

THE INVISIBLE POWER OF THE INVISIBLES
**A study of the efficacy of Narradrama method in assisting South African domestic
workers in shifting their self- identity**

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Research report submitted to the Wits School of Arts
University of the Witwatersrand,
Faculty of Humanities

In partial fulfillment of the requirements for the
Degree of Master of Arts in the field of Drama therapy

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April 2016

Declaration:

I declare that this research report is my own, unpaid work. It is submitted for the degree of Masters of Drama therapy at the University of Witwatersrand. It is not been admitted before for any other degree or examination at this or any other university.

Hanna Yarmarkov

Date

Acknowledgements

It is with sincere gratitude that I acknowledge:

- Ms. Sinethemba Makanya, my supervisor and mentor, thank you for your insight, expertise, and patience, and for being my guide in my Drama therapy journey.
- To my wonderful family my husband Ben Zion Yarmarkov and my sons Aviad and Boaz Yarmarkov I thank you so very much for your endless patience, love and support and for giving me the space and encouragement to follow and fulfill my dream.
- To Drama for Life and the University of the Witwatersrand thank you for enabling the growth of the field of Drama therapy in South Africa and supporting my growth in the field.

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ABSTRACT

The aim of this research was to evaluate Narradrama as a drama therapy method in assisting South African domestic workers to shift their identity towards a more positive one, so they will be able to better deal with their current socially oppressive issues.

I postulated, based on research done by sociologists and anthropologists, that domestic workers still feel oppressed marginalised and differentiated even to date, twenty years after the apartheid era; the racial discrimination that was perpetuated by the doctrine of the apartheid regime and cemented the master-servant relationship as the only possible relationship between domestic worker and employer was normalised within the harsh realities of minimum wages, long working hours and appalling living conditions; oppression of women by women, sexism and racism. Moreover, the domestic workers legal rights that were established after 1994 in the Bill of Rights have not changed their lives and working conditions. These working conditions continue to affect them and are a risk to their physical and mental health. (Mohutsioa-Makhudud, 1989; Williams, 2008; Ally, 2009). The risk that is inherent in chronic perceived discrimination to one's mental health (Mohutsioa- Makhudu ,1989:40) and the risk of developing a negative identity and self hatred by internalising the negative views of a dominant society(Phinney, 1989:34) has influenced the decision to do this research.

The method of Narradrama chosen for this study was researched by Dunne (as cited in Leveton 2010) and found to be effective in working with marginalised groups but has not yet been researched with a marginalised stratum within the South African context. Narradrama, became the preferred method as it is centred on story (Dunne and Rand, 2013:7) which led to the thought it would be effective when working with a group of African women who are considered to be story tellers in the African culture. (Scheub, 1970: 119-120).

Thematic data analysis was used in analysing the results. Identity shift was measured by comparing the change between the initial negative themed stories, that substantiated the hypothesis that participants do feel oppressed and marginalised, with the new, positive themes that appeared later in the research processes.

The Narradrama processes were analysed through the theoretical lens of Landy's role theory, who proposes that for a person to have a healthier identity he needs to take on a variety on new roles, and to be able to play them proficiently. The playing of new roles assists participants to enlarge their perspectives, discover new identity descriptions and experience what it would feel like to move forward in life in preferred ways towards a more manageable, hopeful future. (Landy, 1994:93-97) This parallels the Narradrama notion which claims that by re-storying a client's narrative, the client opens up to new preferred choices; a new landscape of identity and action (Johnson and Emunah, 2009:182).

The research results show the start of a shift, in the participants' re-authored stories and their assumed choices of new roles- these changes signify that the group has benefited from processes. As the researcher, I therefore recommend that these processes be resumed in order to allow these identity shifts inclusive of the suggested roles to become more substantial, and more integrated in the participants' identity within their current living and working context.

However, though Narradrama proved to be a method that can assist this group, the results of this research cannot be generalised, and further research with different groups of domestic workers will need to be done in order to be able to generalise to the wider context of the stratum of South African domestic workers.

Chapter One: Introduction and Background

1.1 Introduction

This research aims to explore the efficacy of Narradrama in assisting South African domestic workers to enhance and shift their self-identities. This research may assist domestic workers in shifting identity, which will help them manage their current situation in a more hopeful manageable way.

In South Africa issues of race still play an important role in people's way of thinking. The South African colonial apartheid era has shaped the dynamics that exist between domestic workers and employers in their unique and intimate working spaces. Twenty years into democracy there seem to be many threads from the past that still influence these relationships. The label of 'domestic worker' could put a heavy load on the individual thus labelled. The individual is part of a racially stigmatised group and Cock (1980) asserts that domestic labour exists as a social status marker that has been normalised within white South Africa (8).

Racial discrimination was perpetuated by the doctrine of the apartheid regime and cemented the master-servant relationship as the only possible relationship between domestic worker and employer. Ally (2009) states that this relationship was normalised within the harsh realities of minimum wages, long working hours and appalling living conditions; oppression of women by women, sexism and racism. Today legal rights are established in the Bill of Rights but they have not changed the lives and working conditions of these individuals, and this continues to affect their physical and mental health (190). (Mohutsioa-Makhudu, 1989; Williams, 2008; Ally, 2009)

The research postulates that a shift towards a positive self-identity may assist a domestic worker in dealing with her current difficult situations in a healthier way.

The research suggests that Narradrama, though a western-based method, may assist domestic workers in shifting identities, as research by Dunne (2010) found it to be effective when

dealing with marginalised groups (52). Moreover, Makanya (2014) found parallels between drama therapy methods and Landy's Role theory with the way a human being defines himself and his role in community in an African culture (304).

Narradrama, a narrative form of drama therapy developed by Pamela Dunne (2006), can be a useful approach that facilitates a reconstruction of identity in ways that promote personal agency. Narradrama is an action-oriented approach to therapy that encourages clients to tap into their imagination and creativity (22). It allows for the transformation of painful experiences through artistic expression and the experience of an increased sense of mastery over the problems that exist in their lives (13). Narradrama can lead to the discovery of different aspects of the self, as well as clients' own ability to engage in actions that are beneficial to themselves (14). It offers clients the opportunity to take on an active role in re-storying their lives and rebuilding or reshaping their sense of themselves. This can enhance their own sense of self-efficacy.

In preparing to assist clients through the process of re-storying and building their sense of oneself, Schwartz and Cote (2005) suggest that "identity exploration and flexible commitment to life alternatives may be especially likely in emerging adults who adopt developmental individualization strategies and who possesses and utilize agentic qualities to greater extents." (223) Bandura (1989), argues that 'a core property of personal agency consists of meta-cognitive ability, to reflect on oneself, and the adequacy of one's thoughts, feelings and actions, and that this is most distinctly human' (1175-1182). These points offer an explanation which further unpacks why the utilization of ones 'agentic qualities' is crucial for the re-storying process of one's life and is an objective of an empathic therapeutic engagement.

Choosing a group to be part of this research was based on the premise that the group chosen must not only benefit from the drama therapy processes of Narradrama but should also be a group that probably had never had an opportunity to deal with their problems in therapy. The researcher hoped that this would provide an opportunity for a group of South African domestic workers who are still being racially differentiated, stigmatised and marginalised, to deal with their own issues and move towards a healthier change and transformation.

In this research, via Narradrama therapeutic processes, an identity shift of a group of domestic workers adult women will be measured through their re-authored stories. The results concerning their identity shift will also be measured and explained by Landy's Role theory and Role Taxonomy by the assumed role taking and playing of these group participants.

1.2 Background and Initial Research

1.2.1 Personal Motivation for the Research

I am white and I am a foreigner, though I have been a South African citizen for over twenty years. I come from a foreign country (Israel) and therefore English is not my mother tongue. I do not speak an African language either, so people were surprised at my choice and asked why I had chosen this specific stratum of society as a group for my research.

As a child I grew up in Israel in a poor, crime-ridden neighbourhood. My mother, who was a holocaust survivor, had never had the chance to complete her studies and was a domestic worker. I had low self-confidence and was ashamed of my mother and angry that she had chosen to work in such a 'disgraceful' profession. Sensing it was not a reputable profession, I never spoke of it and, if asked, I used to lie and say she was not employed. This seemed, at that time, a reputable way to deal with the matter. My mother, on the other hand, did not have any problem with her choice. She told us repeatedly that her work helped support the family as my father's earnings were not enough to cover the basic needs. It served her purpose, which was to give her daughters the best of everything, particularly, that which she had never had a chance to acquire: education. She also stressed that only this profession would give her the flexibility to plan her time so she could attend to us when needed. As physically hard as this work was, she felt confident that she was doing the right thing, which made her happy and content. My mother believed, and taught us to believe, that every 'occupation respects its owner'. These facts helped me to understand her motives but did not help me deal with the shame I felt in facing the communal stigma around domestic workers.

In time I learnt that stigma serves a purpose. It makes and dictates an easy way to relate to certain groups of people, and it usually affects negatively the rights and dignity of the individual associated with the stigmatised group. It is entirely up to the individual who has been stigmatized to fight against it, and stand up for their human rights.

Here in South Africa I have the privilege of enjoying the service of a domestic worker. Because of my background I made a point of creating a healthy working relationship. My aim was to help the person working for me to feel worthy and understood. This has led to a relationship of mutual trust, respect, appreciation and fondness.

Living in South Africa I have heard conversations about domestic workers; listening and witnessing the tone of disrespect from employers speaking of their workers, seeing domestic workers working long hours, without complaint, raising our children, to name but a few of the visible oppressions of the invisibles. This made me think of the hidden resentments and pain they inhibit within themselves and that might enhance their negative identity and its negative derives. This influenced my decision to do a practice based research and to experience their lives as an auto ethnographer.

1.2.2 My Practice as Research Investigation

Smith and Dean (2009), explain that the term Practice led research and its affiliates (practice based research, practice as research) were developed by creative practitioners to explain, justify and promote their activities, and to argue that they are as important to the generation of knowledge as more theoretically, critically, or empirically based research methods.

Practice led research is employed to make two arguments about practice which are often overlapping and interlinked. Firstly, that creative work in itself is a form of research and generates detectable research outputs; secondly, to suggest that creative practice - the training and specialised knowledge that creative practitioners have and the processes they engage in when they are making art - can lead to specialised research insight which can then be generalised and written up as research. Practice as research can be interpreted as creative practice, which includes not only the artwork but also the surrounding theorisation and documentation (2&5).

For the purpose of this research, I embarked on a practice as research-based project. This PaR (Practice as research) research formed the base-line data for this research's further investigation. The findings of the PaR further deepened my feeling that there was a need to do research with a group of domestic workers. In order to understand the South African domestic workers' culture, their world views, the hidden meanings they are 'veiling' from fear of losing their work place, and the way they identify themselves in the post-apartheid era, I decided to enrol as an institutional cleaner. While it is acknowledged that an institutional cleaner (one who is hired by an institution for the purpose of cleaning) is different from a domestic worker (one who works within a domestic space), the experience was close enough to be of value in understanding that of a domestic worker.

Conquergood (2002) challenges traditional academic ways of obtaining knowledge. He argues that 'empirical investigation and critical analysis which are undertaken from a distant perspective are not attuned to the meanings that are masked, camouflaged, indirect, embedded, or hidden in context' (146). He goes on to say:

Subordinate people do not have the privilege of explicitness, the luxury of transparency, the presumptive norm of clear and direct communication, free and open debate on a level playing field that the privileged classes take for granted... Oppressed people everywhere must watch their backs, cover their tracks, suck up their feelings and veil their meanings(146-148).

My personal experience as a worker in a cleaning company confirmed that the profession is still racially differentiated. Cleaners, or "hygiene controllers"¹, as they called within the respective company, are still predominantly black and coloured women. When they saw me join them, in their uniform, their reaction underlined the fact that I am obviously different. On the one hand they were happy to see a white woman joining their working force but there was also an empathetic reaction: 'Oh shame! Why does she need to do it?'

The group of workers I joined work long hours and are underpaid, which makes it hard for them as they are the sole providers for their families. Advancement only brings a change in

¹ While doing my practice-based research I came across this term "hygiene controller", which the company uses as a professional title for their employees who would otherwise, colloquially, be called 'cleaners'. Presumptively, on the part of the employers, it is meant to give the individuals a sense of pride in their work; however, it does not translate into a monetary appreciation of the titling.

title and more responsibility. They live within a vicious cycle that is hard to break. They are forced to bury any dreams that they might have of moving forward so they remain in jobs which affect their stress levels. Their fear of losing their position in the work place influences communication styles. They may need to get certain concessions from their employers but the anticipated confrontation adds to their existing stress levels.

The women I encountered were hard workers, always aiming to please their employer. They were proud of being able to work to support their families, and they also enthusiastically demonstrated their power over me. I asked, right at the beginning, to be given work in public places like restaurants because I wanted to feel how the public would react to me as a cleaner. However my supervisor (enjoying the sense of power) first taught me how to clean the toilets and then how to buff the floors. When my supervisor finally arranged for me to work in a restaurant I came to realize how cleaners are the ‘invisibles’. The clients did not even bother to look at me; a painful and annoying reality check.

On the one hand I saw the power and pride of the hygiene controller? And at the same time I experienced their “invisibility”. Their life experiences, which they secretly shared with me, gave meaning to what gave rise to their fears and distress. All of this had a great influence on me and informed my decision to research how the individual domestic worker might benefit from drama therapy specifically from the Narradrama method. How Narradrama could assist them to shift their identity; to feel strong and empowered despite their harsh reality (Yarmarkov, 2014).

1.3 Aim

The aim of this research was to study the efficacy of Narradrama (a drama therapy method) in enhancing the self-identity of a group of South African domestic workers.

The objectives of this aim were initially to address the assumed oppressed identity of domestic workers. While embarking upon the research, the need to substantiate this

assumption arose; whether domestic workers do indeed hold an oppressed identity. In other words, are domestic workers an oppressed group that need a change in their identity?

In establishing the aim, I examined literature that describes the legacy of apartheid as a contributor towards the definition of African culture, women as marginalised groups, and the influencing oppressive policies and behaviours towards these specific groups. The research also indicated examples of current governmental policy towards these groups which might further contribute towards their exploitation, marginalisation, and powerlessness. The danger with this continuous indoctrination is that it might contribute towards maintaining what Freire (1985) calls the 'culture of silence' (74). According to Freire (1985):

[O]ppressed people become so powerless that they do not even talk about their oppression. If they reach this stage of oppression, it creates a culture wherein it is forbidden to even mention the injustices that are being committed. The oppressed are silenced. They have no voice and no will (71-72).

Young (2004) says that there are still varying levels of silence. A surface level of silence is when the oppressed knows that they are being oppressed but cannot talk about it or voice their suffering or concerns (3).

A deeper level of silencing occurs through indoctrination. At this stage, the oppressed actually believe that they are "naturally inferior" to the ruling class. They are taught by oppressors that their inferiority is normal and a fact of life. They do not know that they have a voice. In addition, education and literacy are withheld so as to prevent them from gaining knowledge about themselves and stop them from finding means to communicate their thoughts and feelings (2004:3).

According to Freire (1985), one of the main means of indoctrinating the oppressed is to give them negative images of themselves. The oppressed are dehumanized and taught to believe the negative perceptions as fact. The most dangerous part of this process of indoctrination is when these negative images are internalized and become a part of the oppressed person's own beliefs. At this point, the oppressed are not silent because they are forced to be; they are silent because they choose to be (71-72). It is from this theoretical position that the researcher assumed the existence of oppression and negative identity within the participant group. This perception, however, needed to be challenged against the reality experienced by and explicitly named by the participants themselves, in the process. It was not until the

Narradrama processes had been carried out that this perception was substantiated by the participants' stories.

This research checked whether domestic workers are oppressed via the method of Narradrama. Drama therapy and Narradrama, as its method, aim at helping clients to reveal the problem of their lives, while the therapist aims at guiding his clients to unfold their problems through their stories. In the research, the aim was that if clients' problem stories surfaced, the researcher would step into the second objective of this research and help domestic workers (participants) to critically reflect on their life circumstances (their lived experiences) and see whether they would define any of these experiences as a problem.

Narradrama has already been researched and found to be effective when working with marginalised groups (Dunne, 2010:25-54). This research would like to check the efficacy of Narradrama with a group of domestic workers, who the researcher assumes are a marginalised group. The research first explored the meaning participants attached to their experiences and whether they see their experiences as problematic (problem saturated stories²). Then, the research checked whether domestic workers' stories influenced their sense of identity- if this was found to be apparent in the research, then their stories were externalised through Narradrama processes so as to open a space for the participants to make new choices as to how to re-author their stories.³

Freire (2005) says that the oppressed can change their circumstances through praxis – reflection and action – and that in order to do that, they have to learn to analyze their lives and to throw aside internalized oppression⁴ (51). Bearing in mind Freire's (2005) notion of the ability of the 'oppressed' to change through praxis (100), if this research finds that

² Problem saturated story; according to Dunne & Rand (2013; 6) 'Problem saturated stories. Stories describe and shape people's life. We give meaning to our lives through the storying of experience. Problem saturated stories restrict the role and actions we perform because they filter problem free experiences from our memories and perceptions.

³ Re-story and re-storying; when a participant modifies his or her internal narrative he changes his relationship to the problem. New stories are created from elements within the participants' experience which creates a new history based on their life decisions and important relationships. (Dunne and Rand, 2013; 167-168)

⁴ (Freire, 1970 as cited in Griffin, 1997) "[I]nternalized oppressions are those experiences those who are members of subordinated, marginalized, or minority groups, those who are powerless and often victimized, both intentionally and unintentionally, by members of dominant groups; and those who have "adopted the [dominant] group's ideology and accept their subordinate status as deserved, natural, and inevitable" (Griffin, 1997:76).

domestic workers do internalise oppression it will then aim at revealing how domestic workers, through critical reflection on their narratives, can find a way to re-author their stories and thereby reveal their strengths and find ways of enhancing their self-identity.

1.4 Rationale

Erwin states that:

[A]partheid is part of a living past: generations of South Africans alive today had first-hand experience of its violent oppression and unjust privileges. Furthermore, complex networks rooted in apartheid segregation continue to provide social and cultural capital, which in turn serves to nurture privilege, entrench poverty and reproduce ideas around racial difference. It is important to remember that all people in South Africa past and present were and are profoundly shaped by the social engineering of its former racist state. (2010:95)

Thus, Erwin (2010:94) says, it is important to understand how and why race continues to matter for projects of social justice and building a non-racial society. Although, South Africa now has a regime that is built on non-racialism as a “founding provision” of the Constitution, it is still grappling with the practicalities of moving out of the horrors of apartheid towards a democratic society. Erwin (2010) states that in present day South Africa, race continues to influence the thinking around culture, gender, language, and income, amongst other social identities. Race is still evident in the continued use of racial categories in state policies and data collection. In short, this form of taxonomy continues to “say something” about our sense of Self and Other (although what that “something” is, is widely contested). Race is not *always* an important identity in South Africa. However, the frequency with which race is used in state, media and popular discourses, and its embeddedness in social identities, often highlights it as the primary means through which South Africans interact and negotiate power relations and access to resources (95).

Erwin (2010) paints the current social reality that exists today and contributes to our understanding of the further marginalisation and stigmatisation of certain racial groups. He says: “Contemporary research into social inequalities and justice highlights how current state practices reinforce segregation by race” (95). Murray (2008) affirms this point by stating how ‘government low-cost housing projects largely maintain the spatial mapping of apartheid’

(101), and this, says Erwin (2010), ‘nullifies opportunities for creating open and diverse spaces of interaction’ (95).

