.

Keywords: psychotherapy, language history, everyday talk, ubuntu, spirituality, post-colonial theory

Introduction

Language in psychotherapy serves as a conduit to access and symbolise internal worlds, making them available for processing between a therapist and a patient. This process is achieved, for example, through talk, where the unconscious is made conscious using techniques such as interpretations, (Stukenbrock et al., 2021) reflection and paraphrasing. Through this process of interactional verbalisation, the patient's uncontained, raw inner states are thought about, reflected upon and processed by the therapist, then given back to the patient in easier-to-digest forms (Fonagy & Adshead, 2012). Resulting in the patient making sense of, and finding meaning in, their experiences (Stukenbrock et al., 2021).

Thus, language in psychotherapy provides the patient with an opportunity to see themselves through the eyes of the other (e.g. therapist). The therapist reformulates the patient's narrative, then reflects it back, highlighting any inconsistencies (Knol et al., 2020) bringing to the awareness of the patient parts that are hidden and defended against and which make the patient's life difficult. This process helps the patient 'recalibrate' their internal worlds (Fonagy & Adshead, 2012) and understand their historical origins and function, and linking internal realities to their external experiences. Thus, language has both intrapersonal (internal self-experience) and interpersonal (interactional experience) dimensions linking language to identity. The link between language and identity has unintended consequences that impact power dynamics in the psychotherapeutic space (Al-Mahroos & Di Braccio, 2022), particularly given the sociopolitical history of the world marred by discriminatory and oppressive practices based on systems like colonialism and apartheid.

The power dynamic in psychotherapy often relates to various factors, stated above, but primarily evident through the use of language. Typically, a clinician is proficient in a language of communication, e.g. English, in which a patient may not be (Swartz & Drennan, 2000), or have minimal command. This language disparity has been identified by patients and their relatives as a major obstacle to accessing health care (Levin, 2006; Elkington & Talbot, 2016; Hagan et al., 2020). This negatively impacts health outcomes, as language, especially one's mother tongue learned in one's formative years, is constitutive of one's identity and cannot be easily changed or replaced (Shahrebabaki, 2018). Consequently, intentionally or unintentionally side-lining or making no effort to understand and speak another person's mother tongue (indigenous language), especially when you are in a position of power, constitutes a form of discrimination.

Language is the foundation for establishing the parameters of engagement, maintaining rapport with patients, and discussing emotional topics (Verkerk et al., 2021). Research suggest that aspects such as age, gender and culture play a crucial role in language barriers in psychotherapy. For example, specific cultures might have their own nuances, in terms of language use, which can be missed or misinterpreted in a therapeutic setting (Hagan et al., 2020). Additionally, native speakers of different languages

utilise idioms, metaphors and analogues to express themselves in emotionally evocative ways that are missed when only literal expressions are used (Citron & Goldberg, 2014; Thyab, 2016; Citron et al., 2019). Consequently, non-native language speakers, for example of English, lack this metaphoric ability when speaking English (Thyab, 2016), making it hard for them to express their emotional experiences in ways that feels authentic and vulnerable. In situations where there are language and cultural differences, the experience of psychotherapy can result in a disconnect that hinders the ability to make meaningful progress.

Brief literature review

Language-related power dynamics in psychotherapy

Research suggests that different types of power dynamics arise in therapeutic encounters, including role-based power (related to positions within the therapeutic encounter), societal power (structural power outside of therapy), and historical power (personal histories of experiencing power and powerlessness) (Al-Mahroos & Di Braccio, 2022). These power disparities are well highlighted in the South African context with a socio-political history of systematised oppression of one group (blacks) by another (whites). Oppression is a state of asymmetric power relations characterised by domination and resistance, where the dominating persons or group exercise their power by restricting access to material resources by implanting in the subordinated persons or groups fear or self-deprecating views about themselves (Prilleltensky, & Gonick, 1996). These historical and sociopolitical experiences shapes, produce and reproduce the power dynamics in the therapeutic encounter. Discrepancies in language further perpetuate negative perceptions, and realistic expectations, of psychotherapy as being an elitist and white-dominated practice (Wolff, 2014). Consequently, using English in psychotherapy solidifies these reactions to remnants of the historical socio-political disparities, creating an emotional distance for patients for whom English is a second language and limiting the outcomes of the psychotherapeutic process (Aragno & Schlachet, 1996; Karp & Vögele, 2016). Conversely, systemic oppression perpetuates language discordance through encouraging negative attitudes towards learning languages other than English (Dlamini, 2020; Ramafikeng & Marshall, 2023), preserving the language difference between the therapist and the patient.

Bilingual therapists are said to have two therapeutic language-based identities or selves, with the language in which the psychotherapeutic self is embedded or trained in being likely to be the most dominant (Al-Mahroos & Di Braccio, 2022). In South Africa, the language of training is English and this has major implications for the context since the majority of the country's citizens speak South Africa indigenous languages with minimal or poor command of the English language (Tshotsho, 2013). Consequently, communities are often unfamiliar with mental health language used by clinicians, which tends to result in misunderstandings, stigmatisation and incorrect assumptions (United Nations Development Programme, 2022). This has consequences for the provision of mental health care (psychotherapy) to the majority of the country's population. The South African government introduced the Language Act to address service delivery issues; however, the implementation of the Act has proven challenging, leading to a lack of practical engagement on the ground (Mnguni, 2020). For example, even though interpreters are often used to facilitate clinical interviews, assessments and psychotherapy (Hunt & Swartz, 2017); this intervention still has its own shortcomings. The use of English by the therapist or the involvement of interpreters in psychotherapy undermines the patients' sense of personal cultural identity and negatively impacts the integrity of the psychotherapeutic intervention (Dlamini, 2020; Hunt & Swartz, 2017).

The marginalisation of indigenous languages

South Africa's socio-political history led to the prioritisation of English and Afrikaans as institutional languages, excluding indigenous languages in health care, education, the judicial system and psychotherapy (Swartz & Drennan, 2000; Gilmartin, 2004; Tshotsho, 2013). These historical prescriptive and restrictive language use policies were tactics used by the apartheid government to oppress black people of the country. Research evidence shows that there is value in including indigenous languages in preserving culture and facilitating community communication (Diko, 2023a). Thus, the apartheid regime's aim was to disintegrate black people's identity through splitting them from their culture, sense of community and language. This strategy was specifically designed to oppress since language and culture are intricately linked to knowledge about, and understanding of, a society's behaviour, culture and customs (Radebe & Maimele, 2020). These governmental strategic manoeuvres supported the agenda that South African black people are abnormal, mentally unfit or disordered when not fitting the western understandings of mental wellbeing or health. This was easily achieved through language restrictive practices. This is despite research evidence that, psychotherapeutic interventions conducted in clients' native languages, with culturally adapted interventions, are noted to be twice as effective, yielding more benefits than those conducted in English (Griner & Smith, 2006).

