Training and research: Art therapy for social justice

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Abstract

This presentation is about decoloniality and reflective practice in relation to arts therapy training, research, and social justice. I assert that practising our profession is a great responsibility and an attempt to align that practice with the broader conversations happening within the Global South. A few more assertions are made from this initial one: firstly, that reflexivity ensures that we learn from ourselves, our past, and then move forward with an openness to being critical. Secondly, I acknowledge that social justice may not necessarily be achieved on a grand scale with reflexivity alone and therefore a more systemic approach may be necessary. Lastly, by acknowledging that social justice in South Africa is a continuation of the fight against apartheid and its legacies of violence, educators and students are invited to contribute to decolonising the ways they engage with training and practice materials in the classroom. The presentation concludes with a suggestion made in collaboration with other applied arts practitioners that education should move toward a critical contemplative pedagogy that encourages the transformation of destructive emotions for skilful action.

Acknowledgements

I would like to thank my former most recent home, the Centre for the Study of the Afterlife of Violence and the Reparative Quest (AVReQ), as well as the Department of Drama, which are both located at Stellenbosch University. Their community of academically rigorous scholars have gifted me with a
vibrant arsenal of resources as I continue to find my voice in this vast sea of
the academy. I would also like to thank my supervisor, Prof Pumla Gobodo-
Madikizela, who is the director at AVReQ and the SARChi Chair in Violent
Histories and Transgenerational Trauma. I thank my co-supervisor Prof Petrus
Du Preez, who is the departmental chair at the Stellenbosch Drama
Department. Both have been great guides and supports during my studies.

Thank you to the Drama for Life department at the University of the
Witwatersrand. I want to acknowledge the immense role it has played in my
pursuit of a career in merging art with the humanities and social sciences. For
a long time, the department was my home, and because of that, I have been
able to nurture invaluable friendships and working relationships. I thank the
multiple reading groups through which I have been lucky to connect with
other thinkers, to be challenged and to grow as an academic. Many of the
conversations in such spaces cultivated inspiration for some of the thoughts I
will be sharing today.

Part of this work is also based on research supported by the National
Research Foundation and the National Institute for the Humanities and Social
Sciences with the University of Cape Town. So, I also thank them.

A keynote address

Scoping the history of art therapy in South Africa informed me of how much of
a struggle it was to practice soon after apartheid ended. I have an idea of the
struggle to practice based on my own experience after qualifying as a drama
therapist in 2015. While preparing for my talk, I was struck by the number
of art therapists who have published in and about the South African context
(Solomon, 2006; Berman, 2011; Dalton, 2018). Today, what I will highlight is
perhaps a reminder and a reiteration of what most of us grapple with within
our various working environments. Without minimising the complexities that
exist within our practice, I think we are at an advantage to critically analyse our
progress thus far because we are still a growing profession. I will specifically
be speaking about decoloniality and reflective practice in relation to training,
research, and social justice. This is because I believe reflexivity is an important
ethic when engaging in social justice work (Schön, 1983, 2017). Reflexivity
keeps us in check. It ensures that we learn from ourselves and our past, and
then move forward with an openness to being critical.
I speak as a drama therapist, but I hope we can all find ourselves in the examples and case studies I will be presenting today. When Kim Berman asked me to talk about my research and the conference themes today, I wanted to weasel my way out of it and find a reason for her to choose someone else. However, a friend of mine reminded me of what I had been aware of since the time of my graduation in 2015: that, at face value, our professions appear to lack the diversity they seek. In other words, more representation of professionals coming from marginalised groups is still needed to make their presence felt in the field: the ‘Biko Blacks’, the queer and differently abled bodies. In this regard, I thought perhaps that the idea of transformation and social justice would be one I could speak about from the viewpoint of individual and collective reflexivity within our practices.

I was made aware of this during my doctoral research when one of my participants, a white woman and a drama therapist, shared with me that when she worked with a group of Black children in a township, she could not help but wonder about the degree to which her whiteness became coercive. In other words, she felt as if the children participated in the drama activities to please her. Scholars who have investigated the dilemmas of working in South Africa acknowledge the ways in which the country’s violent history continues to influence the present (Barnes & Cooper, 2014; Gobodo-Madikizela, 2015; Cooper & Ratele, 2018), and I thought this example was one of those ways.

Anecdotally, it has not escaped me to notice that practitioners who look like me (Black), after training, become somewhat invisible within the structures that try to hold the professions together. Of course, I’ve had private conversations with my Black peers before, and the invisibility I speak of appears to connect to a deeper historical wound. To this, a question I might ask is: how can we, as creative arts therapists on the African continent, begin to unpack historical wounds together?