Dilata (2008) has pointed out that domestic work is still the largest source of employment for black women, and the employment conditions reveal that racist ideologies and profoundly exploitive labour practices still exist in post-apartheid South Africa (1). Ally (2009) wrote about domestic workers in post-apartheid South Africa being invisible, in the sense that this is a mode of control, “expertly managed by employers, to deny not only their very presence but also the personhood of their workers” (73). They are also usually hidden behind closed doors, which make them physically invisible; their needs are ignored and their voices unheard. Post-apartheid the state recognised them and incorporated them into the legislation. However, they have remained “invisible” - unable to make decisions about their own rights. As it suggested by Ally: ‘the government considered the domestic workers as vulnerable and unable to decide for themselves, and the domestic workers in response shunned the State’s offerings’ (95).

Through these continual processes of being made invisible, a level of internalized oppression on the part of the domestic worker would be an imagined result, and one of the main means of indoctrinating the oppressed is to give them negative images of themselves. The oppressed are dehumanized and taught to believe the negative perceptions as fact and by that internalise the oppression. Most dangerous part of this process of indoctrination is when these negative images are internalized and become a part of the oppressed person’s own beliefs (Freire, 1985:71-72).

It goes to follow that in South Africa, domestic workers form part of an oppressed group that is racially and economically stigmatised. According to Williams et al. (2008):

[T]here is limited population-based data on the current levels of racial differences and the domestic worker’s subjective experience of discrimination in post-apartheid South Africa, and the extent to which such experiences are consequential for health and the racial disparities in health (441).

It is this gap that the proposed research would like, in a small way, to address.

South African researchers have long described the multiple ways in which the deeply entrenched differential allocation of material and socio-political privileges based on race could have pervasive adverse consequences on the health of Black groups. This research found that discrimination, primarily through structural differences in socio-economic status is a major source of racial disparities in health. (Williams et al. 2008: 442-443).

Furthermore, Swartz (1987:npn) reported that it was argued that black people have cultural beliefs in conflict to those of psychiatry, and that they therefore prefer to use indigenous and religious healing services rather than western biomedical services. Moreover, Ross (2010) says:

Many African clients are reluctant to engage in counselling which involves verbalisation of feelings, and they prefer going to a traditional healer who makes a diagnosis without clients having to verbalise their problems (44).

Swartz (1986:npn) offers that though there is truth to arguments about cultural differences in preference for western based care, it is to be acknowledged that during certain periods in history (e.g., apartheid era) western mental health services were simply not available or accessible to most of the population.

Burns (2011) states that South Africa has a commitment to maintain the human rights of people with mental disabilities in the form of new health legislation. The Mental Health Care Act 2002 (MHCA) was implemented in 2004 and “was generally hailed as one of the most progressive pieces of mental health legislation in the world” (100). Unfortunately, the MHCA was an unfunded mandate. Very little preparation occurred – training was not provided, facilities were not developed at district and primary care levels, and no budget was allocated by the government for implementation of such a potentially transformative piece of legislation. The result is that now, six years later, a host of chronic problems are encountered throughout health services nationwide in relation to the care, treatment and rehabilitation of those with mental disabilities ⁽¹⁰⁰⁾. Burns (2011) describes:

[T]he “mental health gap” that exists between current resources for mental health care in South Africa and the huge “burden” of suffering and disability due to mental illness and disability (100).

Real life factors such as poverty, illiteracy, income inequality, homelessness, displacement, discrimination based on ethnicity, race, and gender, social exclusion, stigma, and abuse all impact the mentally ill individual's ability to access services and realise full personhood within their communities. (109-110)

This data shows that the mental health system in South Africa is unequipped to handle the increased and urgent need for its services. Moreover, the stigmas surrounding mental health, and the reluctance of African people in need to receive help from mental health institutions, or engage in counselling that involves verbalisation, pose obstacles in addressing those in need.

Community health and well-being, and new ways of how to assist those from a strong African tradition, need to be considered and incorporated into the medical model. In African culture oral traditions like *ntsomi*, hold an important place. Schueb (1970) explains *ntsomi* as:

a store-house of knowledge of Xhosa societies, the means whereby the wisdom of the past is remembered and transmitted through the generations, an image of private conduct and public morality, a dramatization of values, an externalization of the Xhosa world-view (119).

This ancient wisdom is communicated in an artistically pleasing manner. Makanya (2014) explores African notions of health and healing in order to not only use them to inform the practice of drama therapy, but also to begin to imagine how to integrate these notions with drama therapy, such that it may be used to reach the goals of health among South Africans (304). With this notion of integration in mind, this research has assumed that Narradrama, as a drama therapy method using creativity and participants' own subjective stories, may be an effective method for working with South African domestic workers. Narradrama provides the opportunity to work towards opening a space for participants to tell their stories and to critically reflect on their circumstances; then, from this, to identify any need for an identity shift and allow the space to explore the shifting of identities. Thus, in response to Williams (2008), this research will open a space for the domestic worker's subjective experience.

Dunne (2010) has researched the use of the Narradrama method with marginalised groups (25); this has not yet been done within the South African context. Dunne's (2010) case studies on the use of Narradrama with different cultures and marginalized groups, which included an adolescent girls' home in Los Angeles, trauma survivors in the Middle East, and

long-term patients in a psychiatric home, led the researcher into presupposing that this method could be effective when used with domestic workers. These case studies describe that the participants were united by the discovery of their strengths and skills as a result of their Narradrama work. They became more connected, more supportive, and more helpful (52). As Dunne (2010) captures:

Their growth was noted in their personal statements, murals, enactments, rituals, and wisdom books. Through the Narradrama process, these groups experienced change and, as their strengths and living skills became more visible in their lives, these changes created growth. Their growth, in turn, began affecting others in their community, who in turn transformed their roles from victim to those of facilitator, helper, and healer (52).

This research is based on the assumption that Narradrama may offer the same benefits to domestic workers as to a marginalised population. The researcher suggests that Narradrama can be effective when used with domestic workers to assist in exploring how past and current events have influenced them and still contribute to their sense of identity. In this way the aim is to use Narradrama to enable the domestic workers to tell their stories, using various dramatic elements to externalise them and allow the domestic workers to critically reflect on their lives and their identities, thus offering space for them to re-author their stories in ways they see as necessary. Narradrama in this research worked within a group context. Makanya (2014) says that a similar concept to that of the community (an important aspect of healing in African culture) in drama therapy would be that of the group. Although similar, these are of significant difference but one may argue however, that the group is a type of community for the individual (305).

Somé (1998) says about African culture that being in community is the first constituent of health and that this leads to a 'healthy sense of belonging, greater generosity, better circulation of resources and a greater awareness of the needs of self and the other' (91). It therefore follows that in treatment of any form of illness within the African context, one not only 'strengthens himself and his dependents, but he also considers the welfare of his fellow man in the community' (Ngubane, 1977:131). Ngubane (1977) explains the collective responsibility to preserve the community first and that it is important to establish and maintain balance with one's surroundings (131). This balance is what denotes health. Health does not exist within a medical framework. For the African, "concepts of health are far more social than biological" (Lambo, 1964:446). An aspect of health is the ability of an individual

to realise his or her responsibility in the community. Makanya (2014) states that the definitions of health and the group or community are useful and may greatly inform work within the South African context, as they are somewhat congruent with the South African notions of health and community. These methods are suitable within the South African context as they speak to the healing of the community and can speak to the healing of an individual within a community (305).

Via the Narradrama distancing methods, this research opened a space for the individual to connect with their own values and virtues by self reflecting on their subjective experience, and with that, hopefully, to move away from what Freire (1985) described as negative images that are internalized to become a part of the oppressed person's own beliefs (71-72).

Chapter Two: Literature Review and Theoretical Framework

The literature review surveys historical and current literature concerning domestic workers, which throws light upon and influences the view that domestic workers are part of an oppressed stratum. The constructs of positive and negative self-identity will be defined as these variables will measure whether the domestic workers' reality impacts self identity in a positive or negative way. In this light, the research will be able to indicate whether a shift has occurred in participants via research processes. I will examine literature concerning the method of Narradrama and its benefits when working with marginalised groups. I will also consider how it is assumed to be beneficial as a method for this research in helping participants to express and tell their stories, to critically reflect on those stories, to re-author any problem narratives, and to assist them to realise new stories which influence a change in their identities. I will explain Landy's Role theory as a theoretical drama therapy framework and examine its use as a suitable prism to explain and substantiate the results of this research.

2.1 Domestic work in South Africa

The research postulates that though more than 20 years have passed since South Africans gained their freedom, (the ending of the apartheid era), there are still lingering social issues that characterised that era, which are still apparent today in the life and work of a domestic worker, and which have influenced their sense of identity. Goffman (1963), shows how the 'undesired differentness' of a stigmatised group can lead others to both turn-away from and actively discriminate against them (5). Discrimination is an important component of stigma (Link & Phelan, 2001:365), and where social inequalities exist, is a key feature of intergroup relationships and serves to reinforce the symbolic boundaries that separate social groups from one another (Jackman, 1994:99).

In this section, literature relating to domestic workers will paint a reality of what Goffman (1963) describes as group that has been discriminated against (5).

Sticher and Parpat (1988), review Cock's description of the life and work of domestic workers during the apartheid years, when domestic workers and employer relationships in the

households were normalised within harsh realities, which included appalling living conditions especially for 'live-in' domestic workers. The 'servants' quarters were very seldom part of the main house, but were rather stand-alone rooms with a 'bathroom' and access to the house was only through the kitchen. Domestic workers received minimum wages and worked long hours. The domestic worker's relationship with the employer was also characterised by oppression of women by women, sexism and racism. In summation, domestic workers were 'trapped' in their societal place due to apartheid laws, sexism, racism, and the power dynamics within their employers' homes, which was characterised by exploitation of black women by a white woman (205-219). Cock (1989) asserts that domestic labour does not exist specifically for economic reasons, but is an important social status within white South Africa (58-59).

Dilata (2008) has pointed out that domestic work is still the largest source of employment for black women, and the employment conditions reveal that racist ideologies and profoundly exploitive labour practices still exist in post-apartheid South Africa (1). Lazar (2000:316) suggests that domestic workers still remain on the margins of South Africa's new social contract (316). This is echoed by Ginsburg (2011), who says that everyday life under apartheid has not disappeared or changed very much with the transition to parliamentary democracy (114). Ginsburg (2011) further explores the distinct social and racial geographies that flow from the detached living quarters, as well as the clothes worn and the company kept, linking the feelings and emotions of domestic servants to the kind of work they are required to do, and the sacrifices they are forced to make. The conditions under which many African women perform their work increase the weight of its load. In some households, it seems that white employers slap their servants. Yelling and harsh words, including racial slurs, are common. Domestic workers are pained by the indignities of their position. They feel humiliated when forbidden to eat off an employer's plate, and when being bought 'servant's meat' and sometimes even cheaper 'dog meat'. Many servants even have their consumption of tea rationed. They feel lonely and bored as most of the day she spends her time alone working. She feels removed from others when her employers lock her in the property when they leave for work (114).

Le Roux (1999) argues that domestic workers' lives and work are intertwined. Some took on this role at a young adult age and stayed in it most of their adult life. In this complex

situation, their work became their life, their survival, and not only theirs but also that of their extended families. They were torn from their nuclear families, meaning that their own children were raised by others while they spent most of their time raising the children of the families they worked for. From testimonies, we know how much love and dedication they invested in these children who grew to love their nannies as their own parents (181).

The effect of living far from home on the lives of these women is described in Le Roux's (1999) book, *'Home is Where Children Are'*. She uses domestic worker case studies to describe the reality of these women's lives and to address their concerns as live-in domestics away from their families. These domestic workers' stories raise important questions about independence and women's liberation both through and from domestic work. These testimonials also raise questions about the effect these continuous struggles have on the domestic worker's mental health, even though 20 years have passed since this country's liberation from apartheid (179-188).

South Africa now has a regime that is built on non-racialism as a 'founding provision' of the Constitution but it is still grappling with the practicalities of moving out of the horrors of apartheid towards a democratic society.

As mentioned in the rationale, in present day South Africa race continues to be an integral part of the social identities. Race is the primary identity through which South Africans interact and negotiate power relations and resources (Erwin, 2010:95). The current rhetoric from government adds to this growing sentiment. The recent comments by the Minister of Human Settlements, Lindiwe Sisulu, stated that young South Africans will not get free houses because 'they didn't suffer during Apartheid'. Added to this are comments made by President Jacob Zuma that: 'South Africans should not be lazy.' These comments suggest that the current government perpetuates existing racial ideologies. Oxfam SA Executive Director, Sipho Mthathi, offered: "These comments baffle the mind and are problematic because this shows an increasing attitude of disdain to the poor that is being said at the highest level" (Bothma, 2014).

From Bothma's (2014) online article citing The Global Wealth Report, we learn that South Africa is the world's most unequal country. Economically, the major part of the wealth in the

country is still owned by two rich white South African families (Oppenheimer and Rupert). An Oxfam report states that these two families own the same wealth collectively as 50% of the population. Oxfam projections show that even on the very conservative assumption that inequality remains static, around 300,000 fewer South Africans will be living in absolute poverty by 2019, leaving almost eight million people living below the poverty line (Bothma, 2014).

This socio-economic reality seeps into the household reality of the domestic worker and implicitly influences the relationship, aggravating the power relations which already exist between the white employer and her black domestic worker employee.

Apartheid is part of a living past; there are still generations of South Africans who experienced its violent oppression and unequal privileges first hand. Furthermore, complex networks, rooted in apartheid segregation, continue to provide social and cultural capital, which in turn serves to nurture privilege, entrench poverty, and reproduce ideas around racial difference... Thus, it is important to understand how and why race continues to matter is an important social endeavour, both in terms of social justice and in the working towards the constitutional goal of a non-racial society. (Erwin, 2010:95)

Erwin's claim paints the current social reality that exists today and contributes to our understanding of the further marginalisation and stigmatisation of certain racial groups.

Furthermore, Cock (2011) says that invisibility is a central feature of racism and she quotes Ellison, who says: "I'm invisible simply because people refuse to see me" (132). Cock also argues that sexism makes domestic workers invisible, as their work is often trivialised and dismissed as 'women's work' (132).

On the marginalisation of domestic workers in particular, Ally (2009) wrote about the domestic workers in post-apartheid South Africa being rendered invisible in the sense that this is a mode of control, expertly managed by employers, to deny not only their very presence but also the personhood of their workers. They are also usually hidden behind closed doors which make them physically invisible; their needs are ignored and their voices unheard. Post-apartheid, the state recognised them and incorporated them into the legislation, however in reality they have remained 'invisible' unable to make decisions about their own rights (73).

Counter to these claims of no change in societal practice however, as Ally (2009) alluded, it is also documented that the democratic elections of 1994 brought some winds of change. Two years later, in 1996, legislation included domestic workers for the first time within its definition of employee, recording paid domestic work as a form of employment, and recognizing erstwhile ‘servants’ as ‘workers’ (68). This from Ally’s (2009) section goes on to say:

Not only were domestic workers included within a labour rights regime, but labour relations in the sector were formalized with access to a statutory state agency (Commission for Conciliation, Mediation, and Arbitration [CCMA]) offering workers efficient access to legal recourse in the case of unfair labour practice (68).

In 2002, there was further legislation called ‘Sectoral Determination Seven’, which set out the terms and conditions of employment for workers in particular sectors. For the first time in South African history, it legally compelled all employers of domestic workers to pay a legislated minimum hourly wage, as well as stipulated annual increases. Mandatory contracts and pay slips were introduced to formalise the relationship between employer and employee. Sectoral Determination Seven would solidify the post apartheid state’s efforts to transform ‘servants’ into ‘workers’ and would establish one of the world’s most comprehensive regulatory frameworks for paid domestic work (Ally, 2009:68).

The question is then why, 20 years later, are domestic workers still living and working as if in the past? Or in other words, why do domestic workers still feel, as Joyce Nhlapo expressed so insightfully: “There is no freedom for domestic workers; we are still in prison, locked away in those houses. We are the workers that freedom forgot” (Ally, 2009:80).

The reality was and still is that though legislation turned servants into paid domestic workers and, formalising the employer employee relationship, settled their rights, domestic workers did not embrace those changes. Ally (2009) explained that:

[T]he formalisation challenged the informal relationship between ‘mistresses and maids’. Domestic work in South Africa disowned the democratic craft as it subjected them to the state’s ‘will to empower’. The domestic worker by refusing to sign contracts, or to be registered, refused to authorise the state’s effort at formalisation because it deligitimated their existing capacities of informal negotiation with their employers, a capacity exercised by the domestic worker since apartheid time. The

domestic workers utilised the intimacy of the work place as a way to independently control their work; they cultivated a personal relationship with their employer and used their employer's dependence on them to informally regulate wages and working conditions. They informally negotiated the limits of their employer's control over their labour, and strategically engaged in 'emotional work' as a tactic of class combat. In this work culture, they practiced power from the most unlikely of sites; the intimacy of their work (95).

The state formalisation efforts emanated from the presumption that the domestic worker is vulnerable, and therefore incapable of negotiating with the employer. This insensitivity to their capacities caused the domestic workers to challenge the state's efforts at formalisation. The domestic workers saw these efforts as an extension of the state's power at the expense of their own. Furthermore, the state's discursive construction of them as 'vulnerable workers' served the state's will to empower but did not serve the need to improve the life of the domestic worker. Domestic workers in response shunned the state's offerings (Ally, 2009:155).

The social context and its specific dynamic that is present in the domestic worker situation influences the creation of undesired differences, stigmatisation, and discrimination, as well as the domestic worker invisibility. These are social triggers which result not only in stigmatisation and economic strain, but also results in a strong cocktail of pressures being placed on an individual domestic worker and on her mental well-being.

Mohutsioa-Makhudu (1989) argues that chronic perceived racial discrimination was a primary factor that negatively impacted mental health (40). In Mohutsioa-Makhudu's article about the mental and psychological effects of apartheid on Black women domestics, she states that the policy of apartheid was a system conceived with the sole intent of keeping Black South African people in positions of inferiority and servitude (139). This position was psychologically devastating for the mental health of Black South Africans. She found that this subjugation was particularly evident in the lives of Black South African domestics. Mohutsioa-Makhudu, says that black women in South Africa suffer from a three-fold oppression: as blacks; as women; and as workers who largely form a reserve army of labour' (141). The three strands are interlaced.

From research done in a context outside of South Africa', Jackson et al. (2002) suggests that though there are no conclusive research results on the connection between racial

discrimination and diminished self-esteem, feelings of loss, learnt helplessness, and the elicitation of avoidance behaviour for psychological well-being, they nevertheless may interact with personality characteristics and particular coping styles, to affect health (7).

In South Africa, domestic workers form part of an oppressed group that is stigmatised according to race, gender and economics (Gaitskell et al., 1983:86). According to Williams (2008) there is limited population-based data on the current levels of racial differences and the domestic worker's subjective experience of discrimination in post-apartheid South Africa, or on the extent to which such experiences are consequential for health and the racial disparities in health. It is this gap that the proposed research would like to address. In addition, as a vulnerable and under-resourced group in South African society, health-care for the domestic worker rarely extends beyond primary health-care, and their mental health is often ignored by the health system (2).

Winkleby, Ragland, and Syme (1988) suggest that individuals may be more adversely affected by stressful situations when they deny the stress or suppress emotional reactions (130). In South Africa, we can perhaps surmise that African denial of stress or suppressing emotions is due to cultural ways of thinking. Ross (2010) says the stigmas surrounding mental health pose a major stumbling block when it comes to treating the disease in South Africa. As a result, sufferers are afraid of being discriminated against and are reluctant to engage in counselling that involves verbalisation of feelings, and they prefer seeking help from traditional healers (44).