Neglecting indigenous languages, especially in psychotherapy, has significant implications for the therapeutic process and the well-being of individuals, as it may hinder emotional connection and self-expression (Verkerk et al., 2021; Diko, 2023a). Memories and internal experiences encoded using one's first language (mother tongue) may not be easily accessible when using a second language, leading to difficulties in connecting with others from whom one seeks support (Aragno & Schlachet, 1996; Karp & Vögele, 2016). Thus, indigenous languages are deeply intertwined with identity, thoughts, and are relational (Shakib, 2011; Diko, 2023b).

The historical systemic exclusion of indigenous languages continues to negatively impact South Africans who speak these languages, affecting their self-perception, health management and behaviour. Historically, African indigenous languages were viewed solely as a means of highlighting the inferiority of their speakers, disregarding their potential contribution to knowledge production (Segalo and

Cakata, 2017). The strategy, by the apartheid government, to use foreign languages was, in part, to stifle debates, making it impossible for many of the citizens to effectively defend their rights (Mnguni, 2020). This contributed to native speakers unwillingly assimilating to Western ways and disconnecting from their origins (Segalo and Cakata, 2017). The exclusion, and to some extent minimal usage, of South African indigenous languages is still evident in psychotherapy, a space that is centred on building relationships, first with oneself and then with others. The use of English within the psychotherapeutic space disrupts the connection between black people and their culture since aspects of culture are not easily communicated in a foreign language. The consequence of disconnecting culture and language disrupts how people make meaning of their experiences and perceive the world (Aragno & Schlachet, 1996). Thus, even a therapeutic dyad of different languages and cultures that connect linguistically but not culturally may leave a gap in fully comprehending the patient's experience.

The limited use, and at times exclusion, of indigenous languages in psychotherapy contradicts the Use of Official Languages Act No. 2 of 2012, which promotes all twelve official South African languages. The Act aims to ensure equitable access to services and information in all official languages. However, clinicians' inability to engage with patients in their indigenous languages remains a significant barrier in health care (Swartz & Drennan, 2000; Levin, 2006). This often manifests as miscommunication between medical professionals and patients, leading to decreased satisfaction for both parties, lower quality health care delivery, and compromised patient safety (Al Shamsi et al., 2020). While interpreters are used to address language deficits in psychotherapy, they also bring about a new set of challenges. For example, the introduction of a three-person interaction instead of the typical two-person dynamic can lead to a complex network of intra- and inter-psychic processes (Hunt & Swartz, 2017). These challenges highlight the gap between the Language Act and its implementation. Thus, while the language policy may appear good on paper, it lacks a structural framework for rewarding positive outcomes and implementing sanctions for failures (Mnguni, 2020).

IsiXhosa as a language in psychotherapy and South Africa

IsiXhosa is the second most spoken language in South Africa and is one of the official languages of the country (Pascoe & Smouse, 2012). The connection between isiXhosa and amaXhosa is deeply rooted in culture and identity. One of the enduring legacies of colonialism and apartheid is the intentional exclusion and subsequent promotion of watered-down versions of indigenous languages in the media, education and professional settings, except maybe on radio and television news broadcasting. This exclusion and dilution of indigenous languages have translated into current teaching practices, where there is limited use of isiXhosa proverbs and idioms in the language curriculum for children in their early stages of education (Mvanyashe, 2019). Thus, previous legacies continue to influence and maintain specific institutional power dynamics over crucial aspects of language use in this country.

When deconstructing and addressing these past legacies, particularly when considering the use of isiXhosa as a language of symbolisation in psychotherapy, it is important to consider how the language is spoken, its cultural context, and its role in shaping the identity of amaXhosa.

Proverbs and idioms are essential elements in the narration of Xhosa history, imparting wisdom and cultural knowledge. Their absence in education deprives the youth of learning about their heritage and traditions (Mvanyashe, 2019), while also limiting adults in their ability to express themselves, share experiences and seek support. The rhythmic cadence and cultural nuances of isiXhosa allow for the expression of emotions, humour and suspense, enriching the storytelling process (Diko, 2023b). Symbolism is deeply ingrained in these nuances, connecting isiXhosa not only as a means of communication, but also as a preserver of identity and culture. This also informs how isiXhosa may conceptualise illness and healing in psychotherapy.

The use of isiXhosa in psychotherapy requires an understanding of how well-being and illness are defined, conceptualised and explained from an African world view. The African perspective views well-being, success and good fortune as dependent on satisfactory relational aspects such as family bonding, familial piety, communal relations, prosociality, ancestral links, and spirituality (Bührmann and Gqomfa, 1981; Idemudia & Adedeji, 2023). Illness, on the other hand, signifies a disturbance of relational connections, and treatments aim to restore equilibrium (Bührmann and Gromfa, 1981).

The goal of this article is to use postcolonial theory to analyse and critique the historical evolution of language use in South Africa that led to the marginalisation of indigenous languages. This article aims to question the current supremacy of English, generally and specifically within the field of psychotherapy. The discussion will then shift to the importance of prioritising isiXhosa as a language of symbolisation in psychotherapy, drawing on African world view, Afrocentricity and African psychology as guiding principles.

The theoretical framework

Postcolonial theory is used to problematise the use of language in pre-democratic South Africa to oppress and subjugate black people. Indigenous languages were excluded as legitimate languages for official use in politics, medicine, education, legal proceedings, forensic investigations and the economy of South Africa (Ariani et al., 2014; Diko, 2023b; Phaka et al., 2023). English and Afrikaans were the only recognised official languages of South Africa during the reign of the apartheid regime (Diko, 2023). Postcolonial theory argues against the hegemonic position of English as the only language of healing in psychotherapy by deconstructing present-day discriminatory language practices, which, whether implicitly or explicitly, are consequences of the past (Rukundwa & Van Aarde, 2007). The apartheid government systematically promoted the interests of the colonial system by mandating that individuals working in the public service only speak English and Afrikaans (Swartz & Drennan, 2000). The exclusion of indigenous languages

in official spaces had a negative impact on speakers who were not fluent in English or Afrikaans, limiting their access to essential resources. Given this history and its effects, this article argues for the deliberate use of indigenous languages, particularly in psychotherapy, to move towards more equitable and accessible mental health services.

