Embracing resistance, inclusivity and photography in art therapy: A South African context

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Bio

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Abstract

The original objective of my study was to research the role of art therapy in enhancing the private collective self-esteem of black South African students. However, this research led me to identify alienation and resistance to art therapy. Private collective self-esteem is the view individuals hold about their social group, and private collective self-esteem affects their self-concept. Resistance can be a normal occurrence during artmaking in art therapy, and understanding the causes can help create a safe and culturally inclusive therapy and mitigate the resistance through the choice of art materials. The data for this research was collected through self-study and four group sessions with three participants. Only one participant attended all four sessions. The process used was photo art therapy, and the data was analysed through thematic analysis using a theoretical framework of intersectionality and social identity theory. The three clients were reluctant to engage with the art materials and preferred using photographs. The analysis indicated that even though art therapy clients are not obligated to have artmaking experience, knowledge of artmaking processes and an understanding of art therapy can help the client feel safe in an art therapy environment. Therefore, photographs and culturally appropriate materials can help clients struggling

with resistance to artmaking. Furthermore, art therapists who understand clients' artmaking history can help create a safer space for their clients.

Introduction

This article developed from my dissertation, which was part of my master's research that explored the alienation I experienced as an undergraduate at university. This alienation was due to language barriers and led to me questioning my race, my value, and my place within institutions of higher education in South Africa. I found this sense of alienation a common experience among some of my fellow black students. Therefore, the alienation caused by being in a university environment was a focus of my master's research due to my experience while completing the art therapy sessions, which were a focus group with black students, to investigate if photo art therapy can increase their private collective self-esteem. I extended my investigation to include the potential alienation of participants in therapeutic contexts due to the art materials, exposure to therapy, and artmaking experience. This understanding of the relationship between art materials and alienation can be traced back to my experience of lacking visual artmaking in my culture and community. The initial aim of the therapy sessions was to work through my understanding of alienation in relation to the participants' experiences of alienation itself. However, I discovered that the art materials alienated the participants further. This alienation was noticed through the resistance they showed during artmaking in the research sessions. This resistance was mitigated through the participants working with photographs.

I am a South African woman who grew up in rural Limpopo and from the Bapedi culture. I am currently training as an art therapist. The Western idea of visual art does not exist in the part of South Africa where I am from. Artworks are seen as functional rather than decorative or conceptual. Nor is visual art taken seriously as a school subject. A visiting teacher only offered visual art classes a few times a year. My experience of cultural visual arts and materials was limited to wood carving in the form of *sego sa meetse* (gourd bowl) and working with raw clay taken from the backyard. Figure 1 is an example of a car my nephew made with clay he took from our yard.

Figure 1: Raw clay car, photograph by author, 2024

My limited experience and knowledge of visual art made me wonder how many other South Africans like me come from cultures that do not embrace art as decorative or conceptual and if this experience could result in clients struggling with resistance to art therapy.

The theoretical foundation of art therapy is Euro-American. My experience affirms this Eurocentric culture, as highlighted by Talwar (2004). Over the past decade, extensive research has been done on the importance of art materials in art therapy. Catherine Moon (2011) reflects on the theoretical underpinnings of materiality in art therapy. Moon (2011) also discusses the social constructivist theory of materiality, which is relevant to this article, suggesting that the relationship between the creator and art materials is not independent of social context. Therefore, the significance of art materials is determined through an interpersonal context.

Corrina Eastwood (2021) and Rachel Brandoff (2022) point out the Eurocentric nature of visual materials and emphasise the need to critically analyse our culturally informed understanding of aesthetics and semiotics, including what informs our choice of art materials. While the value of art materials in art therapy is not disputed (Orbach, 2006; Sinir et al., 2017; Malchiodi, 2011), in my view, there still needs to be a greater awareness of issues of culture. This cultural awareness is crucial in the South African context, as a lack of consideration for cultural contexts might alienate clients in art therapy and result in the clients experiencing resistance to artmaking.