I trained as a drama therapist, registered with the Health Professions Council of South Africa (HPCSA), and practised professionally for two years before deciding to pursue a doctoral degree in theatre and performance studies. I found comfort in running workshops as a drama therapist instead of strictly calling my workshops drama therapy. This was not because I lacked

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1 Kim Berman is a visual arts professor at the University of Johannesburg and the convenor of the University of Johannesburg’s Art Therapy in the Global South Conference with the theme Training Art Therapists for Social Justice, Johannesburg, July 2023.
the confidence to call my work drama therapy, but rather, I found that a collaboration with other social justice workers asked for a negotiation of space, expertise, and boundary setting. And so, as I did my drama therapy-inspired work, my comrades—and here I am deliberately speaking about drama therapists of colour—would reassure me that the work was necessary, important, and indeed a form of drama therapy. It was in practice that I really began to see how the work thrived in communal settings; that the therapeutic space could extend beyond the confines of a room one leaves behind at the end of the day.

**My research as an entry point**

The awareness of my practice with other collaborators allowed me to think about the politics of place, space, the body, and healing within our creative arts professions in South Africa and, dare I say, on the continent. My doctoral research, therefore, began to develop an enquiry about the experiences of drama therapists and applied drama and theatre practitioners working in South African contexts. This was aimed at understanding some of the ways in which their working environments impacted them. The information served as a barometer for the kinds of support they may need in the future. In order to understand their experiences, I viewed the wider South African context as a complex web of interactions that places practitioners against competing forces or what Honig (1994) calls dilemmatic spaces, a complex web where dilemmas interact. The findings suggested that the complexities of various working environments go beyond spatial and relational dimensions to include an embodiment of space (Qhobela, 2023). Knowing the experiences of practitioners was preliminary to a study that considered how to resolve what was dilemmatic about their experiences, as well as expand awareness of the emotional labour engaged by them.

I had not seen it then, but I think the research offered various points at which we can explore reflexivity as creative arts therapists. When I speak of reflexivity, I am not only speaking about the conscious mind reflecting on self and others. Instead, I also include the history that is embedded in the walls of buildings, the materiality of objects, and how that history ‘enters the room’— if you will (Gordon, 2008; Legg, 2013). The beauty of our work as creative art therapists is that our various media allow us to transform spaces and offer approaches that are not confined to normative ideas of health. These
approaches are clinical and also consider the socio-cultural health injustices experienced by various communities in South Africa. For example, I turn to a workshop I ran with another drama therapist at the Groote Kerk in Cape Town last year (Qhobela, 2023, p. 12-14, 16).

The workshop reflected on the possibility of re-imagining historical sites and archives as therapeutic points of departure. It was based on the real-life story of Krotoa, later baptised and renamed Eva. She was a Khoi-San woman who lived in the Cape in the 1600s. I would now like to borrow a few excerpts from that reflection\(^2\) to demonstrate what I argue to be an opportunity to listen to the echoes of violent histories and historical trauma for re-imagining how we use space in our professions as a form of social justice.

Our role was like that of an “outsider witness” (Dunne, 2009, p. 174). Meaning, we were there in part, to honour the attendees’ insider knowledge about Indigenous culture, their connection to Krotoa’s history and her burial site. Of course, being Black ourselves, we were not entirely outside of the process as far as being implicated by the fabric of colonial intrusion. I refer here to Steve Biko’s definition of Black, which embraces everyone who is not white (Epstein, 2018).

After watching a performance of Krotoa, Eva van die Kaap, the task was to run a post-performance debriefing session with audience members who were invited specifically for the conversation afterwards. We led the process using story, poetry and, for a short while, song. Singing and poetry have a long history in South Africa and can serve as personal and political expressions of identity (Lepere, 2021; Vogt, 2009). According to Shapiro (2004, p. 175) “poems provide a uniquely critical position from which their authors may ‘interrogate’ salient life experiences”. Poetry speaks to the interior of the human experience (Shapiro, 2004, p. 172).

A few hours before the workshop, Refiloe and I made our way to the church. Upon entry, we could not help but feel the cool air trapped inside the gothic structure and the dark corners that made for a mysterious scene. It was quiet. We were welcomed by massive pews that made us feel even smaller. To our left was a majestic pulpit hoisted by two lions carved out of wood.