Previously, clinicians had limited language use due to the country's laws of exclusion, which affected access to mental health services based on language (Swartz & Drennan, 2000). The postcolonial theory deconstructs colonial and imperial structures that promote Western ideas as valid while devaluing indigenous African knowledge systems. For instance, it problematises the Eurocentric world view which, through the use of English, promotes individualism, competitiveness, control over nature, universality, and Christianity (Banks, 2001) as evidential aspects of well-being while subjugating the African perspective. The imposition of English on the colonised prohibited them from speaking their indigenous languages (Shakib, 2011), leading to a loss of identity and culture, and discrediting their philosophical beliefs about humanity. As a product of Western individualism, psychotherapy (especially psychoanalytic models) conflicts with the collectivist values found in African cultures (Wolff, 2014).

Afrocentricity is used in this article to focus the discussions on the epistemological and ontological assumptions of African psychology (Asante, 2014; 2020; Nwoye, 2015; Ratele, 2017). This article aims to emphasise the importance of indigenous languages, such as isiXhosa, in psychotherapy as valid forms of communication in formal settings. The African psychology described by Nwoye (2015), the cultural African psychology orientation as outlined by Ratele (2017) and the African world view will serve as the foundations, centring indigenous African knowledge as a framework for understanding the psychology of Africans (Thabede, 2008).

One goal of this article is to explore how would psychotherapeutic interventions based on African indigenous knowledge and theoretical assumptions look like. IsiXhosa will be highlighted as a means of expressing the identity, culture and practices of amaXhosa, providing insight into their definitions of well-being, illness and healing. Language, closely linked to identity, influences how amaXhosa perceive illness, treatment and healing. Illness is viewed by amaXhosa as a disruption within individuals, families, clans and their ancestors, with treatment aimed at restoring balance (Burhman & Gqomfa, 1981). Illness and health are understood relationally (Owusu-Ansah & Mji, 2012), encompassing personal, interpersonal and spiritual aspects. Therefore, I argue that psychotherapy in isiXhosa must be based on these principles.

These theories address broader language issues that transcend personal, interpersonal, societal and political spheres. For example, in this article, I argue that the Western paradigm and African world view define illness and healing differently. Thus, contextual approaches that recognise and respond to the needs of speakers of South African indigenous languages are essential. This article argues that psychotherapy conducted in isiXhosa for amaXhosa must be based on the ontological and epistemological assumptions of the African world view. 'African epistemology is embedded in African culture, tradition, religion, and the understanding of the nature of forces and their interaction with the cosmic' (Nwosimiri, 2022: 78). 'It is the belief of the African that man [sic] does not live in isolation, he [sic] also lives in his culture, in his community, among his peers, and in close interaction with the lower beings under the protection of his ancestors' (Ekeh, 2020: 90). This refers to the underlying issue of challenging the neocolonialistic reality that is apparent in the dominant use of English in psychotherapy.

Therefore, this article challenges the dominance of English in psychotherapeutic settings as the primary language of healing, and proposes alternative perspectives through the use of isiXhosa as a language for symbolisation. It aims to position isiXhosa as a conduit for incorporating the African perspective into healing processes in the psychotherapeutic space. This article attempts to achieve this thorough advocating for the recognition, legitimisation and incorporation of African indigenous knowledge elements in the psychotherapeutic healing process. For example, amaXhosa cosmology purification procedures are necessary in times of transitions and separations, like initiations and/or death, due to beliefs about mystical forces of pollution and danger during these periods (Hutchings, 2007). This perspective requires that the psychologist be familiar with the signals in isiXhosa language that indicate the patient's communication about a specific need, for example, cleansing ritual. This allows for a response that aligns with African healing practices that the patient understands and believes in.

Psychotherapeutic practices that do not incorporate cultural relativism or competence perpetuate Western dominance and uphold the legacy of white supremacy left by apartheid (Wolff, 2014). To effectively address the needs of Africans, it is crucial to recognise even the smallest differences between Western and African perspectives. For instance, in Western views, dreams are utilised to access the patient's unconscious mind. However, in African cosmology, dreams are seen as having bidirectional, intersubjective, triangulated, transcendental and mystical aspects (Hirst, 2005; Umezurike, 2019). This has implications on how assessment, diagnosis and psychotherapy are conducted for Africans. Consequently, it is essential to recognise and prioritise African ways of understanding well-being, illness and healing, which are often expressed through indigenous languages such as isiXhosa.

Research methodology

The narrative literature review approach, combined with a qualitative research paradigm, provided a framework for exploring the South African language experience and psychotherapy in context. In this article, a combination of narrative literature review and qualitative paradigm was used to provide context and depth, anchoring the discussion about language use in psychotherapy. The narrative review aims to reveal problems, weaknesses, contradictions and controversies, providing a context for describing, elaborating and evaluating a new theory, or integrating the material reviewed (Baumeister & Leary, 1997; Hart, 1998). This methodology structured the exploration, synthesis and

evidential use of data, mapping the historical landscape of language use in South Africa and supporting the use of isiXhosa by amaXhosa as a language of symbolisation in psychotherapy. The narrative literature approach helped capture and report the findings in a condensed format that summarised the contents of each article (Green et al., 2006). The resultant findings argue for the deconstruction of the hegemonic positioning of English use and the centring of isiXhosa in psychotherapy spaces.

Data was extracted following Cronin et al.'s (2008) methodology, which involves selecting a review topic, searching the literature, analysing and synthesising it, and writing a report. Once the topic was chosen, specific keywords were identified to extract data, which was then summarised and interpreted to provide a comprehensive view of language experience in psychotherapy in the South African context. The keywords used included *language, psychotherapy, amaXhosa healing practices, psychotherapy in indigenous languages, languages in psychotherapy, language and identity*, and *isiXhosa language*. The data was gathered from various sources, such as Google, Google Scholar, Science Direct, and Scielo SA, to support a narrative literature advocating for the use of indigenous languages in psychotherapy. It was considered important to broaden the inclusion criteria to historical articles to trace the evolution of language use in the South African context, thus laying the groundwork to argue for current language needs.

The resulting findings indicated three broad areas of interest: language in psychotherapy, the history of language use in South Africa, and the healing practices of amaXhosa. The narrative literature review method created a framework to integrate, evaluate and interpret these findings from multiple research sources (Cronin et al., 2008; Diko, 2023a), providing an in-depth synthesis of the patterns of language use in South Africa and in psychotherapy. This approach helped to argue for expanding current expertise and practices, improving existing knowledge and filling remaining gaps (Hart, 1998; Ramdhani et al., 2014; Snyder, 2019) by advocating for the use of indigenous languages in psychotherapy. Afrocentricity was used as a framing paradigm to highlight isiXhosa as a language of symbolisation in psychotherapy. Afrocentricity emphasises the importance of Africans in their own historical experiences (Asante, 2014), allowing space for African people (isiXhosa speakers/AmaXhosa) to take control in their contexts by focusing on and embracing culture as a valuable aspect of humanity, fulfilling their roles as valid participants in multicultural discourse (Asante, 2014).