Makanya (in press) states that the incapacity of the medical model to treat the ills amongst African communities and on the other hand the increasing need for it, calls for more creative and unconventional ways for communities to treat their ills and build resilience amongst themselves. In response to the rising need, Makanya (2014) says 'many arts therapists have begun collaborative work with community artists and organizations in order to support the development of community health and well-being' (303).

2.2 Considering the Narradrama method in working with African culture

African Culture uses oral tradition of story telling; *ntsoni*, explains Scheub (1970):

[I]s a fabulous story, unbelievable, a fairy tale, that is also the store-house of knowledge of Xhosa societies, the means whereby the wisdom of the past is remembered and transmitted through the generations, an image of private conduct and public morality, a dramatization of values, an externalization of the Xhosa world-view (119).

Narradrama as a method is based on narrative and uses drama therapy techniques with performative elements like role play enactment and embodiment. I therefore believed that it would serve as suitable method in working with an African group, in this research a group of domestic workers. I believed that by externalising⁵ their stories the participants could separate themselves from the assumed elements of problem in their stories (problem saturated stories⁶), and that this methodology might open a space for new choices to be brought up as a way to re-author⁷ their stories. Using their strengths they might be able to change the way in which they perceive the situation they live in, thus enhancing their self-identity and managing their lives in a more hopeful manner.

A second motivation behind choosing Narradrama as the tool for practice comes from reading Dunne (2010), who found Narradrama to be effective when working with diverse marginalized cultures to bring about change and transformation on a personal level through the re-authoring of stories (25). Narradrama could, it was assumed, assist in exploring how past and current history has influenced participants and is still contributing to their negative identity which is based on feelings of hopelessness, a sense of shame, and stress, anger and frustration.

Dunne (2010), who developed the method of Narradrama, reflects on her work with marginalised groups stating that marginalized groups usually experience a loss of voice, rendering their 'special knowledges' (i.e. the strengths and abilities of a particular group) invisible (30). In order to begin to restore a lost sense of pride, Dunne (2010) suggests that the Narradrama facilitator invites the expression of 'special knowledges' (30). Dunne noticed that marginalized individuals internalised negative views of their own group due to the

⁵ Externalisation - separating the person from the problem. Problems are easier to deal with when they are seen as external, rather than internal. Participants usually come in thinking there must be something wrong with them. Externalisation distances the person from the problem, enabling them to take a preferred relationship to the problem (Dunne and Rand, 2013:162)

⁶ Problem saturated stories - stories describe and shape people's life. We give meaning to our lives through the storying of experience. Problem saturated stories restrict the role and actions we perform because they filter problem free experiences from our memories and perceptions. (Dunne and Rand, 2013:14)

⁷ Re-author stories (restory) - when a participant modifies his or her internal narrative in such a way as to change his or her relationship to the problem and to the way of remembering and highlighting events from his or her story. (Dunne and Rand, 2013:168)

oppression by the larger society (30). In working with these groups, the facilitator is trained to listen for traces of positive skills and memories in the stories of oppression.

In listening for values in the marginalized group, the multi-layered nature of responses is revealed, which can be acknowledged and honoured by the group... These stories, which are multiple rather than single stories, can be revealed through conversations, enactments, and storytelling (Dunne, 2010:30).

Through the Narradrama processes participants learn to “diminish or modify these effects by recovering what they hold as precious, and tracing the development of their values and skills through the stories passed from personal, family, and social history”. (Dunne, 2010:30).

As a result, the marginalized case groups were found by Dunne to be united by the discovery of their strengths and skills, they became more connected, more supportive, and helpful. Dunne noted their growth through their personal statements, morals, enactments, rituals, and wisdom books.

Through the Narradrama process, these groups experienced change and, as their strengths and living skills became more visible in their lives, these changes created growth. Their growth, in turn, began affecting others in their community, who in turn transformed their roles from victim to those of facilitator, helper, and healer (Dunne, 2010:52).

Having located the context in literature of which the participants form a part, and then citing from research carried out on the effectiveness of Narradrama in working with marginalised groups, I now introduce the variable of identity as it presents in literature and explore how different definitions can be connected to the method of Narradrama used in the research.

2.3 Self-identity

The aim of this research was to ascertain the identity the participants hold and whether a negative identity was present in their stories. Secondly, it was to then use the Narradrama processes to assist the participants, if needed, to make a shift from negative self-identity to positive self-identity. Thus, in effect, an identity shift towards a more manageable and hopeful one. The therapeutic aim for participants in the Narradrama processes is to free them from social and personal restraints; from the narrow rigid problem stories that hold them back (Johnson and Emunah, 2009:176-177).

To achieve this shift, however, a theoretical exploration of the construct of self-identity is required. In initiating a further unpacking of self-identity, I referred to Dutton, Roberts and Bednar (2010) who offer a comprehensive overview of what self-identity comprises and means (265-293).

Their article offers a key theoretical description from which one can explain both the method and the results in this research. In their article, Gecas (1982) indicates that ‘identity as a construction of personal meanings’. This suggests that the participants may be able to work on shifts of these meanings that they attached to themselves, which suggests that any shift done must be by the participant. The next point is that the ascribed meanings may be ‘represented in narrative form’ (McAdams, 1993), and this connects us to Narradrama as a way in which these attributes, and alternative ones, may be revealed by the participants. The notion of identity being multiple, multifaceted and dynamic, speaks back to the choice of Narradrama as a method that can open a space for new role exploration. So, by engagement and reflection, new re-authored stories, with new meanings, can help shift one’s identity. The point of ‘making identity a complex and changing representation of self-knowledge and self-understanding’ speaks back to this notion of identity being changeable, which then supports the idea that a shift from negative to positive is possible.

If the aim of the research is to shift the meanings that an individual defines their identity from, one is required to develop an understanding of what influences the constructions of these meanings. Hence, the research will review the different perspectives theorised upon that explain identity formation.

As the article from Dutton, et al. (2010:265-293) offers, there are multiple perspectives researchers have found and theorised about, as being used to define and articulate how identities are formed. Considering that this research is dealing with a shift in identity, one must then understand what constitutes and contributes to the construction, and shift towards a more positive identity.

According to the article (Dutton, et al., 2010), there are four identity perspectives used to define **positive identity**: the *positive virtue* perspective, the *evaluate* perspective, the

developmental perspective, and the *structural* perspective (265-293). From reviewing each, we can identify which perspective is most suited as a theoretical position to work from.

From the article, a ***positive virtue perspective*** is derived from what is considered to be virtuous in a society (268). Research suggests that philosophers and religious leaders play a big role in setting these virtues.

[The ***positive virtue perspective***] usually focuses on the construction of identities with certain “master virtues” (Park & Peterson, 2003; Peterson & Seligman, 2004), such as wisdom, courage, humanity, justice, temperance, and transcendence...Religious and scholarly thought together suggests that these virtues are important in explaining the survival of the species (Peterson & Seligman, 2004) and in helping individuals construct a well-lived life (Weaver, 2006)...The universal significance of these virtues within and/or across societies over time is evidence of their inherent goodness and positivity. (Dutton, et al., 2010:268)

A key point of debate within this perspective is around whether these virtues are ‘stable self-constructions’ or whether they are fluid and changeable identities.

Some research on individual virtues and character strengths asserts that these identities represent stable self-constructions (e.g., Peterson & Seligman, 2004), whereas other research theorizes that this kind of self-construction is more fluid and based on how individuals narrate or define themselves in interactions with others (Sparrowe, 2005). (Dutton, et al., 2010:270)

Sparrowe’s (2005) view that speaks of the fluidity and interaction with others as influencing the way one defines self-identity (437) reflects the notion behind Narradrama that assumes that a person’s re-authored narrative indicates a shift in his identity formation (Johnson & Emunah, 2009:186).

The ***evaluative perspective*** is related to identity drawn from work-based experience which builds one’s self-worth and helps in creating a positive self-identity.

[The ***Evaluative Perspective***] focuses on the regard that people associate with their work-related identities. In general, people like to feel good about themselves (Baumeister, 1999; Gecas, 1982) and are motivated to claim identity characteristics and/or groups that favourably distinguish them from others (Branscombe, Ellemers, Spears, & Doosje, 1999; Hogg & Terry, 2000; Lynn & Snyder, 2005). As a result, the evaluative perspective captures subjective feelings of self-regard as an individual at

work (i.e., personal identity), as a member of work relationships (i.e., relational identity), and as a member of work-based social identity groups (i.e., social identity). It assumes that identities serve an important purpose for enhancing and/or maintaining a sense of self-worth (Gecas, 1982)...The evaluative lens captures how the sense of worth or regard applied to one's self definition (by the self or others) can imbue an identity with positivity. (Dutton, et al., 2010:270-271)

In this research the work conditions of the participants are assumed to be oppressive and therefore influence negatively on participants' identity. Therefore this does not correspond with the evaluative perspective as defined above, which assumes that the self definition is influenced by the way one is defined by others, which then may contribute toward one's self-worth and positive identity. Hence, this research assumes that the processes of Narradrama may open the space for participants to reveal their strengths, which may influence their self-worth and help them in shifting their personal evaluative identity towards a positive one.

The ***developmental perspective*** focuses on the proposed change in an identity or self-definition over a period of time and holds the assumption that identity is dynamic and changeable (Dutton, et al., 2010:271). This developmental perspective can be separated into two approaches: the ***progressive approach*** and the ***adaptive approach***.

[The ***progressive approach***:] According to this lens on identity, the positivity of an identity is evidenced in its progression toward a higher-order stage of development. Several influential theorists have sought to explain physical, physiological, and psychological development in individuals over time. Levinson (1986), for example, viewed the "life course" as a cycle composed of "qualitatively different stages," which he called "seasons." Although he asserted that each person passes through the same general stages, a person's experience in each developmental stage is unique. Each stage is associated with a set of developmental tasks designed to build the self, and each stage is separated by a period of transition that corresponds to the changing of the self. Over time, attitudes and behaviours are brought into alignment with the structure of the self, ever progressing toward the life dream or the ideal view of what the person hopes to become. Erikson (1968), Kohlberg (1969, 1984), and Kegan (1982) are some developed theories of development corresponding to different life stages. (Dutton, et al., 2010:271)

The developmental perspective supports theories of progressive development through life stages, tasks towards self-actualisation, and looks at the individual as a unit of development. However it does not reflect the immense influence of the social and cultural contexts within which a person's life develops. The South African context in relation to domestic workers operates as a suppressing context, which one cannot overlook when dealing with the

developmental identity of the domestic worker. These contexts interrupt and disrupt the personal development of an individual towards his self-actualisation. Therefore theories that developed from this perspective, like that of Erikson (1968), will have challenges in explaining, how people's self-identity might shift despite challenging life experiences which inflicted suffering and disrupted their normal personal development.

However this approach also supposes what Narradrama considers, which is that identity is dynamic and capable of progress and adaptation, allowing for a person's identity to change over time.

[The ***adaptive identity development***] ...suggests that individuals systematically alter the content of their identity to achieve a more appropriate fit with a set of internal or external standards. According to this view, some events, such as...role transitions (Ibarra, 1999), helps individuals see the need for identity change and encourages the creation of new identities or "possible selves" (Yost, Strube, & Bailey, 1992). (Dutton, et al., 2010:272)

The adaptive identity development view corresponds with the Narradrama view that the need for identity change will encourage the creation of new identities. Narradrama as a method can assist an individual in altering the content of their identity into a more manageable and hopeful one.

The fourth perspective offered in this article is the ***structural perspective***, which suggests that a positive identity is created from how an individual organizes, in a balanced way, the different facets of their identity.

The structure of an identity, or the way an individual's identity content or self-concept is organized (Campbell, Assan and, Di Paula, 2003: 116), constitutes another means through which individuals can construct a positive identity. Given the multifaceted nature of identity, an individual's identity structure is more positive when the multiple facets of the identity are in a balanced and/or complementary relationship with one another. Multiple identities can foster a "sense of meaningful, guided existence" created through the "reciprocal role relations" (Thoits, 1983:176) that sustain the identities making up the self in groups...Yet potential conflicts between the various facets of identity must be resolved in order to generate important psychological and performance outcomes (Campbell et al., 2003; Edwards & Rothbard, 2000; Rothbard, 2001). Accordingly, the structural perspective on positive identity calls attention to the different ways that individuals attempt to organize and structure their multifaceted identity content to reduce identity conflict. (Dutton, et al., 2010:273)

Within this perspective are two primary processes that are featured on positive identity structures; they are **optimal balance** and **complementarity**. (Dutton, et al., 2010:273)

Balanced identity structure

Some research suggests that the positivity of a person's identity lies in the relationship between personal identities and social identities. According to this approach, the personal identity is that part of an identity that is composed of the "characteristics of the self that . . . [set] one apart from all others" (Ashmore et al., 2004:82). In contrast, the social identity is a self-categorization into inclusive social groups or units requiring "a shift towards the perception of self as an interchangeable exemplar of some social category and away from the perception of self as a unique person" (Turner, Hogg, Oakes, Reicher, & Wetherell, 1987: 50). These two types of identities create structural "torsion" or tensions that require individuals to balance inherent desires for inclusion and belonging against the desire for uniqueness and differentiation (Branscombe et al., 1999; Kreiner, Hollensbe, & Sheep, 2006). Individuals who have identity structures that achieve a balance between assimilation and differentiation are said to be optimally distinct (Brewer, 1991), and this state of optimal balance is portrayed as positive because it allows the individual to fulfill competing identity needs (Kreiner & Sheep, 2009). Brewer (1991) asserted that people choose to identify with social identity groups that will enhance their optimal distinctiveness by clearly and favourably differentiating them from members of other groups (Dutton, et al., 2010:273).

Though the context is, according to the structural perspective, a contributor towards one's self-identity, one needs to acknowledge that within the processes of differentiation and/or assimilation, it is the person's choice how to resolve the conflict. Frankl, as cited in Meyer, Moor, and Viljoen (1993), argues that even in the most human degrading contexts, like the one experienced in the concentration camps in Europe during World War II, people who found meaning in these supremely horrifying conditions were capable of taking up the challenge to live with courage and dignity or die heroically (428-429). The rest lost their will to live. Frankl says that "more urgent than any other need (such as food and safety) was the need to find meaning and go on believing in something... In all circumstances, the *will to meaning* consistently emerges as the strongest motivator of human behaviour" (Meyer, et al.:1993:428-429, my italics). Frankl continues with: "the satisfaction of physical and psychological needs is not the ultimate aim of human striving, but rather the means of being free to strive towards spiritual goals" (Meyer, et al.:1993:429).

Frankl refers to Maslow's Hierarchy of Needs and Maslow's view that the lower needs (such as safety and security) must first be satisfied before their needs (such as self-actualisation) can emerge. According to Maslow, man wants to achieve a satisfactory standard of living

before he tackles the task of finding meaning and purpose in his life (Meyer, et al.:1993:425). The lower needs therefore take precedence and are more important than the higher needs. Frankl points out however that there is confusion here between the means and the end. Frankl says that:

Maslow's distinction between higher and lower needs does not take into account that when lower needs are not satisfied, a higher need, such as a *will to meaning*, may become more urgent (Meyer et al., 1993: 425, my italics).

Frankl's view inspires a hopeful view in relation to the participants of this research as it opens a way for South African domestic workers, who we assume live in an oppressive, racially discriminative context, to shift their self-identity despite the ongoing harsh realities in which they live. Even in a negative structure, there is a hope in the *will to meaning*, which opens up choices to shift a person's identity into a more hopeful one.

Saying that, this research postulates that the domestic workers' group participants, who are part of a racially discriminated group, may have developed **negative identity**. Phinney (1989) pointed out the likelihood that members of an 'oppressed and exploited minority' (34) may internalize the negative views of the dominant society, thereby developing a negative identity and self-hatred. Cross (in Vandiver, et al., 2001:72) says that the term Black self-hatred, which can be defined as a Black person's hatred of the self because of race, has a long history in the discourse on Black identity. Clark (Clark & Clark, 1950) stated that scholars believed that Blacks' preference to be White was indicative of self-hatred, and thus, reflective of an identity problem (350). Though negative identity is assumed to be found in the South African context, we can be hopeful, when relating to Frankel's *will to meaning*, that the assumed oppressed domestic worker will find new choices to build a new positive identity.

2.4 Self Identity and Roles: Perspectives in drama therapy

In the previous sections, the literature review uncovered the contextual background relating to the participants of this research. Then in relating to the variables of self-identity, looked at how literature defines identity and how a shift in identity can work to the benefit of a person. The literature also warns of the risks associated with negative identity, which gives strength to the need for work towards shifting identity in an assumed oppressed community in the

South African context. As we are dealing with drama therapy in this research, this section will relate back to the theoretical framework of Narradrama as a drama therapy method, to unpack and give some explanation of the processes used to achieve a positive identity shift.

Jones (2007) unpacks the relationship between identity and drama therapy. Jones locates the key shift in the contemporary understanding of the concept of identity through citing Strozier, who accentuates that:

‘[I]dentity’ is not simply an internally held entity but is to be seen as a combination of the interiority of self-experience and self-knowledge, along with the self that is perceived through relations with such grouping as race, by virtue of being *in relation* (74).

Jones (2007) then further explains that the point that relates to the self as being *in relation* is where drama therapists, such as Jennings, Jonson and Lady, find connection to drama therapy (Jones: 2007:74-75).

Here we can see the way in which form and philosophy entwine each other. Active methods...from role play to group improvisation to play-based work, could all be said to have an innate connection to the philosophies of the self as described above. They emphasise connection and interconnectedness as formative and forming the individual, those around them and the contexts in which they live (Jones: 2007:74-75).

Jennings (2011), when speaking about the embodied self in infants, says that: “our embodied experiences from conception, and continuing through our early lives, sets a marker of how we will develop: self-confidence, resilience, communication, generosity, empathy, trust and hope” (19) and that all have their early roots in our bodily experience. Jennings (2011) expands on the importance of the dramatic development in infants and says that it is essential not only for healthy attachment and resilience but also for identity and self-esteem (26). Importantly, it is also for the process of social integration into culture in which, one feels that he/she belongs to a social network with his/hers own role norms, expectations, and rules. It is this reference to the cultural norms and social role that links back to Strozier’s notion of identity being *in relation* and Jennings takes it further by showing how this relating is so deeply embodied from a young age.

Holding this embodied consideration in Jennings' work (2011), we appreciate that the body is a primary means of learning and early somatic experiences influence later physical and cognitive growth (30). Jennings (1997) explains that:

[A]rt and dramatherapy both work at a primary feeling level and are both potent forms of intervention with individuals and groups...the body and its experiences, are intrinsic to and the starting point in Dramatherapy (85).

This is captured by Macey (2000) who says that individuals construct "bodily schema" from their memories and held perceptions, which contributes towards the formation of self. The self is not just an embodied intellect but also a perception of the world (248).

To address these constructions, an approach or therapy must then also be layered and complex. Drama therapy, which has developed in a multidimensional way, can address this embodied complexity. "Art therapies assist people to reconnect to their bodies and to discover their hidden self - the body that is not seen" (Jennings, 1997: 85). In this research the embodiment and enactment activities which formed part of the Narradrama processes aimed at assisting participants to reveal their "hidden" self identities through their new stories.