Immediately in front of it was an open area with a large carpet on it. It would be the place where the attendees would congregate. One of the ministers at the

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\(^2\) The excerpts were drawn directly from this article: Qhobela, L. (2023). Embracing dialogue as breathing: Exploring drama therapy as a tool for facilitating uncomfortable historical conversations. Drama Therapy Review, 9(1), 9-22.
church, an Afrikaner man whom I will call Hendrik, allowed us to walk around the church to take it in. He would later tell us that the church was founded in 1652 when Jan van Riebeeck came to South Africa, making it the mother church to all other Dutch Reformed branches in the country. For Hendrik, the church was part of the narrative of Krotoa from the beginning and continued to the present day. He went on to share that Krotoa was first buried on Robben Island before her remains were brought to the Groote Kerk. Other governors, such as Simon van der Stel, had been buried there as well. Hendrik was disappointed that the story of Krotoa was never taught to him at school. Not only were we in one of South Africa’s oldest churches, but we were standing on a burial ground. It was in that moment that I became aware of my breath. It had slowed down at the realisation of where we were standing. Although Krotoa’s bones could not be located accurately beneath the church grounds, we knew we needed to tread respectfully.

The second time we walked into the church, the attendees joined us. This time we were greeted by their chit-chatter. The room was filled with people working on various projects; the director and writer of the play were also present. The space was occupied by members of the Groote Kerk congregation, staff, and students from the AVReQ centre, representatives from the Cape Town interfaith dialogues, as well as representatives from the South African Women in Dialogue. As the first speaker, Hendrik opened the dialogue session with a few provocations. His plea was that the church needed to reflect on what was to be done with Krotoa’s story; what was the congregation’s role in restoring the history; and because the church was very exclusionary towards Black people during apartheid, he felt strongly about making it inclusive. Eventually, Refiloe and I would be introduced as drama therapists who would hold the space and allow the group to dialogue. We had not planned an embodied process with the group because of the limited time we had with them. Instead, we decided to use elements of the play as metaphors that would serve as entry points into the discussion. We wanted to remain as close to the play’s themes as possible and usher the conversation in a direction that would allow the attendees to share their experiences. We therefore worked with the metaphor of a table—a significant reference that came from the play that became a symbol of sharing experiences in the dialogue session. It represented a meeting place of different stories, tied together by the same reference to history. Krotoa’s story resonated with the room and inspired more personal stories from the participants.

The Dutch ambassador specifically connected to the moment in the play where the actor playing Krotoa confronted the actor playing Jan van Riebeeck about his
white guilt. That, for the ambassador, was a reminder that he needed to be in the room and sit with the discomfort. He was especially moved by the ramifications of the legacy of his ancestors and felt embarrassed that they lacked the knowledge, almost wishing his people would apologise for their wrongdoing. Volkas (2014, p. 58) notes that:

“What may impede the healing process in collective historical trauma encounters is that the descendants of perpetrators present in the room are not themselves responsible for the atrocities, and the inheritors of the trauma know this. […] By repudiating their own ancestors, the descendants of perpetrators are placed psychologically with the descendants of victims, who together pledge to repair the damage and ensure that it will not happen again”.

The church, bearing the longest history, stood as a symbolic space that contained contested histories and hosted a conversation that brought to the fore uncomfortable truths associated with it.

The Dilemmatic Space as a Therapeutic Space

Part of what the dialogue at the Groote Kerk was attempting to do was to consider some of the ways in which drama therapy can participate in alternative spaces and with alternative topics. Along with a clinical view and a therapeutic theatre view, it can also function as a space for talking about legacies of historical trauma and coloniality. The novelty of the process we ran that day was perhaps that the Groote Kerk served as a physical space that presented complexities related to historical injustices. It stood as a paradox that embraced both pain and hope. As per the play, it presented the dilemma of being judged for its cruelty towards Krotoa—and later Black people during apartheid—while trying to embody godliness.

Similarly, the attendees of the dialogue embodied fragments of that narrative. When we think of therapeutic spaces we often think of non-threatening and arguably places that are semi-neutral to facilitate healing. Drama therapy, like most [creative art therapies], can occupy contested spaces such as those in war zones (Woodward, 2012; Thompson, 2009) and other non-conventional settings. It would be remiss not to acknowledge how the representation of the church stood out as a white monument within the larger heritage of Black South Africans (Meskell & Scheermeyer, 2008, p. 159). A critique can be made about how it is a
‘preservation of place and other cultural expressions’ (Nieves 2007, p. 84) that are outside of Indigenous ones, and raises a discussion about the role of colonialism in the present-day realities of post-1994. Although this is not the backbone of my argument, it does serve to highlight the potential usefulness of engaging such sites in conversations about therapeutic work [and social justice]. I then quote Meskell and Scheermeyer (2008, p. 153) saying:

“Human rights activism, truth commissions, and juridical proceedings are powerful mechanisms for dealing with historical trauma. More materially, South African cultural productions, including objects, memorials, museums, heritage sites, and public spaces of commemoration provide another therapeutic arena”.