The synthesis of the narrative literature illustrated how the systemic and historical suppression of indigenous languages is interconnected with the oppression of black people (Diko, 2023b). This link was especially demonstrated in the historical literature about the apartheid government's mandate for schools to teach in Afrikaans, causing challenges for black students (Mbiza, 2018). Nowadays, language barriers significantly contribute to the high dropout rates in African secondary schools and first-year university studies (Mgwebi, 2011), highlighting the necessity for practical approaches to language reform.

Findings and discussion

The historical and current pattern of language use in South Africa

Various writers on the subject of language in the South African context emphasise the negative historical impact of colonialism, imperialism and apartheid on indigenous languages (Shakib, 2011; Madiba, 2012; Tshotsho, 2013; Dlamini, 2020; Diko, 2023b). At the turn of the 20th century, the Europeans who colonised Africa generally viewed the natives as intellectually and morally inferior, exploiting the labour of the local populations through the establishment of a public education system that prepared young Africans to be compliant labourers (Mbiza, 2018). Language was one of the main tools used by the colonial system and the apartheid government to distance, disenfranchise, disorganise, dismiss, and deny non-white South Africans the opportunity to live with dignity. This was achieved by limiting access to life's fundamental resources. Language was weaponised to segregate, discriminate and oppress. This oppression of black people through language was reinforced by the introduction of language decrees, ensuring that indigenous language speakers had limited access to and were subsequently excluded from receiving meaningful education (Mbiza, 2018).

The oppression of black people was intensified by the implementation of the Bantu Education Act No. 47 of 1953, which aimed to bring the education of black South Africans under the control of the national government (Bantu Education Act, 1953). This governmental control heightened racial segregation and discrimination, resulting in unequal distribution of resources that had a severe impact on black schools. As a result, there were substantial funding gaps between white and black schools, and the student-teacher ratios negatively affected the quality of education for black students (Michigan State University, n.d.).

The use of language to conquer, divide and control began long before the 19th century and continued beyond that period. For instance, in the 1800s, missionaries introduced a written form of isiXhosa, but the writing, printing and publishing of isiXhosa material was tightly controlled and limited to serving specific objectives, such as promoting Christianity and suppressing indigenous cultures (Kaschula, 2008). The missionaries' focus was on converting Africans to Christianity, with little interest in developing African languages beyond their use for reading the Bible (Mda, 2010). As a result, during colonisation, colonisers imposed their language on the native people, prohibiting them from speaking their mother tongues and systematically silencing them, stripping them of their identity and dignity (Shakib, 2011).

This situation was exacerbated by a decree issued in 1974 by the Minister of Bantu Administration and Development, which mandated the use of English and Afrikaans as mediums of instruction for black students from Standard 5 (Grade 7) onwards (Mbiza, 2018). The decree specified that subjects like General Science, Mathematics, Arithmetic, and Social Studies would be taught in Afrikaans, while practical subjects like Homecraft, Needlework, Wood and Metalwork, Art, and Agricultural Science would be taught in English

(Mbiza, 2018). Religious subjects were to be taught in the students' mother tongue (Mbiza, 2018; Boddy-Evans, 2021). These government regulations further oppressed black people by limiting their development through the deliberate manipulation of language in the education system. During this same period, English and Afrikaans were the only official languages of the country designated to facilitate access to services, knowledge and information (Swartz and Drennan, 2000; Tshotsho, 2013).

The apartheid government utilised the language situation in South Africa to implement their policy of dividing, ruling and oppressing (Mgwebi, 2011). This continued until the advent of the new dispensation for South Africa, which, through new government constitution and policies, provided structural regulatory frameworks to redress the historical language injustices by elevating indigenous languages to occupy the same status as English and Afrikaans (Use of Official Languages Act, 2012; Government Communication & Information Systems, 2016; Department of Higher Education and Training, 2020). Arguably, while the implementation of language policies aimed at elevating indigenous languages to official status, it seemed to lag in particular areas like health, including psychotherapy, more than others (Swartz & Drennan, 2000; Diko, 2023b).

Historically, and to some extent presently, English and Afrikaans have been and still are the dominant economic, academic and scientific languages in the country, even though roughly 80% of the population is black, with less than one per cent speaking English at home (Casale & Posel, 2011). This is in spite of the constitutional provision of a legal and regulatory framework to formally recognise and promote linguistic diversity (Government Communication & Information Systems, 2016). Thus, despite their official status, indigenous languages have not been structurally afforded the space to function as academic, scientific (Department of Higher Education and Training, 2020), and clinical (e.g used in psychotherapy) languages. Consequently, despite constitutional and policy efforts to address this issue, English remains the primary language used in psychotherapy (Swartz & Drennan, 2000).

The marginalised status of indigenous South African languages is a result of historical (post)colonial injustices, which limit their use both in society at large and in the health care system specifically (Diko, 2023b). Communication barriers are evident between indigenous patients and health care practitioners due to language differences, leading to misinterpretation and misunderstandings among patients who do not speak Western languages (Moloko-Phiri et al., 2022). This barrier is often implicitly blamed on indigenous language speakers and their perceived inability to learn English, seen as a sign of illiteracy rather than a systemic language issue.

Conversely, the chronic systemic oppression of black people through the suppression of indigenous languages has resulted in an internalised silencing, degradation and inferiority complexes that manifest in interactions where such language barriers exist. Understandably, after years of repression, being unheard, and not understood, the disempowered lose their voices and their languages (Mda, 2010). This subjugation, both external and internal, has damaged the self-concept of indigenous language speakers, leading to deeper issues that persist today. This has significantly impacted how indigenous language speakers engage with their languages (Kaschula, 2008).

In conclusion, psychology and psychotherapy, as currently practised, have Western origins, and their language of theorising, reflecting and practising is English. The Western paradigm has dismissed African indigenous knowledge systems and ways of healing as representing archaic superstitious thinking. This has led to African individuals feeling disenfranchised and distant from their ways of being, culture and identity. Using indigenous languages in psychotherapeutic spaces will disrupt this narrative, reconstructing the legitimacy of these languages and knowledge systems. For example, the use of indigenous languages and awareness of linked traditional practices will allow patients to use their mother tongue to openly and safely discuss their illness as well as alternative treatments they are taking without fear of being judged (Moloko-Phiri et al., 2022). Using indigenous languages to deliver mental health services, especially psychotherapy, offers the benefits of accessibility, applicability and relevance.