The concept of self identity in drama therapy has also been conceptualised by Landy through role. Landy's Role theory advocates a position where the self is seen in terms of role, as "multifaceted, derived in part from the social world and essential in building the human personality" (Landy, 1994:380) as well as "the human condition is in part one of living simultaneously within paradoxical realms of mind and body, thought and action, subject and object, actor and observer" (Landy, 2001:380). Landy contests the concept of self as described by philosophers, theologians, poets, and humanistic psychologists and says that looking at the concept of self "as monolithic, monotheistic, and authentic oversimplifies the human existence... In a culture of multiple choices one needs a way to think about or play out the different parts. One way is through Role." (Landy, 1994: 21-22)

Jones (2007) in relation to Landy's Role theory, concludes that Landy sees the role as the base for drama therapy practice and the self as the individual identity that is multifaceted, responding to complex multiple situations, and reflexive; in that one part of the self can look

at and change another part of the self (76). Landy's point of view of the self being able to change is an important thought in this research as it speaks to the benefits of identity shift.

Burke and Reitzes (1981) also wrote on the link between the concept of identity and the concept of role. They found that the impact of identity and role performance suggests that:

...given an opportunity to engage in some activity or some set of activities, a choice must be made. Identities influence the choices made. The activity that results from the choice has meanings that correspond to, reinforce, and display the identity meanings of the individual. The choices can exist at the level of roles (Burke & Reitzes, 1981:91).

Taking Burke and Reitzes' (1981:91) and Landy's (Jones, 2007:75-76) positions on the connection between identity and role, we can see that in Narradrama identity is played out through roles identified in one's story. Narradrama is based on the premise that identity is fluid and can change through narrative-change, and that this can be achieved by a new description of identity; the ability of a client to reveal his personal agency; things he appreciates about himself, which help him throughout the processes to eventually re-author his story (Dunne & Rand, 2013:165-168). According to Dunne and Rand (2013) through a series of warm ups, like 'preferred words', in which a person chooses words that he finds attractive and then says something important about himself, one can explore aspects of his self which are changing and evolving constantly (145-148). For this research it is important to note that Narradrama also uses such exercises that substantiate self worth because of the assumed negative (oppressed) identity of its participants. Other examples from Dunne which achieve this include 'Face self portrait', in which a participant paints the things he especially appreciates about himself, and 'Body drawing', where participants in the group are called upon to draw or attach symbols of things that they appreciate about the other, this further develops a participant's appreciation of his strength (Dunne & Rand, 2013:145-148).

This research sought to open a space for its participants to find new choices, new meanings, through Narradrama processes. Dunne (in Johnson & Emunah, 2009) says that:

[I]n Narradrama the improvised and evolving story invites the participant to discover alternatives and exceptions. Uncovering alternative stories assists participants to re-story their lives. This act of spontaneous creation helps participants to move forward. The situations in which the problem was overcome are referred to as *unique outcomes*. Through unique outcomes, participants can be encouraged to enact

performances that change their perceptions of life and weave these into alternative story (182).

Hopes, beliefs, dreams and visions can be linked to new descriptions of identity, allowing participants to see themselves and their actions from different perspectives, and thereby free themselves from the problem saturated stories that have held them back (176).

Landy's (Jones, 2007) Role theory offers, to the theoretical framework of this research, that the self is seen to consist of different components. Landy advocates a position where the self is seen in terms of role, as 'multifaceted, derived in part from the social world and essential in building the human personality' (Jones, 2007:75). In that, Landy's Role theory corresponds with the *structural perspective* of positive identity which acknowledges the multifaceted nature of identity structure and which asserts that multiple identities can foster a 'sense of meaningful, guided existence' (Dutton, et al., 2010:273). Landy's (Johnson & Emunah, 2009) Role theory further corresponds with the *structural perspective* theory in that a positive healthy identity incorporates new roles into one's identity structure which then helps one to live with conflicting roles (73). For the participants in this research this is important because the moment they realise that they can assume different, more positive roles, as opposed to the single, rigid role of domestic worker, we can then assume that they could present a more positive identity.

Taking into account the danger inhabited in these negative identities, the researcher postulates that if a negative identity will be found in participants then Narradrama, a method that yielded good results working with marginalised groups (Dunne, 2010:52), may be effective in helping a group of South African domestic workers shift towards a more positive, healthier identity.

Though there are records of research into the effectiveness of Narradrama in working with marginalised groups, there is no record of research done with South African marginalised groups. Along with the earlier stated aims, this research also aims at addressing that gap.

Thus to conclude, Narradrama as a drama therapy method, parallels the *structural perspective* of positive identity as it helps participants connect emotions, body and intellect. It helps them explore personal, social and psychological problems by encouraging creativity as well as imagination and role playing, Narradrama helps participants re-examine and redefine their

self descriptions and internal narratives. It then leads participants to discover new insights through the expression and expansion of roles. Roles therefore offer empowerment to the role player.

2.5 Theoretical framework

Landy's Role theory serves well as a theoretical basis to explain some of the processes of the westernised method of Narradrama. Landy, as cited in Johnson and Emunah (2009), defines a healthy person as one who is 'noted by an ability to live with ambivalence, contradictory tendencies and paradox.' (73) This healthy person is characterised by an 'ability to take on many, if not most, of the roles in the role taxonomy and to play them out in everyday life with some degree of proficiency.' (73) Role theory, in this regard, maintains that a person is made up of the various roles that they play in the world. The unhealthy person is:

one who has given up the struggle to live with contradictory tendencies and has instead embraced one role or a cluster of related ones to the exclusion of all others...they are also unable to internalize and enact a number of roles competently. (Johnson & Emunah, 2009:73–74)

Interventions based on this theory would firstly work on increasing role repertoire, that is, encourage clients to rehearse and eventually take on different roles. Clients are encouraged and are helped to find balance among their roles, making the roles exist in harmony with one another thus helping them gain mastery over their given and chosen roles. Landy's post-modern view of the self parallels the Narradrama concept of a constantly changing and evolving identity. Expanding one's role repertoire and exploring different roles can open ways of thinking and relating to others in healthier and preferred ways. Landy (2008) states: "the individual is not one thing, a core self, but multitude of roles that exist in relationship to their several counterparts" (103).

Landy's concept of Role repertoire can explain what happens in Narradrama. 'Remembering conversations'⁸ are formed on the basis of the conception that identity is based on 'an association of life' rather than a core self. In effect, those roles are not innate but are developed through relationship. Roles that become part of our identity are formed from the

⁸ A term defined by Michael White (1989) to describe the idea that people's identities are shaped by a 'club of life'. The idea is that members of our club introduce how we come to experience ourselves. The person/s whose views matter to us the most influence our identities most significantly. (Johnson and Emunah, 2009:175).

associations we have had in life with significant others whose voices have been influential in constructing our identity (Johnson & Emunah, 2009:175). The point that our identity is influenced by significant others may be relevant to the participant group of this research who come from an African culture context.

Makanya (2014) explains that in an African culture the self is defined as multiple (304). The self in African thought is dialogical as it emerges from the exposure to other's voices. Once they are internalised "these voices continue to dialogue with each other on an on-going basis" (Mkhize, 2004:73). Consequently, says Makanya (2014) "the human being is never alone; he or she is constantly in dialogue with the surrounding environment." (304).

Makanya (2014) suggests that we realise that Role theory also helps us to understand some of the dynamics that exist when using a westernised method with African cultured people (304). Makanya (2014) compares and finds parallels between drama therapy and the African view of what it is to be a human being. She explains that, to a point, it is similar to role theory in that, in both, there is the notion that the human being is made of a community of selves (304). The self is multiple, "each person carries with them an ancestral (spiritual) component, the present self, as well as selves yet to be born" (Mkhize, 2004:80).

Makanya's (2014) view is that Role theory may act as a bridge between drama therapy and the African world view, and on the basis of that notion, this research will use Role theory as a theoretical framework from which to understand and analyse the domestic workers' stories and their re-authored stories as the basis of self-healing (304).

2.6 The Narradrama Approach: Concepts and Techniques to improve Self Identities

Narradrama combines Narrative therapy and Drama therapy. It helps participants re-examine or redefine their self-identities; their internal narratives.

Drama therapy leads to new insights through artistic expression and the expansion of roles. The ability to participate in pretend or transcendent activities (Stanislavski's '*as if*') helps participants to open the door and move away from problem-saturated descriptions. By functioning in the '*as if*', participants can transcend immediate

reality and transport themselves in time and space. Roles offer empowerment to other role players...By functioning in the '*as if*', participants start reverberations that transcend life circumstances, generating a sense of competence and agency. In Narradrama, theatre and role playing is at the core of the processes' (Johnson & Emunah, 2009: 176).

And Dunne (2010) explains that these core processes are what help a participant further explore or expand a story issue or problem. (26)

The therapist then helps the participants, in a non-directive way to expand awareness, express emotions and discover alternative problem solutions. Narradrama processes aim at identity change (Johnson & Emunah, 2009:178). Therefore, if identities influence the choices we make, and the choices exist in roles, we can assume that Role theory can explain the process of acquiring new identities through Narradrama.

In Narradrama, roles may be defined as problem saturated roles, unique outcome roles, alternative roles, and preferred roles (Johnson & Emunah, 2009:188). These broad role categories may correspond with Landy's taxonomy of fictional archetypal roles (188). Exploring roles in this way encourage the search for alternative solutions, new possibilities and the preferred path for the future. The impact of identity has on participants' performance and roles, links to this research – for in Narradrama the improvised and evolving story invites participants to discover alternative ways to deal with their problems. Drama therapy, says Dunne (2006), encourages creativity and helps participants in the re-examining and redefining of their own self-description and internal narratives. Through this process of drama therapy, individuals can be led to new insights through the use of artistic expression, and expansion of roles (27). In taking part in different roles, the problem saturated description can therefore lose its power. Drama therapy and therefore its method, Narradrama, can also be regarded from a performative psychology theoretical framework as, through stories acted out during Narradrama, the participants are able to connect with their emotions, body, and intellect, enabling them to explore personal, psychological, and social problem areas (Johnson & Emunah, 2009:176).

[By] uncovering alternative stories participants are assisted to *restory* their lives. The act of spontaneous creation helps participants to move forward. Situations in which the problem was overcome are referred to as *unique outcomes*. Through unique outcomes participants can be encouraged to enact performances that change their perception of life and thus weave an alternative story...By inviting personal creativity

in the mapping and acting out of the alternative story, the participant becomes more in touch with other possibilities and begins to experience a shift. Dramatising unique outcomes assists the drama therapist and participant in the creation of a new landscape of action and identity. (Johnson & Emunah, 2009:182)

Therefore, in Narradrama the playing of roles assists participants to begin to question their choices, enlarge their perspectives, discover a new identity description, and experience what it would feel like to move forward in their lives in preferred ways toward their hoped for futures (Johnson & Emunah, 2009:188).

Vygotsky, suggests that social growth is mainly caused by social interaction (Eloff & Ebersöhn, 2004:408). He explains, as cited in Moran and Steiner (2003:6) that development is not a process undertaken alone. He believes that a person learns and develops through social interaction with others. This relates to the viewpoint that ‘development occurs inter and intra psychologically’ (Fritz, 2011:117). The social constructivist perspective emphasises the important role that social interaction plays in the development of an individual and it played a crucial role in informing my understanding, of how sessions should be conducted. It was important that the research session provided space for social interaction through which participants could interact and shape their new identity.

To conclude, we can relate to Role theory and Role taxonomy in understanding participants and their stories (problem saturated stories and the shift to re-authored stories) through roles played and through assumed roles that might have been taken on if shifts that would have happened. Landy’s Role theory connects role and identity and then if shifts are noticed in the story we can assume that different multiple roles have been taken on, which according to Landy, is an indication of a healthy person (Johnson & Emunah, 2009:73).

Chapter Three: Research Methodology

3.1 Method: Narradrama as a unit of inquiry

The aim was to explore Narradrama as a unit of inquiry; to explore its efficacy in assisting to shift identity among a group of South African domestic workers. During the interventions, which used Narradrama processes, the focus was on observing the participants as they used activities such as: the self-told story and its enactments and embodiment, the use of movement, the use of projective play, and role play, and to try to identify any possible shifts that were occurring as a result of these activities. Through these activities participants gained new insights and meanings which were reflected in their re-authored stories.

The participants' self-told stories are used in Narradrama because of story's characteristic of holding meanings or perceived "truth" which shape personal identity (Neill, 2008:135).

According to Neill (2008), "home stories" hold the weight behind the meanings in one's identity formation, which she further says "...form a substantial body of largely unconscious material that provides the framework for what we may recognise as personal identity" (142).

In achieving any shift in meaning though, the researcher had to be aware that these stories:

...can be extremely well guarded by what William James referred to as sentiment of rationality. This is a feeling of 'rightness' given to an opinion that then becomes, for that person, the only one accepted rational. Although other opinions and explanations may exist, the one chosen is the best liked and defended against all others...Any arguments usually cause these people to cling more stubbornly to their opinion and in fact this sentiment of rationality is very resistant to logic and rational talk (Neill, 2008:135).

Noting this however, Neill (2008) points out the value of stories in using the creative arts as a means of safely and effectively challenging these guarded meanings. Neill locates key points around how stories can be effective in circumventing these "home stories" by appearing non-threatening as they seem non-invasive, while also being able to engage the conscious and unconscious minds simultaneously (135-136). So much so, Neill (2008) suggests, that while the conscious mind may think a story is "not about them", the unconscious may think the

complete opposite. This is because: “[s]tories can speak directly to the inner mind through symbolic picture language and can provoke the same kind of dawning insight to occur” (133).

Neill speaks to this quality of story which is parallel to working with a distanced method within Drama therapy processes, and which also speaks to the value of story in Narradrama processes. This non-invasive quality heightens the value of story for the client, who may realise its meaning immediately or later on, as Neill explains further:

[T]he distinctive feature of the story is that...its inner content stays with the listener long after the story is done, and in some cases the person will not be aware of its external significance at all, until an event in their life parallels the story in some way (2008:139).

Thus, in this research such stories were elicited and evoked through distanced methods of projective play. Dramatic projection can be described as one of the processes that lie at the heart of Drama therapy. “It enables the client to project inner conflict into dramatic material and it allows the problematic areas to be connected to the healing properties of drama” (Jones, 2007:154). In Narradrama, drama activities which make use of objects play an important role in the data collection. The reflection after an object play can reveal the meaning and significance of the objects (Hatch, 2002:120) and can also provide insight into the way participants think and act (Hatch, 2002:117). Any kind of object can be used to evoke a projected story. Puppetry and masks can also serve as a vehicle for projection (Jones, 1996:145). In this research the objects were mostly provided by the researcher, except for in session seven, where the participants were asked to bring an object to represent an inner strength and that which would help them to move forward.

In understanding embodiment in Drama therapy, and Narradrama as a drama therapy method, Phil Jones (1996) writes:

Embodiment in dramatherapy [sic] refers to the way the self is realised by and through the body. The body is often described as the primary means by which communication occurs between self and others...this is through gesture, expression and voice (Elam, 1991). Attention is given to the way in which the body communicates on an unconscious as well as conscious level. (1996:113)

[Embodiment is] the body physically encountering material through enactment and combines the knowledge to be gained through sensory and emotional feelings with the knowledge to be taken from more abstract reflection (1996:114).

In this research participants engaged in embodiment in session six, where, through embodiment, they took their first step forward to achieving their dream. Jones (1996) says that:

[E]nactment is used in Drama therapy to achieve change. This process is concerned with the way in which freedom to explore personal material can be created within the changed, disguised use of the body. In taking on a dramatic identity an individual can move, speak, respond and feel differently. The physical change can create a freedom from the usual identity held by the client, and from their usual codes, rules and pattern of experiencing the self and their relationship with others and their situations. This freeing can open up new ways of being, behaving and relating. It can offer the client opportunities to connect experiences made whilst in disguise, or in dramatic identity, with those of their real life. The physical change in identity and their experiences in the dramatic world can result in a change in the client's usual identity and real life (114).

For example, the use of enactment is exercised in session six, where the participants engaged, through embodiment, with the role of a change initiator. They took on this role and exercised their first step in achieving their dream. In session seven they embodied and enacted a situation from their real life. They exercised the inner strength which they had shown previously in session six and dealt with a real life situation through enactment in session seven. They used their inner strength as one might use different more positively coloured glasses in dealing with their reality.

Role play in Narradrama is at the core of the processes that help a participant further explore or expand a story, issue or problem. The therapist then helps the participants, in 'a non-directive way, to expand awareness, express emotions and discover alternative problem solutions.' Narradrama processes aim at identity change (Johnson, 2009:177-178).

In practice however, these processes, embodiment, enactment, role play or any other activity, should not be dichotomised as they are interlinked and develop throughout the dramatic processes. Phil Jones speaks to this point and suggests that a continuum perspective be used when considering these processes in action.

Jones (1996), referring to movement, says 'he does not like to make such a clear distinction between projected work and other dramatic areas. He prefers the notion of the continuum as

this permits movement into a different part of the expressive range without demarcating one area as being projected and another as not being part of the projected area.' (143)

Jones (2007) says:

Dramatherapy tends to echo Peter Slade's approach in seeing play as a beginning and as a part of dramatic activity. In some work the activity is mainly focused in play activities, while in others there can be a mixture of play and more developed dramatic activities such as role play. (168)

Jones (2007) develops this idea and says that:

[I]n dramatherapy it is also possible to work with this notion of the small world as part of the dramatic continuum. The work with objects can be developed into role play, improvisation and movement activities. This can be used to amplify, extend, initiate and develop the small world work. (152)

The notion of a continuum as expressed by Jones parallels the way Narradrama processes are activated as techniques are used that are derived from narrative therapy, Drama therapy and the creative arts (Dunne & Rand, 2013:6). With this eclectic use of techniques, Narradrama assists clients via its exercises to engage and take on new roles using the strong parts of themselves, that were previously suppressed, to achieve identity shifts. They do this by re-storying their life experiences in sessions, with the intention that their new stories of hope will assist them in embarking on a new life path (Johnson & Emunah, 2009:188).

Jones (2007) explains the importance of role playing in that:

[R]ole play in dramatherapy is a much more complex affair. There are many ways to adapt the idea of playing a role to suit the needs of clients whether in individual or group therapy. Roles can be played to rehearse life situations, to practise or develop skills or personal qualities such as confidence or communication. (192)

In this practice based research, the use of a phenomenological research design enabled the researcher, as Flood (2010) explains, to gain knowledge about the participants' realities which are influenced by the world they live in; their lived experiences, their current identity and their shift in it (13). The choice of Narradrama as a method of inquiry suited the culture of the group of domestic workers as in this method participants are free to explore their lived experience through using their own stories and language to express themselves, thus allowing the new meanings to emerge.

3.2 Research paradigm

This research used Narradrama as a practice-based, qualitative exploratory research method. This is not a text based research but an experiential phenomenological one which aims at exploring the phenomena of identity shift. Nevertheless, though it is an experiential phenomenological practice based research it is guided by the theoretical framework of Landy's Role theory.

In this research the method of Narradrama was practised with a group of domestic workers and as Narradrama incorporates techniques like projective play, creative arts, embodiment and enactment, theory proposes that domestic workers will realise new knowledge, and understandings which will assist them in giving meaning to their lives.

3.2.1 Practice based research

This research is Practice-based research. As mentioned earlier, Practice-led research and other practice-based research descriptions capture the methods artists, and other art-based practitioners, use to explore, express and communicate their views. These are evident in the new roles and responsibilities these researchers are taking on within institutional settings (Sullivan, 2005:43). In further unpacking this position in academia, Sullivan (2005) writes:

Research was thus described as

[C]reative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of humankind, culture and society, and the use of this stock of knowledge to devise new applications. (OECD, 2002:30).