While reflecting on Moreno’s psychodrama, Garcia and Buchanan (2009, p. 405) also remind us about how spaces and places are highly evocative in therapeutic work. In the case of the Groote Kerk, it became a therapeutic stage—a site for social justice. The relational element of the church as a space positioned the attendees in it as relational. The relational quality of [it...] facilitate[d] “multistoried conversations” (Dunne 2009, p. 174) expressed through art as different ways of being, conversing—breathing. The conversation cultivated what Dunne (2009, p. 175) calls a purposeful engagement with one’s life history where significant figures—in this case Krotoa’s story—continue to resonate long after their physical presence.

Excerpt ends.

The workshop demonstrated how trauma occupies space, including the body (intergenerationally) (Moonga, 2022, p. 42), and that as we move, we carry traces of this trauma with us. As Puwar (2004) suggests, spaces are not neutral, just as the body is not neutral. Social spaces, especially, are constructed and have their own history.

In what ways are creative art therapists challenged by the contexts they occupy? I ask this because reflexivity also demands an awareness of one’s body and the politics that enter the therapeutic room with us. Our clients sense it. We sense it. Moreover, Moonga (2022, p. 37) notes that the lived realities of South Africans are disconnected from the ideals of the Constitution. We continue to inherit the unfinished business of the past, and so to address it, we cannot ignore it.
Training

As far as training is concerned, beyond the inequality that is rife within the communities we work with, in the context of this conference, one might ask: In what ways do South African contexts exclude the trainee and why? Why is it that most therapists do not necessarily reflect the population groups in which the work is intended? What kinds of reflective practices are needed to support the development of all trainees? What challenges surrounding care and wellbeing begin to emerge? How do we transform the face of arts therapies without ‘tokenising’ the Black body in these spaces (Ngema et al., 2022, p. 240)? Standing here I wonder about the extent to which my presence is that of tokenism. I say this not to stir unwarranted discomfort in the room but rather to invite all of us to think about the roles we play in training and therapeutic spaces because our context presents the trainee and the therapist with complex encounters.

Students typically enter training programmes bringing parts of their art and community along with them. As artists, they are influenced by and respond to the world around them (Hauptfleisch, 1997, p. 2). Although their reflections cannot illuminate entire societies, their insights about their experiences of artistic practice contribute to how they experience their training environments. We see how our tertiary learning institutions offer supportive learning by integrating reflective practice as part of the construction of the therapist (Gordon-Roberts, 2022, p. 86). I think it is useful to uphold such standards because trainees get the space to deliberate and encounter their own epistemologies, which in turn may help them prepare for responding in and with communities (Guhrs, 2022; Balfour, 2010, p. 55).

Draper-Clarke (2022) notes that training creative arts practitioners within the South African context comes with five challenges: the prevalence of trauma, internalised oppression, and dominance, holding complexity and paradox, personal sustainability, and the fear of speaking and writing reflexively. To address these challenges, she poses a move toward a critical contemplative pedagogy that encourages the transformation of destructive emotions for skilful action (Draper-Clarke, 2022, p. 150). I believe a transformation of destructive emotions for skilful action places trainees at the forefront of new knowledge production by problematising how things have always been done (Qhobela, 2023, pp. 26-27) and by creating a “pedagogy of discomfort” (Boler, 1999).
When it comes to research and social justice, Camea Davis (2021, p. 119) says:

“Research capable of protest and advancing justice must go beyond the study of minoritised persons lived experiences toward validating and sustaining their epistemologies, literacies, and languages in ways that embody their liberation. Otherwise, the social justice research agenda becomes another form of oppression for minoritised participants and researchers”.

Practising our profession, therefore, is a great responsibility, one that I want to align with the broader conversations happening within the Global South. In our African contexts, I hope you would agree with me that a decolonial lens is a lens of ethical practice. I think we live in a world where it is difficult not to consider a multi-disciplinary approach to research, as our various mediums already do that by default. There is dance, art, and music in drama therapy, and storytelling in art and music therapy, among others. As Talwar (2020) suggests of art therapies, intersectionality becomes imperative to address issues of historical oppression and marginalisation of people due to sexual orientation, gender, and people living with disabilities. In the same breath, she advocates for diversity in our practice.