Centring indigenous African languages (e.g. isiXhosa) as languages of symbolisation in psychotherapy

The literature demonstrates fundamental differences between Eurocentric and African perspectives. These differences are, in part, linked to language, particularly the connections between language, world view, culture and identity. Therefore, psychotherapy in English, while seen as benign or neutral, ultimately uses its Eurocentric origins to influence interpersonal interactions, restricting the experience of indigenous language speakers. It is inappropriate to apply Eurocentric theories of human behaviour to explain the behaviour of Africans (Thabede, 2008). This discussion is framed from an African psychology perspective, acknowledging the experiences, perspectives and truths of indigenous people as legitimate (Asante, 2014; 2020). Approaches like Asante's Afrocentricity, Ratele's cultural African psychology orientation, and Nwoye's concept of African Psychology centre the discussion, advocating for the use of isiXhosa as a language of symbolisation in psychotherapy (Nwoye, 2015; Ratele, 2017).

Asante's (2014) definition of Afrocentricity as an intellectual paradigm that prioritises the centrality of Africans within their own historical experiences is central to this argument. Centring the African experience and considering the needs of its people is crucial to disrupt Eurocentric thinking that originates from an external position. Therefore, discussions about healing using South African indigenous languages must consider how African individuals live their lives, understand illness and define well-being. For, example, the African perspective of well-being differs from Western world definitions, as it is typically defined within the framework of group norms, values, kinship relationships and ties rooted in cultural values (Idemudia & Adedeji, 2023).

Defining well-being from an African perspective provides a non-European anchor that serves as a foundation for interventions aligned with African values and culture. The cultural orientation of African psychology offers a framework for organising and orienting psychology as inherently cultural

(Ratele, 2017). 'This psychology is concerned with spiritual, cultural, or metaphysical phenomena, encompassing interests in elements such as the significance of shared African language, values, beliefs, world views, philosophies, and knowledge' (Ratele, 2017: 320). Similar to Nwoye's conception of African psychology, the Cultural African psychology orientation is rooted in the African world view, which is holistic, circular and dynamic, involving complex interactions between natural, abstract and spiritual realities (Nwoye, 2015; Ratele, 2017).

Centring isiXhosa as a language of symbolisation

This discussion outlines how indigenous language speakers, particularly amaXhosa, experience psychology as part of their culture, shaped by their world view. For example, isiXhosa-speaking people in the Transkei use a wide range of plant-based herbal remedies combined with traditional rituals and ceremonies to heal the whole person psychologically and spiritually (Bhat, 2014). Thus, healing is embedded within the cultural practices of amaXhosa. In this article, isiXhosa is positioned as a carrier of experience, world view, life and identity, shaping how psychology is conceptualised, expressed and experienced by amaXhosa. The intersection of isiXhosa and psychology is explained using three dimensions which are expressions of psychological phenomena:

i) Psychology of everyday talk;
ii) Psychology of connection (ubuntu); and
iii) Psychology in spirituality.

It is essential to provide a context in which these psychological dimensions take form.

The context of the isiXhosa language as spoken by amaXhosa

Language, identity and culture are intrinsically intertwined. For example, language learned in early childhood is formative of identity, linked to varying social elements including race, ethnicity, socio-economic status, culture, gender and nationality (Shahrebabaki, 2018). Accordingly, isiXhosa forms part of the identity of amaXhosa, who mainly populate the Eastern and Western Cape provinces of South Africa. AmaXhosa are proud of their language and culture (Mgwebi, 2011), taking pride in their distinctive ways of life and belief systems rooted in their language and culture. They observe, practise and connect to their culture by linking their personal lives with those of others, the environment and the spiritual realm. This perspective seems to pervade most amaXhosa, irrespective of their location. However, in South Africa, there is a strong link between urban and rural areas, which is important in understanding amaXhosa ways of being.

In South Africa, the interdependence between rural communities and distant cities is higher than in other areas, with many rural born individuals living in urban areas while maintaining family, social and financial ties in rural areas (van Schalkwyk et al., 2014). Therefore, amaXhosa, among other things, have strong ties to their rural homes and traditional ways of life. Traditional African cultures are deeply religious, with a central motive to search for and maintain unity, harmony, balance, continuity, synthesis and community (Van Niekerk Jr, 1986). These indigenous knowledge systems constitute an ontology with both theoretical and practical (utilitarian) properties primarily situated in rural areas and available as tools for regional transformation processes elsewhere (Lesiba, 2013). IsiXhosa serves as a conduit through which amaXhosa make sense of their lives, connect with their ancestors, perform rituals and ceremonies, and engage in healing. Accordingly, isiXhosa is not merely a means of communication, but a way of life that fosters connections between individuals, the cosmos and God. Therefore, isiXhosa as a language is intrinsically connected to the psychology of amaXhosa.

African psychology is deeply rooted in its cultural values and is accessible through the languages spoken by its people (Cakata, 2020). For instance, isiXhosa proverbs, idioms and metaphors offer insights into the ways of being, knowing and healing of amaXhosa, reflecting significant historical events. Metaphors, proverbs and idioms provide depth, context and a wealth of knowledge on various topics through seemingly simple utterances in the language.

In line with the above, Moloko-Phiri and colleagues (2022) argue that understanding the idioms related to stress, for example, used by a particular group of people can help in establishing rapport and enhancing empathetic communication. Therefore, conducting psychotherapy in isiXhosa requires an awareness of, and openness to, the ways in which amaXhosa live, speak about and conceptualise life. This involves recognising and acknowledging that the language of indigenous people links them to their belief system, which is rooted in u*Qamata* (God), the cosmos, the environment and their community (Nwoye, 2015; Ratele, 2017).

AmaXhosa, despite being influenced by various factors, including the West, amaXhosa still maintain aspects of their fundamental perspective on life rooted in their connection to nature, others, the spiritual realm and God. This way of life is based on adaptability and a connection to both human and non-human forms, seen in early ways of life such as those of hunters and gatherers. Such people had to be in tune with the Earth's climate and cycles out of necessity, leading to critical adaptations where different body sensations would signal changes in humidity, temperature and light that indicated rain, early winter, or drought (Fogel, 2013). This illustrates the reciprocal relationship that early people had with their environment. This way of life mirrors how amaXhosa speak about, understand and interact with their environment (Cocks, et al, 2012).

The following discussion highlights language as a symbolic representation of both internal and external worlds. Symbols created during psychotherapy play a psychological role by giving shape and substance to previously unclear experiences, transforming private thoughts into shared ones, and creating meaningful connections between thoughts, emotions and perceptions (Lewis & Langer, 1994). When expressing feelings in isiXhosa, utterances often convey the type and intensity of the emotion. Additionally, amaXhosa use figurative language to explain human behaviour, preserving and passing down lessons about ways of understanding (Cakata, 2020). These lessons provide valuable indigenous knowledge that guides individuals, instilling pride and fostering a sense of identity (Mvanyashe, 2019).