Variations of this definition are found in many of the early reports, position papers and university policy statements prepared in support of the argument that creative arts' practices can be rationalised as a form of research because of the unique contribution made to the generation of new knowledge. (Sullivan 2005:43).

In this regard, this research aims at generating new knowledge through practice. Here, this practice being the carrying out of Narradrama processes with South African domestic workers with the intention of achieving positive identity shift. The key component to this

research is that without the processes actually being done, there would be no way of assessing and establishing any results and thus locating the new knowledge. To this point, Sullivan (2005) cites the Arts and Humanities Research Board, which articulates that:

This type of research [Practice-based research] thus aims, through creativity and practice, to illuminate or bring about new knowledge and understanding, and it results in outputs that may not be text-based, but rather performance based using music, dance, drama, design, film, or exhibition (Sullivan, 2005:47).

A point to consider here is that the outputs that emanate from this research would be the new, re-authored stories the participants create, which would assume to indicate a shift in identity.

3.2.2 Qualitative exploratory research

This research, being a practice based research, is also a qualitative exploratory research. This methodology was chosen for this research as it produces understandings which come from the participants' world view (Mack et al., 2005:4). This is an important factor in this research as we are exploring participants' self-identity with the aim that the participants, through processes of Narradrama, will be enabled, if needed, to shift their sense of self-identity to a positive healthier one. Exploratory research relates to the interpretivist/constructivist paradigm that focuses on how individuals create meaning and interpret their life experiences.

3.2.3 Phenomenological design

In this practice-based-research, being based in drama therapy, the researcher employed a phenomenological design in order to explain the phenomena.

Phenomenological design is anchored in practice-based-research. It involves a variety of methods which can be used in:

[P]henomenological-based research, including interviews, conversations, participant observation, action research, focus meetings and analysis of personal texts. If there is a general principle involved it is that of minimum structure and maximum depth. In practice it is constrained by time and opportunities; it must strike a balance between keeping a focus on the research issues and avoiding undue influence by the researcher. The establishment of a good level of rapport and empathy is critical to gaining depth of information, particularly where investigating issues in which the participant has a strong personal stake (Lester, 1999:2).

Flood (2010) explains that phenomenology is an “interpretative qualitative form of research that seeks to study phenomena that are perceived or experienced. It offers means by which to identify the essence of the experience” (13). In addition, phenomenology can be defined as the study of a certain realm in that it studies the experiential world of an individual (Giorgi, 2010:5). The phenomenological design is thus the exploration of the essence of lived experiences (Van Manen, 1990:5). In this research it refers to the experiential, lived experience of the South African domestic worker. Van Manen (1990) explains that the everyday lived experience of human beings relates to the way they find themselves in the world and the way they give active shape to their world (9). Rather than relying on generalizations and theories in the traditional sense, phenomenology, explains Lichtman (2006), is based on the description and understanding of the lived experience of one or more individuals who have undergone a particular experience (98).

3.3 Research Design

The group met once a week; on Saturdays, at 12 noon. Each member in the group used public transportation. There was no remuneration for participation (see consent form for participation, in Appendix 2). Our sessions were held in the conference room in the SAMWU (South African Municipal Workers’ Union) building in Marshalltown, Johannesburg.

The processes took place once a week for seven sessions at Saturday lunch time, as this was the domestic worker’s day off. The overall process was spread over a period of about five months. The entire process took longer than anticipated as the December holidays fell between sessions and the domestic workers went on holiday to their respective homelands. Apart from that there were times when the group could not do processes as group members were sent by the Domestic Workers’ Union for a whole weekend to recruit people throughout the Gauteng area. Processes were eventually resumed towards the end of January and finished by the end of February.

Four sessions were held before the break and in those sessions the group established its cohesiveness, brought up their problem saturated stories and created externalised problem

masks as part of the process of externalising their problems. The processes after the break picked up from where we left the previous session, and the main event dealt their dreams (expressing their preferred outcome) through embodiment and enactment of their dreams as well as a reflection on the process.

This intermission was inevitable due to the limited free time available for the group participants. Their free time was mainly devoted and prioritised to their duties of expanding the work of the union and recruiting new members. Then the December holiday came about and the group members each went to their respective homes. Though meetings were postponed, we all kept in touch and kept trying to find appropriate time to resume the processes. The head of the union liaised with other members and myself throughout this time, and kept me informed of the situation while also trying to arrange a new schedule for the processes. Everyone kept on reiterating that they missed the processes and would like to continue with them as soon as they could.

When we finally resumed the processes, in January 2015, and due to the long break we started the 5th session (Appendix-1) with a longer check in activity in which each group participant expressed her feelings about the holiday, and then they all shared their gratitude and content that the sessions could be resumed. The warm-up activity that followed helped in revitalising and reconnecting group members as well as helping the participants focus and move on to the main event process.

The purpose of this qualitative study and the data collected from its group sample can be used to gain insight into how Narradrama interventions can assist such a group of domestic workers to shift their self-identity. However, the findings cannot be generalised to the greater population of South African domestic workers or to people in this profession world-wide. This will be further discussed in the limitations section.

The research questions apply to the specific population group selected for the study. I have used convenient sampling, which carries the risk that a vulnerable population might be exploited. However, I have tried to eliminate that risk and made provision to treat any emotional need that may arise by providing the participants with an opportunity to engage with a Lifeline counsellor. This was the only therapy available that I could arrange.

The processes were designed to firstly create group cohesiveness, then to establish group boundaries, and trust. The sessions, thereafter, were designed to work on the specific stages of Narradrama processes which deal with and include: the participants' inner and outer strengths, problem-saturated stories, externalisation⁹ of problem-saturated stories, preferred future¹⁰, and unique outcomes¹¹. These are unpacked in greater detail in the session outlines and in Appendix 1.

These qualitative data collection processes used different distancing methods: object play, enactment and embodiment, drawing and creating clay sculpture, living sculpture, and role play, to work through the stages of the Narradrama processes.

All the techniques mentioned above in the method section, with the exception of verbal reflection, are drama therapy distancing methods. Jones (2007) says in drama therapy processes:

[I]ndividuals can take on a fictional character or role, play with small objects, create scenery or enact myths. As this happens they project aspects of themselves into the dramatic material. A theatre miniature is created within the group and within the self.... [F]or drama therapy, the importance lies in the way in which this phenomenon of dramatic projection creates a vital relationship between inner emotional states and external forms and presences (83).

In the expression and exploration a new relationship is created by the client with the material and from this the reintegration of material can occur. The shift that happens to the client in the play is therapeutic (Jones, 2007:89). In this research I expected that the use of these distancing methods (as mentioned above) would help to explore the therapeutic aims of this research and, if necessary, would assist in shifting the domestic workers' identity from an invisible, oppressed one to a visible, expressed, positive one.

3.3.1 Sampling

⁹ Separating the person from the problem; Problems are easier to deal with when they are seen as external rather than internal. Participants usually come in thinking there must be something wrong with them. Externalisation distances the person from the problem, enabling them to take preferred relationship to the problem.

¹⁰ Possibility picture depicts preferred future. It is especially useful when two or more possibility pictures are used to illustrate alternative choices and decisions.

¹¹ Usually there are times when people are not controlled or dominated by the problem. The therapist/ facilitator encourage examination of these unique outcomes because unique outcomes often suggest new approaches for solving the problem. (Dunne, 2013: 162-168)

The type of sampling used in this research was the convenient sampling method, in which, participants who are available are selected without prior rationale.

The sample size was nine participants. In a qualitative research study only a small number of participants are selected as the participants' experiences are acknowledged to be unique (Locido, et al., 2010:28). The limited number of participants allowed for an in-depth exploration of the participants' lived realities. A small sampling also allows an in depth investigation of their experiences within a single context. Although these findings are not representative in a statistical sense and therefore cannot be generalised, they are likely to be transferable to similar contexts (Terre Blanche et al., 2006:50).

The Union of Domestic Workers of South Africa (UDW) facilitated the formation of a group of nine black adult female participants. These domestic workers, aged from 34 to 65 years, all currently live on their employers' properties in different suburbs of the greater Johannesburg, Gauteng area; except for the Head of the UDW who was part of the group of participants. She is a retired domestic worker who, since 1986, works as the Head of the UDW. All of the group members come from different rural areas throughout South Africa.

This was a closed group of participants and the attendance at each session fluctuated between five and nine people. This fluctuation was partly because the group was made up of unionised domestic workers who have duties allocated to them by the UDW, (which serves as a mediator between domestic worker and employer when needed and informs domestic workers on their rights). UDW members are sent to different areas of the Gauteng region to recruit new members for their Union group. Saturday is the only day they can spare for working at the Union and thus this affected their attendance at the interventions.

3.3.2 Data Collection

In this research, observation (videotape recordings) and literature functioned as the primary resources, as well as secondary resources which were the journal writings, as methods of data collection.

Data collection in a qualitative research aims at providing evidence for the experience under investigation (Polkinghorne, 2005:137). Data collection, says Leatham (2005), can be informed by methods that are implied by a phenomenological study, which leads to thick descriptions of participants' lived experiences (15).

Phenomenology is especially interested in what it terms the self-world relationship. All people exist in a dialectical relationship with their lived world of experience, and there can be no clear separation of self and the world, or subject and object. The lived world is in no way the same as the physical environment, but rather the world of personal experience within which the person lives (Terre-Blanche et al., 2006:463).

Drama has always contained multiple perspectives and embraced the complexity and contradictions of life experience. Both drama therapy and Narrative therapy maintain an evolving, relational view of the self that is continuously developing in different social contexts (Dunne in Johnson & Emunah, 2009:177).

Qualitative data collection can be done in various ways (Marshall & Rossman, 2006:53). The focus of the study should determine the data collection method involved. "Qualitative methods are specifically constructed to take account of the particular characteristics of human experience" (Polkinghorne, 2005:138). In this research different types of data were collected on videotape and through journaling, which captured the processes that had been used in different distancing methods: object play, enactment and embodiment, drawing and clay sculpture making, living sculpture, role play. Listed techniques were applicable as the research question involves the use of Narradrama activities which are the driving force for utilising objects and other distance techniques as data collection methods. The other distance methods which were used throughout the Narradrama processes centred on stories.

The processes were video-taped. These videos were used for data analysis. Written journals detailing the processes were also used to compensate for the information on emotions and happenings that the camera could not pick up.

Hersen et al. (1984) mention that audio/video recordings are widely used as mechanical assessment options (72). In their opinion:

[S]uch devices evoke reactive effects only to the extent that they are actually perceived by the clients in the setting. Although they do not usually facilitate the direct coding of behavioural data, audio/video recordings provide a completely stable,

permanent record that can be saved for encoding at a later time. As Haynes (1979) points out, difficulties in an observation system can be ironed out, inter-observer reliability assessments can be performed, and a new hypothesis investigated without loss of the actual events (Hersen et al, 1984:73).

Videotape records are in order when both verbal and non-verbal client behaviour are of interest. Videotapes may be viewed and coded at the researcher's convenience and assessment can be made based on them. In order to reduce reactivity effects and ensure representative behaviour samples, Anders and Sastek, (in Hersen et al 1984: 74) suggest the use of a preset timer when doing video recordings.

Data collection for this research also included the researcher's reflective journal. In the journal I captured my observations and reflections after the sessions. It enabled me to think and rethink through various aspects of my research processes, and to gather thoughts and feelings about the sessions. It also helped me to follow participants' reactions and growth as the sessions progressed. The reason for this is that there are dynamics and feelings between participants, and between the participant and the researcher that the camera cannot capture, or shifts that the researcher can pick up. The researcher's documentation will add these in-depth dimensions to the data collected.

The written journal, written up when reflecting on the processes, was also used to fill in information on emotions and happenings that the videotaping camera could not pick up. The camera is fixed in one place and is therefore not able to capture all the group activities as there is movement most of the time. At times the researcher can register and remember important situations which the camera is not depicting and report on those moments in writing in the journal.

3.3.3 Participant Observation

The researcher functioned as a participant-observer in the research process. Participant-observation is a process that enables the researcher to learn about the activities of the people under study in a natural setting, through observing and participating in those activities (Kawulich, 2005:44). Marshall and Rossman (2006) explain that "immersion in the research

setting permits the researcher to see, hear, and begin to experience the reality that the participants have in their lives” (100). My enrolment as a cleaner in the practice based-research helped me in this respect. Bernard as cited in Kawulich, (2005) notes that participant observation is also strength. It is best done when establishing rapport and blending into a group so that the members feel free to act naturally, after which the researcher is still able to remove herself from the setting and immerse herself in the data in order to understand what is going on and to be able to write about it (44).

In the processes of this research I participated in the check-in and warm-ups. These activities served as ice-breakers and the group members enjoyed them and insisted on teaching me the words, meaning, and dance movement of specific African songs offered by them. In this way they included me as a group member and enabled me to be their participant-observer. Spradley, as cited in Kawulich (2005:52), refers to different roles that a participant-observer may take. One of those roles is that of passive participation, which refers to activities being observed in the setting but without there being participation in all the activities. Masipa (2006) points out that participant observation alone is not sufficient for quality data, therefore the other methods which were mentioned above were included in this research (40).

3.3.4 Group Interventions

The research process interventions were done in a group setting. People generally function in various group settings: in family, friends and work settings, and as such, interaction in groups is part of a person’s daily life. Eloff and Ebersönn (2004), describe a group as “a collection of individuals who interact with one another. Two things usually happen when a group of people come together: they perform some kind of work, or task, and in doing so, deal with relationships” (188). It could be assumed, therefore, that the group members’ interaction would have an influence on each member’s approach and activities; this explains why the social constructivist theory applied to the understanding of this study. Moreover, Yalom and Leszcz (2005) suggest that group therapy is highly effective and provides meaningful benefit to group members. Group interventions, they say, allow the participants a safe space in which they can think and relate to their problems and find socially appropriate alternatives to deal with them (1).

Group interventions with the group of domestic workers also served as a support system, as all of the participants shared similar experiences of stigmatisation, marginalisation and on-going racist and classist employers' attitudes. Group interventions allowed group members to interact with each other in an appropriate healthy way, which is a critical element for enhancement of self esteem (Guindon, 2010:152).

Group interventions also suited the way in which an African person sees himself in relation to the others in the group and in his community. The phrase 'Umntu ngumuntu ngabantu', meaning; 'A person is a person through persons'. becomes meaningful in a small group situation (Bandawe, 2005:290). Traditional African life centres on community and belonging to a network of people (Bandawe, 2005:290). Therefore, as Mbiti and Sindima offer, when working with a group of African people, it is understood that 'human identity does not lie in 'I think therefore I am', but in 'I am because you are, and because you are therefore I am' (in Bandawe, 2005:290).

3.4 Outline of Sessions

According to Dunne and Rand (2013:15), Narradrama follows an eight step process. In most sessions the processes roughly follow the suggested eight steps, though not every session will follow the order or include all steps, which was also applicable to this research (see Appendix 1). These are listed as follows:

1. Warming up to new descriptions of Self Identity and environment
 2. Externalising the problem
 3. Possibility Extension
 4. Externalising Choices
 5. Personal Agency
 6. Alternative stories and Unique Outcome
 7. Re-story Life
 8. Closure, Reflection and Rituals
- (Dunne & Rand, 2013:15)

We had a total of seven Narradrama sessions, although more sessions were planned. This was due to the group having a limited time within which we could meet.

Each of the sessions was based on information gathered from the previous session and the analysis of that session. The sessions plans were based on the Narradrama eight step session, though not necessarily each session had all the steps in it. The duration of a session was between 60-90 minutes.

Each session consisted of a check in, a warm up activity, a main event, a bridge out and a closure. The outline will inform on the aim of the session, its main event activities and the material used. (See Appendix for extended session outlines)

Analysis of the sessions can be found in the discussion of results section.

3.5 Ethical Considerations

Mertens and Ginsberg (2009) stated that ethical principles should guide all stages of a research project - from defining the research question to publishing the results. Thus ethical considerations form part of the on-going processes of the research study (508).

Firstly, an ethical clearance was applied for and obtained from Wits University. One of the ethical considerations which have to be taken into consideration during research is that people can be left uncontained¹² and that these processes might open psychological wounds. As I am, not a qualified therapist, I was not allowed to do post research therapy. It was then arranged that the participants were given the option to be referred to an organisation that can deal therapeutically with any issue that might have arisen. According to the code of beneficence (Health Professions Council South Africa (HPCSA), 2008:2), in the code of ethical conduct we counsellors/helpers have the responsibility to contribute to the welfare of the client. Simply stated, it means that the therapy must be beneficial, be proactive, prevent harm and, where possible, provide a service within the boundaries of our competence. If the needs of the client are out of our scope of practice we ought to refer the client for professional

¹² *Uncontainment* can be understood through what the term *containment* implies. Renée Emunah (1994) offers a definition for this term and says: 'Containment does not imply suppression, but rather mastery over one's emotion, enabling one to release strong feeling through appropriate and acceptable channels. Some people need more help with accessing and expressing feeling or achieving a greater connectedness with their emotions; others are easily carried away by emotion and need more help with containment or self-mastery.' (Emunah, 1994:32)

help. As mentioned, the participants were informed that if further consultation was needed they would have the option to approach a Lifeline counsellor.

People participating in the research acknowledged that they were participating in it on a voluntary basis; that they had not been forced to participate in it in any way and that they could withdraw at any point. A letter of introduction (Appendix 1) was drawn up which stated who the researcher was and what she intended to do, why the researcher would like them to participate, and the fact that they would be participating on a voluntary basis. The letter clearly stated that a participant could withdraw at any stage, and that no negative consequences would come of it. After participants had read this letter, they were requested to sign it. (Appendix 2) This was done to ensure that the participants gave their informed consent to participate in the research. The Head of the Union, on her own initiative, translated it into Zulu before they signed it.

The second letters of consent asked the participants permission to be video-recorded (Appendix 3).

The presence of a videotape raised ethical concerns. The use of a camera might also elicit intense feelings in participants; sometimes even bring out difficult feelings. The researcher therefore negotiated the use of the video camera with participants and a letter of consent for the use of video recording was issued to participants (see Appendix 3) and their consent was obtained before observation was carried out in order to ensure legal and ethical compliance. These video recordings are being kept safe on a file on a password-protected computer and will be kept for a further two years, after which the files will be destroyed.

Chapter Four: Specific Considerations in the Research

4.1 Thematic Data Analysis

In this research, thematic data analysis was used to analyse the themes noticed in observation. Brink and Wood (in De Santis & Ugarriza, 2000) suggest that the term *theme* should be used to denote that the data is grouped around a main theme (351).

Qualitative data analysis should be understood as occurring throughout the research process (Palmer & Rawley, 2010; Silverman, 2010). In this research, I refer to the Narradrama processes as the research processes from which descriptive data will be gathered, and then analysed via the process of thematic data analysis. Boyatzis writes, in *Transforming Qualitative Information*, that thematic analysis is a process of ‘encoding qualitative information’ (1998: vii). Thus the researcher develops “codes”; words or phrases that serve as labels for sections of data. Depending on the methodology and research question, codes can come in many shapes and sizes. Referring to a set of codes, Boyatzis explains, ‘This may be a list of themes, a complex model with themes, indicators, and qualifications that are causally related; or something in between these two forms’ (1998:vii). Boyatzis (1998) shows how one could take a variety of approaches to using thematic analysis and essentially get the same rigour. Thematic analysis is thus seen as a foundational process for a qualitative analysis (Braun and Clark, 2006:4).