**Curricula**

To stay with the theme of decolonisation as a form of social justice, as far as curricula are concerned, I wonder whether programmes are intentional in encouraging students to be mindful of who they cite in their work. As important as psychodynamic and psychoanalytic texts are, we also cannot neglect seminal thinkers within the wider humanities and social sciences who might inform us of alternative ways of interpreting the world. They have already helped us understand how sociological, anthropological, historical, and indeed, economic injustices unfold and impact communities. This consideration may be reflected in the kinds of research outputs we hope to generate. I believe that if we are to challenge Eurocentric approaches to psychotherapies, then we need to be willing to continue, as many of us are trying to do, to learn from other African researchers. Ngema et al. (2022, p. 239) says:
“In the scholarship of decoloniality, this is the legitimacy of expanding what we imagine of the intellectual—a place where one discovers new ways of seeing reality and frontiers of difference”.

Within the academy, Moosavi (2023) asks the question whether we are decolonising or merely performing decolonisation. He asks this question because there is a tendency within curriculum development to keep the conversation on the fringes either as a sign of resistance or ambivalence. I think we need to be mindful of what we have internalised of the Western canon in our practice. I think that, in our teaching of creative arts therapies, we could benefit from making specific psychology and art readings available. Here, I think of scholars such as Joseph White, Credo Mutwa, Mamie Phipps Clark, Frantz Fanon, and contemporaries. Given where we are in our history, perhaps it would be unwise to discard the usefulness of what the West offered, of course. However, our task now is to continue to build on the scholarship of the Global South by writing about the work we do to encourage the development of African-centric therapy.

Another point made by Moosavi (2023, p. 143) asserts that:

“While a mere diversification does not necessitate a decolonial shift, introducing students to scholars, theories, topics, solutions, case studies, or concepts that have been relegated to the periphery due to coloniality is a common approach to decolonising the curriculum”.

Inviting students to problematise with lecturers may further decolonise the ways we engage with training and practice material. In other words, inviting a critique of the very materials said to be on the fringes. While standing in as lecturer for honours in a Drama Therapy course a few years ago, I remember inviting my students at the time to identify cultural practices, objects, or performance art forms from the African continent as a way of encouraging an appreciation for heritage as/for therapy. It was a short lesson, which could have been developed further. To borrow again from Moosavi’s (2023) sociological research on decolonising curricula, my short experiment could have been developed as a collaboration between students and lecturer; for example, one could have tasked the students to find thinkers within their cultural arsenal and present to the class their relevance to creative art therapy approaches. This way, one might minimise the potential to be biased towards
certain scholarship chosen by the lecturer, as well as the potential to exclude the learners’ sense of identity in curricula. At the same time, it might build on an archive of African-centric approaches to our practices. This approach, as I would argue, is warranted by the kind of pedagogy we already employ as creative art therapists, such as modelling a client-led approach in our classrooms.

Conclusion

Of course, social justice may not necessarily be achieved on a grand scale by doing this alone, so a more systemic approach may be necessary (Moosavi, 2023, p. 148). Perhaps the approach should be aimed at managerial levels where structures often demonstrate the colonial grip. We may also consider quantitative studies rooted in social justice frameworks as they may offer perspectives about the growing impact of the various projects we conduct. Responding to coloniality in our work is an emotional project that often requires us to engage in emotional labour for the work to move forward.

To summarise, one might say that social justice in South Africa is a continuation of the fight against apartheid and its legacies of violence. If we are to think of the future of arts therapies in South Africa and on the continent, we have to acknowledge the colonial past that comes with each context. I have yet to interrogate contexts outside of South Africa. However, looking at South Africa, one already has access to its colonial past and the present legacies of apartheid. This legacy is arguably the prime culprit for social injustices as we experience them in the present. The inequality that faces this country permeates and manifests itself differently in various spaces. In Gauteng, it is one thing, and in the Western Cape it is another. So, we have much work to do. However, this is why we are here.

For as long as we are faced with inequality in South Africa (and the rest of the continent), I am encouraging all of us to continue to grapple with training, research, and social justice from the perspective of critical reflexivity. The kind of reflexivity that embraces the discomfort of acknowledging our privileges and shortcomings, as well as the places and spaces around us that hold so much history. What privileges do we walk in with when we meet with clients? What limitations do we have? As neutral as we wish our bodies were—and they are not—what politics are potentially ignited because of our race, gender, social
status, ability and so on, such that we can continue to rework and redefine our curricula?

I invite us to appreciate the work that will be shared and continue to grapple with the meaning of social justice in our African contexts. Let us continue to be mindful of culturally specific frameworks and embrace the process of being reflexive.

Thank you.

Reference list


Qhobela, L.P. (2023). “We never talk about our work in this way”: A practice-led research exploring the experiences of Applied Drama and Theatre practitioners working in Gauteng and the Western Cape. Stellenbosch University (doctoral dissertation).