Psychology of everyday talk

Indigenous knowledge systems play a vital role in thought, behaviour and welfare, focusing on indigenous cultural and creative practices (Neethling, 2014). IsiXhosa has a significant influence in preserving South African culture and heritage (Diko, 2023b). It is rich in proverbs, idioms, metaphors and expressions that carry figurative as well as literal meanings, providing lessons about ways of life (Mvanyashe, 2019; Furstenberg, 2022). Everyday talk among amaXhosa is intricately linked to their conceptualisation of illness, well-being and healing. Therefore, the psychology of everyday talk refers to informal conversations that provide a space for sharing of lived experiences of personal challenges, troubling incidents, difficult events and general life circumstances. These conversations draw from contextual and cultural understandings of supportive healing practices to relieve suffering, encourage resilience and instil hope. It is interactional in nature, focusing on the mental, emotional and spiritual experiences explored by people in conversation. It is a safe space for understanding and being understood. This space is forged and maintained through language use patterns in interactions that are contextual and culturally based.

The language patterns in isiXhosa are rich with figurative and descriptive speech. These speech patterns are evident in the psychology of everyday talk, holding space for interactional healing. Below are some examples that illustrate both the descriptive and figurative aspects of the isiXhosa language. Certain nouns may describe an aspect and function of the object being discussed. For example, the hadeda ibis bird is called *ing'ang'ane* in isiXhosa, a name that, in part, describes the bird's distinct call, a sound that is also understood to signal impending rain. Similarly, a sickle is known as *irhengqe*, a word describing both its function of cutting and the manner in which it does. This language structure presents both literal and figurative meanings that are necessary for communicating specific experiences, including psychological pain.

In everyday conversations, an isiXhosa speaker may express that *intliziyo yam ilihlwili*, which directly translates to 'my heart is a chunk of blood clot', symbolically describing extreme heartache. On the other hand, the speaker may say *intliziyo yam ibuhlungu*, directly translating to 'my heart hurts', expressing heartache. While both expressions convey heartache, the former signifies a higher intensity of the emotional pain. Instead of simply saying 'I am anxious', an isiXhosa-speaking person may describe the feeling as *ndinombilini*, a descriptive expression of the physiological aspects of anxiety or fear, which directly translates to 'I have heart palpitations'. *Umbilini* also refers to intuition and internal organs. Therefore, it is important to differentiate the meaning through understanding the context. These unique ways of communicating may be overlooked by non-isiXhosa speakers or isiXhosa speakers lacking the cultural context, which can lead to misunderstandings. These descriptive, metaphoric, idiomatic and proverbial phrases show how isiXhosa speakers open up to those they trust in brief interactions. These phrases, along with many others, can be used to discuss the past, present and future. They may reflect on a historical event or share a premonitory experience about something that has yet to happen.

Hidden in everyday conversations are subtle connections to others, the environment and the spiritual realm. For instance, an isiXhosa individual might say, *Andiziva kamnandi namhlanje ingathi kukhona into endizokuyiva*, which translates to 'I am not feeling well today. It is as if I will hear some news'. This statement often conveys a sense of foreboding, but sometimes it can be about positive news. Therefore, when someone experiences emotional distress without a clear cause, it may be understood to mean some kind of premonition. By listening to a conversation between Xhosa people, one can gain a deeper understanding of the speakers' psychological experiences.

The use of figurative speech in isiXhosa offers accessible ways to share about challenging situations and experiences. Idioms and proverbs have deep roots in ancestral tradition of interpreting life through nature and its creatures, emphasising the complex relationship between culture, society and the environment (Dold et al., 2006; Cakata, 2020). Everyday experiences also inspire the creation of idioms, proverbs and figurative expressions that communicate valuable life lessons. While they may appear simple and straightforward at times and complex and convoluted at others, figurative speech in everyday conversations conveys profound psychological meanings.

For example, someone may say *ikati ilele eziko*, directly translating to 'the cat is sleeping in the hearth/fireplace'. The deeper meaning conveyed by this statement is that the speaker's home is experiencing hunger or poverty. As a result, the listener responds to this deeper meaning both practically and emotionally by offering food and words of encouragement. This allows the speaker to not have to explicitly explain their situation, but rather trust that their plea for support will be understood and met with a response.

The following isiXhosa phrases demonstrate how language users express distress using proverbs, idioms and descriptive terms. An isiXhosa speaker might describe feeling depressed as *umphefumlo wam udandathekile*, or *ndidandathekile emphefumlweni*, or *umoya wam uphantsi*, all of which directly translate to 'my spirit is low or down'. These expressions convey a sense of low mood. Another example is *ndinoxinzelelo emphefumlweni*, loosely translating to 'my spirit is pressed', which means 'I am stressed'. These isiXhosa phrases provide a definition and a vivid description or proverbial expression of the experience. The examples described above offer both translation and interpretation. While the translation may align with expected Western understandings of the terms, the interpretation may vary depending on the situation, time and place. For example, *umoya wam uphantsi* could be interpreted as a prophetic expression rather than just a factual statement (a thorough discussion of which is beyond the scope of this section of the paper).

The psychology of everyday talk provides an interactive, supportive and meaning-making context for people in distress. The benefits of these interactions seem to be similar to the meanings made in psychotherapy proposed by Locher et al. (2019), which are anchored on the presence of three core conditions: 1) the feeling of being listened to and receiving a satisfactory, coherent explanation of one's mental suffering and demoralisation; 2) the experience of

care and concern from the other; and 3) an enhanced sense of mastery and control over one's mental suffering (i.e. re-moralisation). The only difference appears to be the fund of knowledge that the interactants draw from. For amaXhosa in conversation this would be the African world view.

Therefore, it is crucial to consider the individual as a whole, taking into account their world view, life experiences and philosophical beliefs when providing psychotherapy in isiXhosa for amaXhosa.

Psychology of connection (ubuntu)

The use of the Afrocentric approach to psychology practice for amaXhosa in isiXhosa is essential to adequately meet their needs. For instance, amaXhosa participate in social gatherings, rituals and ceremonies that preserve traditional knowledge, passed down orally, shaping the character of the people (Dwadwa-Henda, 2023). This sense of connectedness is reflected in the language, linking human life with the environment and the spiritual realm. The African world view, centred around ubuntu as the organising principle, emphasises wholeness, solidarity, sharing and interconnectedness (Mtuze, 1999). In this world view, every family, community and society member is treated equally, with exceptions made for individuals who violate the principles of ubuntu and collectivism (Mtuze, 1999). The guiding principle is that of connection, protection and inclusion. For instance, within rural areas individuals with disabilities participating in amaXhosa rituals are treated with dignity and respect during ceremonies to prevent their rejection by the ancestors, who are believed to show displeasure towards discrimination based on disability (Dwadwa-Henda, 2023).