Burr (in Veldsman, 2008) points out that thematic analysis that is conducted within a constructivist perspective acknowledges that experience and meaning are socially produced as well as reproduced rather than just being an integral part of the individual (47). This also corresponds with Landy’s Role theory, and according to Landy, the:

Role system relates to the quantity of roles available and this will be based on many factors including biological predisposition, social modelling, psychological motivation, environmental circumstance, and moral judgement, as well as secondary factors such as readiness and will (Johnson & Emunah, 2009:71).

Thematic analysis and role theory has been used to provide a theoretical foundation for the data analysis process. Braun and Clark define thematic data analysis as a ‘method for identifying, analysing, and reporting patterns (themes) within the data’ (2006:7). This method seeks to uncover the themes that are most important in a text (Attride- Stirling, 2001:386). King and Horrocks (2010) explain: “themes are recurrent and distinctive features of participants’ accounts, characterising particular perceptions and or experiences” (150).

The data analysis follows a set structure which the therapist tries to follow, citing Attride-Stirling, “what has been done, why it has been done, and how the analysis [has] been done” (Braun & Clarke, 2006:5). The phases of thematic data analysis are set out by Braun and Clark (2006:16-23) as follows:

Phases of thematic data analysis:

1. Researcher getting familiarised with the data; forming initial ideas about the data
2. Generating initial codes; initial ideas regarding the data
3. Searching for themes; sorting codes into potential themes
4. Reviewing themes; refining themes, checking relationships between themes and codes in extracts of the entire data
5. Defining and naming themes; defining and refining by identifying the essence of each theme and giving them effective names.
6. Producing a table and the write up; presenting a table of all the themes, and providing sufficient write up to themes identified.

From these themes, I then suggest roles taken from Landy’s role taxonomy and both the themes and roles are used to measure whether and how significant a shift has occurred.

Using the guidelines provided by Braun and Clark (2006), the multiple stories collected on video from this marginalised group have been transcribed and the transcriptions were used to analyse the major social issues affecting the participants’ self-identity. One of the collective groupings of these individual stories looked at the levels of the negative issues which may be causing stress.

The recording processes thereafter monitored whether and how negative themes in their stories took on more positive characteristics in their reconstructed stories. These processes also showed whether their identities had been deconstructed and reconstructed in a healthier way, i.e.: Do the reconstructed stories relate to and strengthen the core self-identity of the individual domestic worker in contrast to her objectified self-identity which we found in the original problem saturated stories?

The results are shown in tables contrasting the number of negative topics emerging from their first stories with their second group of stories.

4.2 The Position of the Researcher

Alsop (2002) says that:

Studying the unknown involves leaving the familiar. Leaving is prerequisite to transcending self and society... However leaving also enables deeper understanding of what we left at home....being at home and being away, both in the literal sense of studying one's "own" and the "other" "culture"... The look back home emerges as a chance to practice self reflexivity (1).

4.2.1 Personal/Historical Narrative

The first reaction others had to my wish to do research with a group of domestic workers made me reflect on the 'why', this reaction came as a surprise to me.

'Why not?' I asked myself. They need it, I thought, and could benefit from it.

Nevertheless this reaction brought me to think on the 'what'; what brought me to think of this particular group of workers? What made me feel they needed it? What gave me this preconceived idea that they needed it? This brought an awareness that this choice emanates from my own template that is based on my negative past experiences as a daughter of a domestic worker and the hardship which accompanied being raised as a child that was stigmatised for being a daughter of a domestic worker. These experiences not only shaped the way I fought the stigma but also the way I perceive and behave towards others who I assumed share the same experiences and attitudes that shaped my being.

Indeed, my past experiences have shaped my template, and through that prism I pictured the world of the South African domestic worker and the way I assumed they perceive themselves.

Or was it only after reading literature about domestic workers and experiencing being a domestic worker in my practice-as-research that I became aware of the huge difference between the stigmatized 'class issues' I had faced in my childhood against the racially entrenched problems domestic workers face, even today, in South Africa? The oppressive work and life space they are in, the kind of work they are expected to hold as black people, as well as the lower pay they are expected to receive, all compound in this realisation. However, from the work done in the processes it became apparent that they are still feeling oppressed but are willing to find new meanings within their contexts.

It is only by realising that this was my thinking which, in turn, influenced the assumption that their circumstances influence their identity. This brought an additional facet to the drama therapy research I was about to conduct, as it not only became about a racially oppressed and stigmatized group of people but also about me, the human researcher/therapist wanting to use a therapeutic method on a 'group' which I felt needed and might benefit from it. This realisation changed the way I approached the research group, which meant that I first had to establish whether the participants perceive their life and the work as problematic (or not) before I could move towards completing the aim of the research.

In finding their perspectives through their stories, I used their feelings which formed their identity as a marginalised stratum as a basis for the later interventions. My assumption was based on Dunne's (2010) work with Narradrama in different marginalised groups (27). Dunne (2010), says that the conception of identity is based on 'an association of life' rather than on a core self (27). I assumed that in the South African context the political and religious voices, which have been influential in constructing identities, should be addressed before a shift toward identity based on self strengths could be attempted. The problem-saturated stories, that came up through projected play with objects, revealed the systemic and household racial discrimination and oppression experienced by the group, and its influence on the negative identity of the participant domestic workers. Using the Narradrama activities of externalisation, and preferred outcome activities, the participants managed to connect to

their strengths - which helped them in the process towards emotional change that might have in a more extended programme, assisted participants towards shifting their identity to a more hopeful and manageable one.

4.2.2 Contextual Differences: Self, Method and Participants

Moving beyond my personal narrative, in acknowledging the contextual landscape before actually engaging with the group, and in addressing the broader dynamics around race and ethnicity, I had to acknowledge that in their context I am assuming that I would be perceived as a western, white woman. Would this remind them of their oppressor? Would it not raise emotions relating to statements like, ‘that white woman with the western method that comes to fix us?’ This was an important consideration as it required me to acknowledge that, like myself, the participants come with their own templates, and thus, how may I be seen in relation to these templates? And how theoretically, I was engaging with these dynamics.

bell hooks (1992) speaks about how “whites” ‘compelled [blacks] to assume the mantle of invisibility, to erase all traces of their subjectivity during the years of slavery and the long years of racial apartheid, so they could be “better and less threatening” servants (340).’ This, she says, was an:

[E]ffective strategy of white supremacist terror and dehumanisation during slavery centred on white control of black gaze. Black slaves and later black servants... would be brutally punished for looking at, or appearing to observe, the whites they were serving, as only a subject can observe, or see... These looking relations were reinforced as whites cultivated the practice of denying the subjectivity of blacks, of relegating them to the realm of invisible... [White people] can live as though black people are invisible, and can imagine that they are also invisible to blacks. Some white people may even imagine there is no representation of whiteness in black imagination. (hooks, 1992:340)

hooks, in referencing Dyer’s ideas, says that whites “do not imagine that the way whiteness makes its presence felt in black life is, more often, as a terrorizing imposition, a power that wounds, hurts, and tortures” (hooks, 1992:341). In this research I tried to come to the group with the intention of witnessing their visibility. I hoped that the space would be considered safe enough for them to expose their experiences with whiteness. In this research I wanted to allow my participants to use the space to tell their stories without fear of how whiteness is

represented in their imagination. That such telling would allow them to deconstruct the racist impact which would help to break its hold on their identities. My hope for this research was that (although I am white and coming with a “white” method) those would only serve as a means to an end and that I could build a trusting relationship with my participants.

Another issue I needed to address lies in the method of Narradrama. I reasoned that this Western-developed method might, at first, be met with raised eyebrows and could raise resistance from the participants because it might collide with their African worldview. Makanya (2014) however, finds a bridge between role theory and the African dialogic view of the self (304). As researcher it is important for me to be aware where Role theory meets the African paradigm and where it departs from this. In the Narradrama activities our aim was that participants would be able to eventually re-author their lives, taking on new roles which would ultimately help them to shift their identities towards positive, manageable ones.

These questions and realisations influenced, firstly, the choice of the drama therapy method I used for the research. I chose Narradrama for a few reasons.

First, because I was researching with an African group, I thought of a method that uses story because in the African context oral stories have an important function. “The stories (like *Ntsomi* in the Xhosa tradition, to name but one) use symbols to illustrate the story message. The story is probing deep philosophical, moral, and spiritual matters. They are a high artistic sophistication in oral culture” (Okpewho, 1992: 4). Therefore, I assumed that a method which uses an oral story would be familiar to them.

Secondly, the Narradrama method allows the participants to bring their own personal stories, which reflect on their identities and the meanings the participants give to their lived experiences. It might therefore be a good method to work with on shifting their identity because story is a form that is familiar to them culturally, and would negate the potential influence from my personal templates.

Narradrama, as a Drama therapy method, uses amongst others a variety of distancing methods. These can help the participants to overcome their reluctance to reveal blocked material. In ‘talk therapy’ this material might not have been available. Narradrama also might help overcome the language barrier because it is in itself a powerful intervention that

can compensate for what will be lost in translation - meaning that through their gestures and postures, their emotions, understandings and willingness will be revealed.

4.2.3 Language and Communication

I assumed that dealing with individuals in a group setting - a group of people who share the same ethnic, racial and class problems - might be beneficial and could elicit cohesiveness and may, if found, indeed help in the shift towards positive identity.

As a researcher, I assumed that the language barrier might create communication problems. I assumed that with an African group of people, and a researcher coming from a foreign country (Israel), English as a second language for both, might raise comprehension and understanding problems. Using an Art therapy method, such as Narradrama, seemed effective as a vehicle that would help bridge communication and explore understanding of participants' experiences. White (1998) states that:

The combinations of narrative with arts-based research provide ways of expressing, deconstructing and reconstituting life stories, events, memories and ways of "seeing the world". Artwork can also provide archival resources for the client and therapist, as they co-research an arts-based therapeutic process. Exploring our lives as "multi-storied" as in narrative therapy, enhanced by the variety of creative arts modalities will allow diversity and complexity to exist in the reliving and retelling of the narrative. (White, 1998:226)

The issue of language has caused some difficulties. I was aware that this could be an obstacle to being understood and in being able to understand fully the African languages they might use to communicate their stories. There were times when I felt excluded when they spoke their language(s) but I felt that I needed to trust the distanced method inherent in drama therapy to reveal what a spoken word cannot.

There were two options which I felt would help to overcome this obstacle. Firstly, I made use of additional methods when listening to what was being told in the story; I noted the embodiment and enactment of the story. With the participants' fluency in their mother tongues, they sometimes preferred to express themselves in their home language (in the research group they communicated in Zulu mainly, though they understood Xhosa as well). The method had its advantages in that it allowed them to express their stories in their own language, and in a dramatized, embodied way which can bridge these language barriers. The

embodied presentation allowed the story to unfold naturally, and allowed me, as the researcher/therapist, to interpret the mood and emotions expressed through the embodied representation of the story. Embodiment was a key concept in bridging the language barrier. The participants then translated the story into English to clarify the content. (A record of the dramatizations was kept which helped in analysing their stories.)

4.2.4 Assessing the Choices

Reflecting back on the process, I can say that with patience and willingness to engage on both sides, the researcher and the participants opened a channel of communication and trust. Yes, at the beginning they looked at me as a white woman and as an employer, as researcher and therapist, and I looked at them as a stigmatised, oppressed group, as informed by my own narrative; but soon after we started the sessions they found a human being with faults and emotions. In this space their stories, their dreams, their strengths were listened to. I sang and danced to their tune. I was patient and explained again when they communicated they didn't understand. They also could feel my frustrations when I did not understand them, and offered explanations.

They spoke at the last session and said they were sorry we had to finish. They said they could feel my empathy and interest, which made them feel secure enough to open up their wounds and pain. And I, as a researcher, felt that although they have not achieved a full shift – because we had limited time for engagement in processes, as we had only seven sessions – I could feel that something has shifted; white people for this group will be looked at through different eyes. The group said, 'Like you, maybe out there, are some employers with empathy towards us and we were blind to see it'.

And as for me, I learnt of the value of Narradrama's distanced methods. In reaching out, communicating and understanding different cultures and a marginalised group, as well as about the importance of positive feelings, openness and patience in overcoming the existing obstacles of language, but more importantly, race and resentment; and all these towards healing through an individual's identity shift.

4.3 Strengths and Limitations

4.3.1 Strengths

The participants in the research were interested and committed to sessions whenever they could attend, except for one participant who - due to family problems - stopped her engagement with the group. They showed enthusiasm and excitement when participating in the activities and sent the researcher messages showing sincere disappointment whenever they could not come.

One of the strengths of Narradrama argues Dunne, is that “it strives to engage participants in such a way that they expand their role repertoire through the active playing of roles” (in Johnson & Emunah, 2009:181). This point is further developed to explain: “The therapist works in a non-directive way to help participants expand emotions, and discover alternative problem solutions within a supportive, playful, and creative environment” (Johnson & Emunah, 2009:178).

From the results of this research we can say that participants could imagine their dream role but it only existed in their thoughts. So at this stage, although they could think of expanding their role repertoire, they did not yet take on their new roles or play these roles. More sessions would be necessary for participants to hopefully achieve identity shift.

A second strength of Narradrama is that it focuses on preferred choices and a new landscape of identity and action. The participants in our group had only ever imagined their preferred role. When they tried to imagine playing it, they began to question their choices, enlarge their perspectives and discover new identity descriptions. But in order to experience what it would feel like to move forward in their lives, in preferred ways, towards their hoped-for future (Johnson & Emunah, 2009:178-188) the participants would need to engage with more Narradrama sessions.

This research works within the various individuals’ cultures and uses Narradrama distanced methods like embodiment to help them enact their stories. In the context of the group of

domestic workers the African woman's natural flair for performativity¹³ probably helped the participants to overcome their reluctance to reveal blocked material. In 'talk therapy' this material might not have been available. It also overcame the language barriers and in itself it is a powerful intervention. It also may have helped the participants to gradually expand these rigid categories to multiply the possibilities of identity, as Mayor (2012) concluded in her article, on the possible effects of performativity for people who are discriminated against racially (216).

Because the intervention included only a small sample it produced in-depth data on life experiences which caused stress in the participants as well. A small shift had been noticed in the participants' emotional expression but more sessions would be needed to assess the efficacy of Narradrama as a method that can assist the change and transformation of this group of domestic workers' feelings of oppression, which could have shown a shift towards a more manageable and hopeful identity.

As this is an exploratory study the hope is that the results obtained will stimulate more research into the use of this method with other population groups.

4.3.2 Limitations

In this research we were working with a small group of five to nine individuals who were all unionised (not all domestic workers in South Africa are members of the union) and who may well have undergone training which other, non-unionised domestic workers would not have experienced.

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1. In the Republic of South Africa, the ntsomi-performer is a woman, and the finest artists are generally held to be old women. This latter generalization is not entirely true. While grand mothers, if they are not too old, are often excellent artists, girls in their teens have been found to be polished performers, and women between the ages of thirty and fifty are among the finest. (Scheub, 1970)

2. In critical race theory and performance studies, people are not born Black or White, but are always becoming their race. This disrupts the idea that race is essential and in its very definition offers a possibility for change. While Butler's (1988, 1990, as cited in Mayor, 2012) work centers on gender and sexuality, her conceptualization of performativity is crucial to understanding racial roles. Performativity is the process where discourse produces what it names; norms are perpetuated through repetition and ritual, and the reiterations of norms precede, constrain, and exceed the individual performer... Butler (1988 as cited in Mayor, 2012) suggests however that the very nature of performativity allows for the possibility of transformation, since one always fails at performing the stereotype. By subjecting race to the continual transformations and discrepancy of play in the creative arts therapies, there is the potential to shift these patterns by playing with these failures to match the stereotype. Saldanha (as cited in Mayor, 2012), further suggests, "Race is always multiplying. It is the plasticity, the creative potential of race, that is important, not its rigidity" (2007:192). Utilizing creativity and performance, we may gradually expand these rigid categories to multiply the possibilities of identity. (Mayor, 2012:216)

A key point to note with this convenient sampling method described above is that, as this does not represent the whole population (which in this research is the population of South African domestic workers) results cannot be generalised to the larger whole (Terre-Blanche et al., 2006:50).

Further research needs to be done on groups of domestic workers with other dynamics (i.e. non-unionised domestic workers) if we want to check the efficacy of Narradrama on the South African domestic workers' group. However, the results of this research may provide a basis for future research into the capacity of Narradrama to bring about deep personal change.

It was also difficult to ensure that all would attend regularly, due to family and union commitments. This research was of short duration due to the short time allocated until its research submission deadline. Within the time frame and with the limited time the domestic workers themselves had, we managed to have only seven sessions. This is a very short period of time for a change in identity to happen and to be substantiated, but nevertheless participants had started to show sign of shifts in their emotional responses. Further research with different groups will need to be done in order to fully assess the efficacy of Narradrama in shifting identity.

Chapter Five: Results and Discussion

5.1 Negative themes; Problem-saturated stories

Narradrama processes aim to shift participants from their problem-saturated stories to non-problematic stories that will provide a different view of a personal identity (Dunne 2006:40). This research had nine participants, who received name identifiers for their anonymity and privacy; the following initials will be used in place of their names: **EN, SAL, M, F, S, ES, L, THAB, T.**

In this research, thematic analysis was used to analyse the themes. Brink and Wood as cited in De Santis and Ugarriza (2000:351) suggested that the term *theme* should be used to denote that the data is grouped around a main theme. The table below reflects the main themes apparent in participants' problem-saturated stories and how these affected their feelings and the construction of their negative identity which is based on these emotions. The feelings and their negative influence on their self identity has also been explained by the assumed role they might have taken on. As Landy (1994) says: "The self is not visible. It takes on a visible form through role." (91).

Negative themes in Problem-saturated stories: Table 1

NEGATIVE THEMES	Sub-themes	Feelings	Negative Self Identity	Roles As taken from role taxonomy (Landy, 1993:256-260)
EMPLOYER DOMINANT RELATIONSHIP WITH EMPLOYEE	Unrealistic employers' demands	Frustration Anger Fear Tiredness Despondent Unconfident Confused Exploited Unacknowledged Stressed Unhappy	Submissive Not free Despondent Frustrated Angry Confused Hurt Insecure Fearful Exhausted Unhappy	<u>Social roles:</u> 53 Pacifist 64 Lower class 68 Pariah <u>Power & Authority:</u> 70.2 Cowardly soldier <u>Affective:</u> 33 coward 18 Ambivalent (confused) 37 Malcontent (unhappy)
	Invisibility	Unworthy Sad	Excluded Saddened Hurt Humiliated	<u>Affective:</u> 36.1 Lost one 26.1 Martyr 26 Victim, (slave) <u>Cognitive:</u> 16 Simpleton (stupid)
RACISM	Marginalisation Oppression Stigmatisation	Unworthy Humiliated Sad Frustrated Unacknowledged	Excluded Humiliated Saddened Frustrated Unacknowledged Hurt	<u>Social:</u> 64 Lower class 68 Pariah (scapegoat) <u>Affective:</u> 26 Victim 26.1 Martyr <u>Somatic:</u> Beast (ugly one)

LACK OF PRIVILEGE POVERTY	Appalling accommodation Lower salary Poor education	Despair Frustrated Angry Humiliation	Despair Frustrated Angry Insecure	<u>Affective:</u> 36.1 Lost one (accept meaningless) <u>Social:</u> 65. Working class 64 Worker <u>Cognitive:</u> 16 Simpleton(stupid)
SEXISM		Fearful	Anxious	<u>Affective:</u> 33 Coward (succumb to fear)

The group participants who are active domestic workers live mostly on their employer's property (seven of my participants were living on employer's property). Most of them live in a cluttered small backroom. From the stories told by my participants, I understood that the life and work of the participants living on their employer's property is dependent, encircled and dictated by the employer's rules, demands, imposed income, attitudes and behaviour. When the need arises these issues are sometimes negotiated with the employer.

The participants are members of South African society and have been affected by its broader issues, or *social problems*. A definition of social problems is proposed as "a generic phenomenon: the process by which members of groups or societies, through assertions of grievances and claims, define a putative condition as a social problem." (Spector & Kitsuse 1987:75).

While most of the issues depicted in the participants' problem-saturated stories reflected the problematic relationship which they had with their employers, it is argued that this relationship mirrors the social problems that have their roots in the apartheid era and still impact on the lives and work of the participants to a great extent. The social issues affecting the participants' lives were apparent in their stories. These social themes influence the dominant behaviour of employers over the research participants.

The following stories show how the dominant behaviour of the employer towards the employee marginalizes the employee. She is not being included socially and is hardly listened to, which frustrates the employee (the participant in the research) and adds to her feelings of frustration, anger, sadness, fear, hurt and humiliation.

F feels **saddened** as she is being treated as an outsider. ‘My employers are joking and laughing but never share.’

S says: ‘if you start speak with your employer they will say WHAT! That action makes you come with fear because you know that she is not going to respond in good manner. While she starts to make that action in her face, to pull her face, whatever, like that, that now starts to make you **fear**...what you are going to say? Even if you are going to put your story, instead to put your story in a right way, you put your story in a bad way.’

M: ‘And they seem **not to like to see us happy**, to smile. To be smiling every time it makes your skin very good. When you are going always to stay like that (made a long face), your skin just becomes much older than yourself.’

The interrelated negative themes emanating from social issues and household problems have been imposed on participants for a long time. These negative emotions influence their negative identity formation. On the danger inherent in these negative feelings, Phinney (1989) drew attention to the likelihood that members of an ‘oppressed and exploited minority’ may internalize the negative views of the dominant society, thereby developing a negative identity and self-hatred (303).

Themes from problem-saturated stories concerning lack of privilege, sexism and poverty also reflected on participants’ negative feelings. In view of the fact that identity is defined as the meaning that individuals attach to themselves, as expressed by Gecas (in Dutton, et al., 2010:266) we could assume that those feelings were attributed to their negative identities as well as to their role choice.

Landy’s Role theory, in this regard, maintains that a person is made up of the various roles that they assume in the world. The unhealthy person is:

[O]ne who has given up the struggle to live with contradictory tendencies and has instead embraced one role or a cluster of related ones to the exclusion of all others, they are also unable to internalize and enact a number of roles competently (Johnson & Emunah, 2009; 73–74).

I did not use Role theory in sessions, therefore participants did not mention what role they chose. Therefore the roles that appear in the table (Table 1) are entirely the researcher's subjective opinion, based on interpretation as a researcher/ therapist and can be contested. Nevertheless, Landy's Role theory and role Taxonomy explain how participants' unhealthy self-identity is formed via the roles they play in any given situation. We can assume that the roles the participants would have played within this social problematic reality would reflect on their unhealthy self identity because of the restrictive negative roles they play. For example, the relationship with the employer speaks to the social domain. So when relating to the theme of the employer's unrealistic demands we would assume that the participant may have taken the social role of pacifist or coward, where she is internalising her feelings in order to keep the peace and not be fired from her job. From socio-economic roles, they may take on the lower class role as servant to the rich, and from the affective domain, they may assume the role of the victim.

The *problem-saturated stories* raised themes which derive from racism; like marginalisation, oppression and stigmatisation. These influenced the participants' feelings of Unworthiness, Humiliation, Sadness, Frustration and Non-acknowledgment. These feelings influenced the meaning they attached to themselves and their negative identity.

F: 'I don't want to be separated all the time as the only difference between us is the skin colour... I hear them laughing and I feel bad'

L: 'Employers like to scare us...they don't want to see any worker here in South Africa happy in their work place. They just want to see us on our face. If you want to make them laughing, they just say; this Blackie...they are mocking us about our colour. What we have to know is work, work, no lunch, no breakfast, no family, work until you die. It's what you are created for, you are a donkey, and a donkey does not get tired'

EN: ‘Its hard work to be a domestic worker but to be a child minder is harder. It brings back thinking that while you are doing your work as a child minder, what is happening to yours? Who gives them love? Who tuck my children on their back while I’m busy?’

These examples of racism that differentiate people of colour, treat their feelings towards their own children as non-existent, and stigmatise against them as non-appropriate to mingle with because of their colour, inflicts badly on their negative identity. The humiliation felt when being called ‘blackie’ could have influenced **L** to take on the somatic role of the beast. Being marginalised by a society that sees her as the ugly one, she feels, therefore, towards society as a beast, which makes her feel fearful and hurt. But she can also be the innocent beast, as it is society that marginalised and labeled her so. By virtue of this she is a beast and not because she did anything bad towards society. **EN** could be taking a role of the martyr as she sacrifices herself for the sake of her children so that she can earn money to feed them.

Landy (2008) says that “every role in the taxonomy operates within a structure of role counter-role and the guide, so that every role within the individual can serve as the protagonist, antagonist-counter role, and the guide.” (106). This explains the way we used the role allocated for the participant in order to understand her identity at this stage. For example, although a participant is not physically deformed, she nevertheless might feel disabled and this explains why we assume this role can be assigned to her.

The researcher used role to further aid in the understanding of a participant’s identity. Landy’s Role theory says that self is invisible. It only takes on visible form through a role. (Landy, 2008:91). Landy’s Role theory, in this regard, maintains that a person is made up of the various roles that they play in the world (Landy, 2008:103). From problem-saturated stories, the stories’ content, the social world of the participants was revealed. Landy (2008:91) says the stories recount aspects of daily life from the point of view of a particular role. The self - one’s essential uniqueness - relates to the other (a representative of a social world) (103), through a role. Relating to Landy’s theory and the participants’ stories, it was assumed that participants took on roles that reflected a negative sense of identity.

Through Role theory and role Taxonomy we could understand the current negative identities presented by the participants in the Narradrama process. Landy (1994) also says that as “self changes so role changes” (91). Landy’s post-modern view of the self parallels the

Narradrama concept of the constantly changing and evolving identity (in Jones: 2007:75-76). Expanding one's role repertoire and exploring different roles can open up ways of thinking and relating to others in healthier and preferred ways. Landy (2008) states: "... the individual is not one thing, a core self, but multitude of roles that exist in relationship to their several counterparts" (103).

5.2 Creating Shifts

To measure a shift through the Narradrama processes a few activities were done in order to allow participants to firstly distance themselves from their problems so that they could open a space to examine new solutions from all angles. Stepping back to see the bigger picture, thereby inviting participants to play alternative multiple roles, removed the participants from their customary perspective and allowed the problem to be seen from other points of view.

Based on the eight steps of Narradrama, the following processes were used:

5.3 Narradrama Activities towards creating shifts

The eight steps of Narradrama towards shifting identity were used, though not all of them were used in each session. The way in which I analyse and discuss these steps will relate to the activities used in order to create the shift.

The first step Dunne (2013) speaks about is warming up your participants towards their self identity (15). Through visualisation I asked the participants to relate to their inner strength and outer strength. Through this they connected to their strong identities. In order to further connect them to their strengths they were asked to draw a picture of their strength or use any way they chose (write a poem or story) to connect to their strength. Two pictures were drawn: one of their inner strength and one of the outer strength.

The reflection of their strength after drawing it connected them even further to this strength and revealed new strengths they had not previously realised they possessed. For example, one remembered that writing poems made her strong and another participant realised that sewing was her strength, which she can use to support her family.

Another realisation this process brought to the researcher's attention was the way in which African participants differ from westerners, in that they see members of their families as their inner strength. Makanya (2014) spoke about the notion of the individual according to the African tradition and explains that the individual does not stand alone but is an integral part of his community - the living as well as the dead (304). This might explain why participants found their children and family to be part of their inner strength.

Applying this contextual awareness to the warm-up also gave the process added benefits by virtue of being more culturally relevant. For example, I also invited participants to use warm-ups that had African elements in the songs, dance and games, which are familiar to them and would make it easy for them to engage. For example, when we dealt with positive and negative images, the researcher introduced an African game called, *Sithombe esithle* (positive picture) and *Sithombe esibi* (negative picture). I found that singing songs helped to connect participants to the aim of the strength. For example, I introduced an African song as a warm-up activity: the song entitled, *Si hamba na ye...luyamangalisa* (his love is amazing of his inner guide of mine). I also found that apart from enjoying the activity it helped the group members warm up in an enthusiastic way to the process. This approach was also found to help foster group cohesion and although it was not the main goal for the warm ups, it seemed that it is necessary for any future group work.

In another process (2nd session) I introduced a projective technique of using objects. I brought objects which suggested stories connected to the participants' roots; the objects consisted of pebbles and branches and logs. In the process they were asked to walk around and pick-up which ever object caught their attention, and then participants were asked to each tell the story that those collected objects evoked in them. They were then asked to join the group and create one story that included elements from each person's story that the group felt were important. Then they were asked to enact the story. This way of enacting a story is similar to the way *Ntsomi* story-telling is done. In this way, it was assumed they would find similarities and interest in the coming Narradrama activities. This activity managed to achieve both aims (of enhancing cohesiveness and evoking stories with the distancing method of using objects) as in the reflection, most members reflected similarly to what EN concluded, 'we want to thank you; we know each other but now we know each other more because of the drama therapy you brought us.'

The combination of methods used in the Narradrama sessions, with the reflexivity of the therapist and genuine concern for the domestic worker, created a safe space where participants could explore aspects of the stories and identities and at later stage re-author them to access new, more positive stories. In this way the researcher believes that slight emotional shifts were encouraged.

The session that followed aimed at *externalising* the problem saturated story. In working with participants on externalisation of these stories we expected to enable participants to distance themselves from the problem. Externalising, says Dunne:

[E]ncourages participants to objectify problems and enables participants to open space around the problem and see it from various perspectives [multi-storied conversations]. This enables participants to escape the problem-saturated stories that have been affecting their lives and relationships. New perceptions of their life experience begin to emerge. (in Jonson & Emunah, 2009:178)

In these processes the researcher used masks which they created using drawing and sculpture. In their mask they created their problem-saturated stories and drew themselves in their problematic work situations, accommodation and problematic means of transportation. They mainly created masks about their work place and most of their drawings were very busy, with lots of tasks being depicted with the 'person' in the image looking almost invisible amongst those tasks. One mask was quite empty, but with a strong message: it depicted the domestic worker herself in her bed resting, but then she was not alone. The employer's child was with her in bed - so no rest for her, not even after hours.

Possibility of extension, step 3, was not necessary with this group as group participants had no problem in externalising or engaging in alternative stories of how they want to live their lives. The next step was to externalise choices. In this process I used enactments during which, taking from the processes of externalising the mask, the participants were asked to choose two participants to enact their story, where one enacted the problem and the other enacted the protagonist.

Two enactments were done. In the first, the relationship between participant and the problem was portrayed at a time when the problem exerted the most influence over the person. The

second enactment showed what happened at the time when the problem was least probing. In these two different enactments the actors needed to enact the relationship according to the situation, and then they needed to enact what would be the preferred relationship between the person and the problem.

After these projected enactments participants were invited to reflect and consider their choices about what should remain the same and what their choice would be to oppose the problem. They also needed to consider how choices enacted might help them redefine their relationship to the problem. The most popular choice was that of talking to their employer, or going to the Union and asking them to take on the role of mediator. Another suggestion was to ask a friend's help in how to relate to the problem.

This use of Sociometry conceives of humans as essentially social beings. Beyond that, Sociometry recognizes and uses the fact that all these connections are perpetually manifest in the social choices we make. Using both positive and negative choices, the connections between people and the patterns of connections throughout groups are made manifest, explored, and influenced. (Remer, 2007: 390)

These enactments not only open up choices for the person whose story is enacted but also for the participants who enact the story. They can also practice those choices and learn from them.

The next step Dunne (2013) suggests is to remind participants of *their personal agency* in order for them to feel a sense of agency to act on their lives and move forward (165). Previous exercises in the research process encouraged participants to draw on their strength through visualisation exercises. Further into the processes we had a chart available and every time someone noticed strength in a participant or herself, she could write it on the chart. The participants mentioned strengths like happiness, excitement, ability, management, humour, dance, singing, faith in God, children and family support, patience, sewing, and writing poems. This reminded them of the strength of the group and their own personal agency that they can use to manage a hopeful life. Another activity used was inviting them to bring their own object or anything symbolic they see fit (i.e. poem) which connects them to their strength and which they feel can help them move forward.

From there we moved to alternative stories and unique outcomes. For this process the researcher used the *empty chair*¹⁴ technique and participants were encouraged to create a scene, embodying themselves talking or using any other talent of theirs to express to the employer their wishes for the future. They used the strength they had discovered before to narrate their dreams to their employers. They spoke to their employers showing vigour, as well as humility and pain. Some spoke with an angry voice and others shared tears while speaking of their dreams to the employer. Their dreams were about completing studies, asking for time and financial help to go on training for nursing the elderly, studying singing professionally, asking for time and money to build one's own bakery, studying to become a social worker, and studying to become a counsellor.

The dream spoken about expressed that there is another way the participants can think of choices - that there is another destination. Later on they externalised their dreams by creating masks portraying them. Sociometry was further used when they were asked to show where they are positioned between their problematic story and their dream. They created a path between the two masks, which showed mainly a difficult (usually presented by darker cloths) and bloody past (represented by red cloths), and that it was full of obstacles (represented by sharp curves). Most of them positioned themselves in the middle of the length of the path, which for them represented where they stand in relation to their dream. Only one positioned herself at the beginning of the path and said that for her the dream is in her mind.

I then asked the group to create an image - a living sculpture - of what it would be like to take the next step towards their dreams. Participants each showed and embodied the image and then were asked to use their strength to take that step. This transitional stage towards their dream was embodied first by them and then each participant chose someone else to enact her first step for the future. In this way participants not only embodied their strengths but also tried a new choice of exercising them. Watching other participants enacting their strength and their choices of their first steps to their future made them feel proud of their dream and of themselves in being able to articulate and show it, as well as see it being

¹⁴ The most recent empirical research has investigated the gestalt empty-chair technique for "unfinished business." This technique facilitates the expression of unresolved feelings toward a significant other. The client is encouraged to direct unresolved emotions, such as anger, toward an appropriate target; for instance, this could involve having the client redirect internalized anger toward the person with whom he or she is angry. Through this process, the client is able to express previously interrupted feelings more fully and is able to identify suppressed needs (Greenberg et al., 1994 Vagner- Moore, 2004:188). Resolution is achieved when the client has intensified emotion, expressed his or her needs, and shifted his or her view of the significant other (e.g., either holding the other accountable or having more understanding of the other's point of view; Beutler, Engle, Oro-Beutler, & Daldrup, 1986, as cited in Vagner- Moore, 2004:188). (Vagner- Moore, 2004:188)

performed in front of their eyes. They were very attentive when their dream was enacted by another participant. They smiled and reflected back saying they were happy, they also signalled with their hand to show satisfaction. However when the enactment was not to their satisfaction, (i.e., ‘you forgot to speak to the funder’) they asked the participant who enacted them to re-enact the missing part or the inaccurate section, and once this was enacted to their liking they showed a pleasing face and used the words like ‘exactly’ to reflect back on the enactment. Moreover some participants studied new ways in which they could adapt to their choices (i.e., approach your supporter or funder with humour and love for what you want to achieve). In this way as well participants were encouraged to think of possibilities for a preferred future. These new future masks, and the embodying and enacting, opened hopeful choices for them in using their own strength which they connected to when re-authoring their current life stories.

For the seventh session, the *re-story/re-author* step, participants were asked to bring an object of their own that they could connect to, which would remind them of their strength (their personal agency) and which encourages them to use their strength in any situation. The researcher also asked them to bring a story of something that happened to them at work or in their life and enact it, embodying their reaction to it. In this session, after embodying, the group was asked to think if their reaction was in anyway different or if they reacted to it in the same way as before. In this activity I assumed that I would be able to measure if any shift had happened in the way they dealt with current situations in their lives.

5.4 On shifting identity - the results

I will now discuss whether, and to what extent, a shift in participant identity could be observed throughout the sessions. Did participants change the meanings they attached to themselves? Did they shift the way they attach meanings to who they are?

Results were analysed by comparing and measuring whether a shift could be observed in their identity as represented in their problem stories against that represented in the last session. This was done by checking to see if different feelings are attached to their new stories of their current life situation as compared with feelings and assumed roles attached to stories at the beginning of Narradrama processes. Feelings and assumed roles represent their identities,

therefore we can assume that if feelings observed and the roles attached to them have changed this might also influence the way they see themselves, and therefore, see a shift in identity. I re-checked the kind of assumed role they might have taken on against Landy's Role theory and taxonomy to determine whether the participants had shifted towards a healthier identity.

The table below (table 2) represents themes, which are issues they face in their lives, and the context in which they live, which are constant and fixed. These themes/issues include dominant employer behaviour, represented by unrealistic demands and attitudes contributing towards their feelings of invisibility. Other themes include racial discrimination and its influence on marginalisation, oppression, and stigmatisation, as well as issues concerning lack of privilege, poverty, health and sexism.

As their situations are fixed, some of the social roles assumed are also fixed. In the analysis however, only two of the four themes were prioritised. This would suggest that some of the other themes were not prioritised because there was either not enough time in sessions or that they did not hold as much importance in the lives of the participants, aided by the shifts in their own identities.

Placed within these fixed contexts, the researcher will analyse the feelings and suggested roles, to check whether Narradrama assisted the participants in shifting identity.

Measuring identity shifts; TABLE- 2

THEMES	Sub-themes	Feelings	Identity	Roles
EMPLOYER DOMINANT BEHAVIOUR TOWARDS DW	Unrealistic employer demands	Confident Proud Professional Happy Energised relaxed Independent in thoughts Able to negotiate	Confident Proud Happy Energised Independence in thinking	<u>Social roles</u> 53 Pacifist (still submissive) 64 Lower class 65 Worker <u>Affective</u> 35 survivor 37 Counter role Malcontent <u>Cognitive</u> 20 Wise person <u>Spiritual</u> 75 Orthodox
	Invisibility of the employee	Acknowledged Empowered Appreciated Needed Supported	Hopeful Relaxed Supported	<u>Social</u> 65.2 Revolutionary worker 70 Warrior <u>Aesthetic</u> 83.1 Performer 84 Dreamer <u>Affective</u> 35 Survivor

LACK OF PRIVILEGE AND POVERTY	Appalling accommodation Lower salary Poor education Poor health	Empowered Talented Supported by belief in God Lucky Relaxed by singing	Empowered	<u>Social</u> 40 Mother 67.3 Servants to the rich <u>Affective</u> 30 Helper 35 Survivor <u>Aesthetic</u> 83 Artist 84 Dreamer <u>Spiritual</u> 75 Orthodox
SEXISM	-	-	-	-
RACISM	Marginalisation Oppression Stigmatisation	-	-	-

Through the different processes that worked on externalising the problems and dealing with strengths, participants were helped to work through their negative emotions towards more positive emotions. Gecas (1982) articulates that identity is reflected via the emotions people attach to themselves and the roles suggested from these (266). From this notion, I noted a slight emotional change that was apparent in the participants' choice of response. Due to the research only having seven Narradrama processes, I am however cautious in my analysis of participants' identity shift.