In amaXhosa families, rites of passage serve as essential spiritual and social communal practices that help preserve the moral fabric of communities (Mndende, 2022). These rituals strengthen the sense of connectedness amongst amaXhosa and support their mental well-being. The principles and practices of ubuntu create a framework for protecting the mental health of individuals with disabilities through inclusion, as observed in the remote villages of Bomvane (Dwadwa-Henda, 2023). This is a significant departure from the mistreatment and ostracising of people with disabilities seen elsewhere. The epistemological approach employed by amaXhosa is deeply rooted in the African world view, providing a foundation for community-based mental health strategies. AmaXhosa view individuals as interconnected with their environment, relatives, clan and ancestors (Bührmann & Gqomfa, 1982), highlighting the psychology of connection as a way of living, engaging with and healing from mental illness.

From an African perspective, well-being is typically defined within the context of group norms, values, kinship relationships and cultural values (Idemudia & Adedeji, 2023). While this view may seem narrow, seemingly focusing on external sources of illness and healing practices, it contrasts with the Western paradigm that emphasises internal origins of mental health and illness. While both approaches seem complementary, it is crucial to recognise that the Western paradigm has often dismissed the legitimacy of African culture (Mtuze, 1999), claiming authority over mental health issues.

Therefore, adopting ubuntu as the foundation for psychotherapy requires a shift from rigid thinking about established techniques and methods to address mental illness. The psychology of connection is the experience of support, care, harmony and mutual respect evident in daily interactions between people (Bolden, 2014). It involves trusting in others to provide support, and being dependable. Embracing a shift from individualistic psychology to collectivism is essential for conducting psychotherapy in isiXhosa.

Psychology in spirituality

Spirituality is one of the major pillars of African cosmology. To understand how this pillar can be used to conceptualise psychotherapy in isiXhosa, it is necessary to explore what is meant by spirituality from the African perspective. According to Ekeh (2020), human connection to the spirits present in the natural world, such as rivers, mountains, animals and other elements of nature, are considered manifestations of spiritual powers within the African cosmology. The core of African cosmology is about maintaining harmony and balance between the physical and metaphysical realms through the performance of ceremonies and rituals (Ekeh, 2020). For example, the health and well-being of amaXhosa rely on rituals, which are seen as the essence of life (Dwadwa-Henda, 2023). There is a continuum between the living, the living dead and God, which keeps relationships alive beyond death (Marumo & Chakale, 2018).

The culturally contextualised ways of healing that amaXhosa use influence how they speak about their difficulties and find healing. For example, the connection to the environment, ancestors, and u*Qamata* (God) means that each individual has a spiritual connection to others (Takov & Banlanjo, 2022). For instance, you may hear an isiXhosa-speaking person saying, *Yiyo le nto ndisuke ndatyhafa namhlanje kuyacaca ukuba bendisiva wena*, loosely translating to 'No wonder I was feeling lethargic today, I was sensing our interaction or your presence'. This statement is often communicated to unexpected visitors or chance encounters between people. It is based on amaXhosa belief that they are spiritual beings in physical form. This concept refers to the African belief in the triangular relationship between God, man {sic} and the non-human elements in the universe (Nyang, 1980).

The connection of everyone to a higher being creates a framework for the belief that the spirituality of others influences one's own, regardless of distance, space, or time. This also highlights the sensitivity of the self, which goes beyond connecting with living beings to encompass relationships with non-physical spirits.

Sandlana and Mtwetwe (2008) explain how *umbilini* ('rapid heartbeat') is interpreted in the African traditional world view as a sign of supernatural forces trying to communicate through the affected individual. They also suggest that it could signify the presence of an evil spirit. This shows that the connection to others extends beyond physical human relationships into the spiritual realm, which is constantly interacting with the physical world. For instance, amaXhosa believe that illness can be prevented by performing rituals for the ancestors, who are viewed as intermediaries between God and people (Dwadwa-Henda, 2023).

Indigenous healing rituals around the world utilise powerful rhythms, extended music and dance in a social context (Vinesett et al., 2015). AmaXhosa take part in traditional dances, songs, drumming, rituals and the use of herbs to connect with one another, the spiritual world and the supreme being (Nyang, 1980; Izu & de Villiers, 2021). The healing process stems from connecting with oneself, others, nature and the spiritual world. Therefore, it is crucial to recognise and consider these healing practices when conducting psychotherapy in isiXhosa with amaXhosa, as these rituals are believed to promote health, stability and resilience (Dwadwa-Henda, 2023). Contemporary Eurocentric psychology often neglects the spiritual aspect of human existence and the interactions in the cosmic sphere (Sandlana & Mtetwa, 2008). This directly contradicts the ways of life and beliefs in the African traditional world view, which are communicated through indigenous languages. The traditional African view of humanity suggests that individuals perceive the universe as a hierarchy of essential forces that connect inanimate objects to the spiritual realm above them, making them both wielders and recipients of spiritual power (Nyang, 1980).

The African world view emphasises the interconnected relationship between the self, community and the spiritual world. For instance, in isiXhosa, there are singular greeting words like *molo*, but amaXhosa commonly use greetings that imply plurality, such as *molweni, ninjani*, which loosely translates to 'greetings all, how are you?'. The typical response to this greeting is *siyaphila, akukhonto*, meaning 'we are (fine) alive, nothing is the matter'. Despite its plural nature, this type of greeting often takes place between individuals rather than groups, showcasing the dynamic interaction of the spiritual realm, community and families involved in the conversation.

Therefore, psychotherapists working with amaXhosa must consider the influence of one person on another, the environment and the cosmos. It is important to acknowledge that amaXhosa believe that when an adult dies, they become an ancestor who remains actively involved in daily life. These ancestors are viewed as benevolent guides and mentors who can be affected by the actions of their descendants (Bührmann & Gqomfa, 1981).

The connection between individuals and the environment is fundamental to the world view of amaXhosa, and influences their perceptions of what is beneficial to them. A significant example of this is the thicket vegetation, locally known as *ihlathi lesiXhosa*, which is considered a sacred place where ancestors communicate with their living descendants through messengers (*izithunywa*) in the form of birds, mammals, insects, or even the wind (Cocks et al., 2012). For instance, in amaXhosa culture, a rooster crowing while standing in the doorway and a spider hanging down from its web at the doorway signify the arrival of visitors. This demonstrates the belief in the interconnectedness between humans, animals, the environment and spirits.