In the final session participants brought stories of current situations they faced and the way they managed to deal with them. For example:

L: 'She wanted me early as the dog was vomiting! And I think to myself this dirty job is not my job. But I'm deciding not to get cross, I go to my room and I sit down, I drink my cup of water, take a deep breath relax and then (she demonstrates how she puts on a mouth mask, shower cap) and then says; I put these on and as I haven't got gloves so I then took two plastics and a newspaper, and I'm coming to her with a smile, show her nicely that I prepared myself for this. Then I start to scrub whatever filth is there, and collect it with newspaper and chuck it in the dustbin.'

In this example we see how L's emotions shifted into more positive ones, such as: relaxed, confident and independent in thought and that the roles attached to these, as per the taxonomy, are identified as "survivor" and "wise person". The survivor role suggests that she was able to move from the victim she considered herself to be in a similar situation to one who had more agency in overcoming such situations.

The wise person role reflected by her emotions showed further agency by using humour instead of anger.

M: 'I had to cook for lots of guests to dish for them and then clean after; I was under a lot of stress but someone helped me and I managed everything (she holds the hand shaped badge in her hand and raises her hand above her head) I did not even feel tired and this work and stress can make you tired' ... 'they loved my pap I managed with it, even with the pap, imagine even pap' ... 'I was complimented on my food and personality since I'm here the granny said everyone is happy' ... 'This crown I received made so happy proud and confident and I did not feel stress' (she dances).

These examples show that though current social and household issues were not much improved, the way in which the participants handled the situation showed that different, more positive, emotions attached to their situations. L used her sense of humour and a relaxed manner to get through a situation which previously would have made her angry. M discovered her talent and expertise in cooking, and managed to enjoy the satisfaction and compliments received. Previously she would have felt unacknowledged, stressed and tired from the same work. Although M is still socially in the role of "servant to the rich" she manages, firstly, to tap into the role of the "orthodox" which reflects on her strong belief. She later discovered her inner strengths and talent, and rejoiced in accessing her roles of the "artist" and the "dreamer", which is a new way of dealing with hard and tiresome work.

These examples show a slight shift in the identities of those participants towards more manageable and hopeful ways of dealing with their circumstances. These are two examples from a range of feeling and identity shifts as reflected in the table above.

By re-storying their experiences, the participants in the Narradrama processes managed to show a slight shift towards a positive identity, by means of role taking from Lady's Role Taxonomy - assuming characters from history, fiction, and imagination, expanding viewpoints, enlarging support structures, and generating new descriptions of identity (Dunne, 2013:9). This slight shift towards new identity descriptions noticed in participants corresponds as well with Landy's Role theory and role taxonomy.

The table below will show the shift that has taken place and how it reflected through Landy's theory and taxonomy Method.

Shifts in identity and in assumed role taking TABLE-3

*PSS - Problem Saturated Story

Identity In PSS	Role assumed from PSS	New Identity In re-storying	New Role assumed in re-storying
Submissive to employer	Pacifist cowardly soldier, coward.	Getting more independent	Warrior
Unconfident, Insecure	Ambivalent one, Simpleton	Getting more confident	Wise person
Humiliated	Malcontent		Content
Tired	Martyr	Energised	helper
Hurt sad	Victim	Happy	Survivor
Despairing	Pariah	Hopeful	Revolutionary worker
Angry		Relaxed	
Uneducated	Lost one	Empowered	Dreamer, artist,
Unacknowledged		Acknowledged	performer
Invisible	Beast	Visible	Orthodox

The table reflects that the participants have managed to expand on their assumed role choices which according, to Landy's Role theory, suggests that they may be shifting towards healthier identities.

“Wellness is marked by one's ability to live within the contradictions of dissonant roles” (Landy, 2008:110). In this research it can be inferred that although social roles have not changed, i.e. participants are still playing the role of the “lower class” and “servants to the rich”, nevertheless they could take on more positive affective roles, i.e., “helper”, and “survivor”, as well as taking on cognitive roles such as a “wise person”.

The healthy human being is one who is able to transform experiences into stories and to tell these to appropriate listeners; to change the stories according to changing circumstances from within and from outside world. Health is determined by the creation of balance dynamics, and interactive role system as well as the capacity to tell and revise the stories of one's life within a group context. Balance as a goal is not an

absolute, but rather a relative measure of intrapsychic and interpersonal stability (Landy, 2008:110).

In this research I noticed that participants have managed to re-story their experiences as well as to assume taking on a wider repertoire of roles but as Landy explains this process of taking on a role needs time and practice before one could fully embody a new role.

Landy (1994) differentiates between role taking and role playing, stating that:

Role taking is a complex dramatic process of internalising aspects of the role model - the other. This process involves imitation, identification, projection and transference. These are based on mental internal activities: 'the complimentary process of role playing is an external form of enactment', thus competent role playing needs time before participants are comfortable and fully embodying the role. (93-97).

Therefore this research does show the start of a shift, and it is assumed that the shift in identity, inclusive of the suggested roles, could have been more substantial if participants could have rehearsed them more until the identity shift was more integrated by participants. From the work done, it can be assumed that with more sessions a permanent shift could be anticipated and this could have been achieved if more sessions had been possible with the group.

Chapter Six: Conclusion

This research aimed at checking the effectiveness of the Narradrama method in shifting identities of domestic workers.

Narradrama, as a method that was developed by Dunne is centred on story (2013:7) and was found to be effective in working with a group of African women. This was based on the notion of women as storytellers in the African culture. Scheub (1970) explained that story telling in African culture is a social and performative experience, and a means of transmitting information (119-120). It was noted that the participants in the research found Narradrama accessible and engaged with its techniques, which included projective techniques that invoked the stories as well as performative elements of embodying and enactments of the narratives.

The research showed that the Narradrama method was effective when working with a group of South African domestic worker women in shifting their identity. The group has shown that they started shifting towards a positive identity. Though a shift was noted, the researcher is cautious when measuring this shift as the group had only seven sessions and therefore further sessions are needed before participants will be able to show a substantial shift in their identity.

The research used psychological definitions of self-identity as well as Landy's drama therapy Role theory to explain the shift that participants showed as a result of the processes. Self-identity shift, described earlier as being constructed by the meaning that individuals attach to themselves, was measured by the shift between negative feelings participants expressed through their *problem-saturated stories* at the beginning of the Narradrama processes compared with the positive feelings they showed at the last session in their *re-author narratives* which indicate a shift towards a positive identity.

Landy's Role theory looks at identity through its visible form of a role. A healthy person, according to Role theory, is defined by an ability to take on many roles from the taxonomy and play them out in some proficiency as well as to live with paradoxical roles. Through the

processes participants underwent I could suggest that at the beginning participants showed that the roles embraced were limited in quantity and quality, which reflected on their unhealthy identity. The results showed the influence of the social roles they played (of lower class and Pariah) on their affective domain where they presented playing the same cluster of negative roles, like the Coward, Ambivalent (confused) Malcontent (unhappy). A shift towards a healthier identity was noted at the end of session, and one could infer that, although the social roles they could assume were the same, (as their living and working context remained the same), nevertheless participants at this stage could take on a wider range of more positive roles, like: “wise person”, “performer”, “survivor”, or live with paradoxical roles but taking on its counter-part like in the “malcontent” role. Role theory framed and explained the changes in self-identity that individuals shifted towards through the drama therapy processes of Narradrama. This may also indicate the effectiveness of Role theory to measure drama therapy interventions.

The efficacy of Narradrama with the participating domestic workers can also be attributed to the fact that the group was small and everybody had an opportunity to share her story; to express her feelings and be seen by the therapist and the group. In the processes it was apparent that the participants were not used to speaking. They reflected that in their lives they have not been listened to or appreciated for what they have to say. What’s more, they said that they were not used to thinking of their feelings as they had never been asked. This feeling of being seen and acknowledged is important in forming a positive self-identity.

Narradrama uses in its processes drama therapy distancing methods that enabled the participants to project inner conflict into dramatic material and it allowed the problematic areas to be connected to the healing properties of drama. Narradrama could also have been successful because it uses creative arts. The creation of crafts not only helped the participants in externalising the problem but gave them an opportunity to connect to their creativity, which contributed to the enhancement of their positive feelings and confidence.

Narradrama sessions also offered the participants a sense of a supportive community, in which they could share their feelings and situations, and feel they were not alone by being in a community with others. Moreover, as the group is an African group, the sense of community played an important part in building a good sense of self. An understanding of the concept of community Makanya (2014) states is imperative because in indigenous

thought, health and community are inseparable (304). As mentioned previously, Makanya (2014) explains that one attains personhood; a sign of good health, partially by being in communion with others. Similarly, one's good health is necessary for the maintenance or advancement of the community (303).

The Narradrama interventions also offered the participants a sense of ownership by bringing aspects of their culture and language into the processes. It encouraged them to be co-directors in the processes and, with that, renounced the notion of the white therapist coming to heal the marginalised other.

Narradrama as a drama therapy method is considered to be holistic in its world view, but as a westernised method it does not deal with the notion of the spiritual world; which is as important in the African world as the notions of body and mind (Makanya, 2014:303). This is a notion of strength that might have been missed in the process of Narradrama.

To conclude, the Narradrama processes have shown a slight emotional change in the participants' choice of response. I would have assumed that if the group had more processes we might have potentially noted a shift in the identity of the domestic worker participants towards a more positive, healthier identity. I would also assume that further processes would have been needed in order to substantiate whether the participants not only took on a variety on new roles but would also be able to play them proficiently. And this, according to Landy, is necessary for the person to have a healthier identity. This parallels the Narradrama notion which claims that by re-storying a client's narrative, the client has opened up to new preferred choices; a new landscape of identity and action (Johnson & Emunah, 2009:182). The playing of new roles assists participants to enlarge their perspectives, discover new identity descriptions and experience what it would feel like to move forward in life in preferred ways towards a more manageable hopeful future.

The aim of this research was to check the efficacy of Narradrama in assisting a group of domestic workers to shift their identities so they will be able to better deal with their current socially oppressive issues. Though Narradrama proved to be a method that can assist this group we cannot generalise the results of this research, and further research with different groups of domestic workers will need to be done in order to be able to generalise to the wider context of the stratum of South African domestic workers.

The processes of Narradrama have shown shifts and the group have benefited from processes. As the researcher, I therefore recommend that these processes be resumed in order to be able to make these identity shifts substantial, so participants' new stories will be based on a more manageable, hopeful identity.

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APPENDICES

APPENDIX 1

Session aim	Step	Activity
Meet the participants and inform them of the research's goal. Explain what drama therapy and Narradrama consist of and the benefits they may accrue from the processes. Explain what benefit I, as the researcher will have from their participation. Participants sign consent forms in order to ensure the implementation of the ethical considerations.	Introductory session.	-

Session 1. Aim: Create alliances. Finding inner and outer strengths.	Warming up to new descriptions of self- identity and environment	After check in and warm up, group was invited through process of visualisation to imagine a safe place, where they would like to be, if they could be anywhere they chose, real or imaginary. Then I invited them to connect to their inner and outer strength. We had verbal reflection on what are the participants inner/outer strengths We then drew the inner and outer strengths and had verbal reflection on what was added or changed or made clearer when drawing these strengths.
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Session 2. Aim; creation of group cohesiveness and connectedness between group members through projected play and story-invoking.	Warming up to story- invoking by the use of distanced method of projected play as well as by enhancing the group cohesiveness and trust.	Main event; After warm up participants return to the circle and therapist spreads wood, logs and pebbles. Participants are to choose a log or pebble that stands out for them. Participants are asked to each tell a story about the pebble or log they chose. They stand and share their story then change their position to the chosen object and answer: ‘What do you see now?’ Each participant will be tapped on shoulder to tell their story. This will be the first time the participants will create stories and tell them to the rest of the group. These stories are created by a projected play with objects; the pebble and logs. These stories will be acknowledged and shared by the group. 2. In circles, in small groups, they are asked to find commonalities in their stories and to make one story. Using Ntsomi, the traditional way of telling a story, each participant will tell part of the story and if wished act it out. Reflection: let the group reflect first on what they have seen. (Be explicit). While they are telling the story note things they ignore and pinpoint them in the reflection and note what is implicit in their story/ies. With that they can think of creating alternative stories.
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Session 3. Aim: eliciting the ‘here and now’ problem saturated stories through projective play and enactment of the story chosen by sociometry. Use a reflection on how they think their story can change.	1. Externalising the problem 2. Possibility of extension 3. Invite personal agency 4. Invite alternative stories and unique outcomes.	1. Spread around the centre of the space pictures which represent elements in the working space of the domestic worker. Ask people to walk around and take a picture that stands out for them and which remind them of challenging stories they are faced with. Allow them some time alone with the picture to reflect on how they feel about the picture using either drawings or another picture or just identifying words that come with the picture. 2. After each story is told the group will choose one story by sociometry: each person touches the shoulder of the person with whose story they can identify. 3. Enacting of the problem saturated story with its obstacles. 4. Facilitator will ask the protagonist to set the scene of the story, choose the main characters, and enact the story as she perceives it. They are encouraged to mobilize the story, add voices and feelings. 5. Participants are invited to imagine different ways of thinking about the enacted story, and to think of any positive change that could be made to it. They draw or write it or enact it.
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Session 4. Aim: to help them to externalize the problem saturated stories through the creation of problem masks and through the telling of and listening to the problem saturated stories. Aim: to help them to create and experience distancing from the problem. Aim: to help them to relocate their psychological struggles as issues existing outside of them and to develop different perspectives. Aim: to help them to explore different possible solutions and to experience a greater sense of control over the problem and a greater sense of self-efficacy.	1.Externalising the problem 2.Possibility of expansion 3. Externalising choices.	1. Creation of a problem mask to represent the problem (drawing on a paper with crayons and clay sculptures). 2. Participants will then be invited to give their mask a title that refers to the problem it represents. 3. When masks are ready each will share it with the group. 4. Participants then will be invited to create living sculptures (Dunne, 2006). 5 Each participant will invite one group member to play the role of herself and another group member to play the role of the problem. The participant in the role of the problem could either wear or hold the problem mask. 6. Reflection; participants will share a new perspective, thought, or idea they gained about their problems or their relationship to their problems when using masks. Externalization: invite participants to consider choices. i. What has stayed the same? ii. How would you choose to oppose the problem? iii. What can you do to defeat the problem or to change your relationship to the problem.
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Session 5. As everyone has been on holiday my first aim will be to help group members to reconnect. The main event then will concentrate on externalising choices, and working towards preferred outcomes.	1. Possibility of extension 2. Externalising choices 3. Invite personal agency 4. Invite alternative stories and unique outcomes.	I will use an empty chair for participants to find a preferred way to express to their employer their dreams or hopes. They could create a song or use a song they know to expresses their feelings and sing it, or use a dance, or write a poem, or any other suitable action. The participants observing them can add to the strength board the strength they see in the presentations. Also the strength they see in themselves. Through the use of embodiment to express dreams and hopes and the creation of a strengths board I will help participants to externalise their problem saturated stories. Conclusion: Remind them that they are not the problem, ‘the problem is the problem’ as Dunne & Herbert express it (2013).
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Session 6. Aim: to help participants to externalise their problems. Working with embodiment of personal agency; doing first step towards preferred outcomes.	1.Externalising problems 2.Possibility of extension 3.Externalising choices 4. Invite personal agency 5. Invite alternative stories and unique outcomes.	Participants will draw the mask of their future dreams and also their symbol of the future. They will put the two masks on the ground and arrange them with a good space between them. I will ask them to mark where they are now (between the problem mask and their future dreams). Then I will ask what it would be like to take the next step towards their dream. Participants will each show an embodied (movement and sound) image, that will relate to their present position and the role that will take them to the next step (transitional). Then they will choose someone from the group to act out their image which, as director they can change or add to. Reflection: help the group members to find preferred future unique outcomes, firstly by helping them recognise where along the line they feel they are then to identify how close they are to achieving their dreams? They will embody the transitional image of the role they feel they need to take on in order to get to the preferred outcome.
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Session 7. Aim: in previous sessions the group expressed their dreams (their unique preferred outcomes) so this week I would like to work on their personal agency (their strengths in relation to their current situation in life) and how these can help them re-story their lives.	1.Externalising problems 2.Possibility of extension 3.Externalising choices 4. Invite personal agency 5. Invite alternative stories and unique outcomes 6. Re-story life.	Participants were sent an sms at the beginning of the week asking them to bring a story of an issue which they had faced during the week at work. i. What did you say or what did you do? ii. What did you want to do or say but didn't? iii. How did your reaction made you feel? iv. Would you do it in any different way? v. Was your reaction this time any different to the way you reacted in the past in similar situations, or was it the same reaction? I will also ask them to bring something personal either an object or a poem or anything that will remind them and encourage them in moving forward. In the session I will ask them to set the stage with props to enact their story; they can use chairs and dress it, or any other object or use puppets or prop to represent other participants in the enactment. As there were seeds of strength showing throughout the sessions I hoped they would bring some of the strengths that they'd been discovering to their actual stories. I hoped that when they enacted it they would be able to see some differences. They had, already in previous sessions identified their strengths, so they were on the path. My question was would they pick up that strength and put it into the new story. 2. Before the enactment I warmed up each participant as they held their object of strength, so that they could tune into their
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		strength through the object which they have brought with them and that represented their strength. The object would remind them, to access that strength. It is a physical thing that acts as a reminder of their strength, and as much as possible eliminates the negative thoughts they were prone to when dealing with difficult situations. This is a symbolic ritual created to help them deny the customary negative thoughts which come up in difficult situations. Through this they affirm that they can do something that changes it.
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APPENDIX 2

‘The invisible power of the invisibles: Narradrama as a drama therapy intervention to help domestic workers to shift their self-identity perceptions through story.’

Letter of consent

I _____ will take part in the drama therapy research processes with Hanna Yarmarkov as the researcher, and I understand all the consequences. You are chosen to participate in this research and I would like you to take part in it as I feel it will contribute to you personally as well as to the data needed for the research. If you agree to take part in the research you will require attending the processes which will take place once a week on Saturday at 11am, for a period of 12 weeks. There are no remuneration given to any of the parties involved and the participation is purely voluntary. You may refuse to participate or withdraw at any time and no negative consequences will come of it.

Signature_____

Date_____

APPENDIX 3

‘The invisible power of the invisibles: Narradrama as a drama therapy intervention to help domestic workers to shift their self-identity perceptions through story.’

Consent letter for Video- recording sessions

I _____ hereby give my consent that the drama therapy sessions I participate in will be video recorded. I am aware that the data will be accessed only by the researcher and myself and will be kept in a locked file on a password protected computer. To protect my privacy, my personal identifiable information will be removed from study documents and replaced by study identifier. Identifying information will be stored and kept separately. Once the research is completed, all data will be destroyed within two years of the research completion.

Signature _____

Date _____

APPENDIX 4

‘The invisible power of the invisibles: Narradrama as a drama therapy intervention to help domestic workers to shift their self-identity perceptions through story.’

Letter of introduction

My name is Hanna Yarmarkov. I am a Drama therapy Masters student from Drama for Life at the Wits University.

I am conducting a research in which I am inquiring the efficacy of Narradrama as a method to help domestic workers to shift their self-identity perceptions.

The research will take a form of processes with the group of Union members domestic workers.

You are chosen to participate in this research and I would like you to take part in it as I feel it will contribute to you personally as well as to the data needed for the research.

If you agree to take part in the research you will require attending the processes that will run over a period of 12 weeks, once a week on Saturday at 11am (each session is one hour long).

Session will be held at:

SAMWU building,

84 Frederick Street

Jhb Central.

There are no remuneration given to any of the parties involved and the participation is purely voluntary. You may refuse to participate or withdraw at any time and no negative consequences will come of it.

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