Common conversational phrases and sayings further illustrate the daily expression of the relationship between humans, the environment and the spiritual world. Language is viewed as a symbol of humanity's spiritual superiority over the non-human elements in the universe (Nyang, 1980). Therefore, traditional African belief holds that life is in disarray if man's {sic} connections with God and others in existence are broken. The concept of the triangular relationship between God, man {sic} and the non-human elements in the universe is crucial for understanding traditional African philosophy (Nyang, 1980). Being in harmony with nature greatly contributes to the physical, mental and spiritual well-being of amaXhosa, and is essential to their cultural identity (Cocks et al., 2012).

IsiXhosa as a language of symbolisation (intervention) in psychotherapy

The previous discussion on the psychology of everyday talk, of connection (ubuntu), and of spirituality used by amaXhosa provides the context for how psychotherapy in isiXhosa should be approached. It needs to be contextual in both theory and practice to align with regional ontological and epistemic systems. This is a responsive practice where psychotherapists (and counsellors) can, by understanding these ways of being, support the African individual in healing in a manner that respects, acknowledges and centres their world view as a foundational starting point.

Psychotherapy is a treatment method that utilises a variety of skills based on theoretical knowledge to help patients improve their well-being and mental health. This is achieved by providing a context that allows patients to transform the meaning of their experiences and symptoms, helping them feel better and function adaptively (Locher et al., 2019; Pawlak and Kacprzyk-Straszak, 2020). Generally, and currently these foundational elements are anchored from a Western perspective. Consequently, psychotherapy in isiXhosa must be rooted in the epistemological and ontological assumptions of the people being served. In the African world view, human beings are seen as the centre of creation, the main actors in the drama of life and their actions evoke reactions from the gods (Ekeh, 2020). Psychotherapy based on the principles of the African world view should allow individuals to engage with others and their spirituality in mystical and emotionally relational ways (Lambo, 1974). This can be achieved by incorporating therapeutic methods based on African healing practices that are experiential, intuitive and imaginative (Bührmann & Gqomfa, 1982). For example, songs, singing and dancing are important mediums for expressing feelings among amaXhosa (Bührmann & Gqomfa, 1981).

Psychotherapy in isiXhosa can be conceptualised and conducted in a way that includes specific practices under controlled conditions to promote good mental health and well-being (Lambo, 1974). The core value of the African perspective is harmony, and a sense of ill health is attributed to a disturbance of equilibrium (Marumo & Chakale, 2018) between the physical and metaphysical. Psychotherapy in isiXhosa should aim to promote psychological well-being (equilibrium) by reconnecting personal, interpersonal and spiritual aspects of human beings under treatment. This practice should be based on the three dimensions including *the psychology of everyday talk* (an interactional engagement between individuals providing a supportive space drawing on African understandings of healing), *the psychology of connection* (well-being contained in healthy connections to others, nature and the metaphysical), and *spirituality*.

While this article does not provide specific techniques and methods for conducting psychotherapy in isiXhosa or psychotherapy for Africans, it offers a framework from which clinicians can develop such methods or techniques by drawing from the African world view. This framework is not prescriptive or deterministic, but rather iterative and exploratory. The main focus is on centring the African perspective, utilising personal, interpersonal and spiritual aspects as anchors of practice. This approach is fundamental to psychotherapy practice in isiXhosa, or for any individual whose outlook on life is rooted in the African world view. This type of psychotherapy should strive to establish a safe space for Africans to explore ways of organising and stabilising their world in their indigenous language(s) like isiXhosa, realigning and reconnecting them with their purpose and the cosmos. This therapeutic space should, at the very least, function as an incubator for regeneration, realignment and stabilisation of a familiar normality rooted in the world view and way of life of isiXhosa-speaking Africans.

Recognising and validating the African world view as a legitimate healing framework is the first step in this psychotherapy process. The purpose, structure and techniques used must differ significantly from Western psychology practices. Utilising indigenous languages in psychotherapeutic settings requires a unique approach that goes beyond simply applying Western psychology to African challenges. Imposing Western healing practices on African sensibilities can be detrimental (Cakata, 2020). African and Western understandings of human behaviour are based on different ways of knowing and existing, highlighting the importance of tailoring approaches to address the needs of Africans. However, shifting epistemologies to support new practices may face resistance against established Western norms (Wilson & Williams, 2013). This underscores the need for extensive effort, through research, to ensure that this approach is recognised, acknowledged and legitimised in the field of psychology.

Conclusion

In conclusion, language in psychotherapy serves as a conduit that therapists and patients use to access internal worlds that may otherwise be inaccessible. Conducting psychotherapy in indigenous languages requires a different approach that recognises and responds to the contextual, cultural and spiritual dimensions of the individual being treated. This can be achieved through acknowledging and understanding indigenous knowledge practices, modifying them to fit the therapeutic context by drawing from the psychology of everyday talk, the psychology of connection and psychology in spirituality to create therapeutic practices that recognise these practices as legitimate forms of healing.

Consequently, discussions about language should be placed in their historical contexts, especially in South Africa, a country with a language history marked by segregation, racism, apartheid and colonialism. For instance, the difference between the language spoken by the therapist and that of the patient puts the patient at a disadvantage in terms of their healing process. To appropriately respond to the needs of the patient, the therapist has to be knowledgeable in both the language and culture of the patient being treated. However, in cases where a cultural misunderstanding persists as an obstacle, understanding the patient's language may significantly reduce feelings of patient alienation.

The ideal scenario would be for both the therapist and patient to speak the same language and understand each other's world view, enabling the therapist to fully respond to the needs of the patient in treatment. Such alignment is crucial in dismantling past oppressive structures that have limited access to mental health care, and serves as a basic framework for addressing past injustices in psychology.

This article highlights the significance of using South African indigenous languages in psychotherapeutic settings, providing a brief overview of language politics in the country, and focusing on isiXhosa as a language of symbolisation. While specific psychotherapeutic interventions are not offered in this article, I presented conceptual ideas that centre African perspectives in the development of psychotherapeutic intervention strategies. I acknowledge the vastness of this topic and recognize that a single article cannot adequately explore everything related to it. Therefore, I suggest that there should be further research and theorising about appropriate interventions to address psychological challenges in the African context, with interventions based on African ways of knowing. There is a need to explore the current lived experiences of participants (patients and therapists) regarding language use in psychotherapy.

The area of immediate interest would be the patient experience of being in psychotherapy with a therapist who speaks and understands a different language than their mother tongue. This will provide the necessary lived experience of those being served. Another area requiring investigation is within the dyad where both therapist and patient share the same indigenous language but choose to engage in English. This will provide insight into the dynamics of language choice in a therapeutic space. It is also important to study whether language-related issues are discussed at the outset of the intervention. This is particularly relevant to understanding what language therapists assume prospective patients will be speaking when they make contact with them and how these assumptions shape their practices.

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