The cultural origin of art materials is often more profound than we think (Perk et al., 2020). It becomes imperative to think of ways to be culturally

inclusive in our art therapy practice through the choice and availability of culturally relevant materials so that we do not alienate some of our clients who perhaps do not have artmaking experience. Therefore, the question emerges due to South Africa's cultural complexity: How does an art therapist create trust through art materials in the therapy room in a diverse country such as South Africa?

Based on my own experience and relationship to art materials, I found I connected with photography more than with drawing, painting, or making an object. Therefore, I chose to use photographs taken by participants as part of the methodology. My confidence with photographs (making and looking at them) was because the documentation of significant life moments and family photographs has always been a part of my life. As a child, the local photographer in our village, Malome Jeff, visited our village every month to take pictures of people and families. He charged ZAR10 for a photograph and was often present during graduation seasons and important ceremonies. This familiarity with photography is important as it focuses on my relationship with photographs rather than traditional artmaking materials. As I felt comfortable using photographs, I thought the participants might also relate better to photographs than other materials.

Photographs played a significant role in the study by acting as catalysts for the artmaking process and mitigating the resistance to artmaking. This result could provide a framework for how photographs can be used in the South African context to reduce alienation, as they are a material with which most South Africans are familiar. The acceptance of using photographs informs the need for culturally inclusive materials, as they are also materials with which individuals may be familiar.

Figure 2 is a photograph of my younger self taken by the village photographer Malome Jeff, who inspired me to experiment with photography as an art therapy medium.

Figure 2: A younger me, photograph by Malome Jeff, n.d.

Figure 3 is an artistic image I took of my village in Limpopo, where artmaking took place and where I first learnt to confront materials and the artmaking process.

Figure 3: My village in Limpopo, photograph by author, 2024

The images above are provided to offer context for the reader.

Furthermore, this article locates the research participants and presents an idea of the intersubjective identities they bring. As mentioned above, this article focuses on the Western influence of art therapy and how this influence could alienate participants in the South African context. Another aspect this article considers is artmaking with people from Bapedi and Zulu cultures, how cultural context may be a reason for resistance, the complexity of culture, and cultural influences on interpretation by both client and therapist. This article also sheds light on the importance of culturally inclusive art materials.

The literature review comments on photographs in art therapy contexts. The methodology section demonstrates how photographs were used in the research and can be used within an art therapy context. I thereafter reflect on what I concluded from the sessions, and finally, I present the recommendations for future art therapy researchers in South Africa, the limitations of this study, and my conclusions.

The original study was aimed at black university students, and three participants responded to the invitation to participate. The three participants came from various rural areas within South Africa. For the purposes of this

article, I chose to focus on the processes and feedback from Participant C due to their receptive engagement with the sessions and because they were the only participants to attend all four sessions. Participant C is a 19-year-old black woman who hails from rural KwaZulu-Natal. She lives on the university campus and is from the Zulu culture.

Literature

Materials and materiality in art therapy

Moon (2011, p. 60) sheds light on factors between client and art materials within the art therapy space regarding the influence of physical and sensual characteristics:

The active, embodied, sensory experience of engaging with materials evokes associations with both personal and cultural histories. The sight, sound, touch, smell, and taste of a material, as well as the artist's physical, embodied encounter with the possibilities and limitations of that material, influence the meaning and significance attributed to the experience.

Art therapy has been growing globally at a rapid pace; however, the pace at which art therapy is growing does not match the pace of research into art materials from various cultures (Park et al., 2020). Previous research focuses on the therapeutic impact of conventional art materials, such as coloured pencils, crayons, clay, and magazines (Park et al., 2020). Taking the South African art therapy context into account, most of the research conducted on art materials has predominantly sampled individuals with artmaking experience, and most are not people of colour. Manana (2023) reflects on the cultural differences of South African individuals not aligning with the Western models of art therapy. This cultural misalignment highlights the need for more culturally informed art therapy practices reflecting the South African context. Acknowledging that art therapy is a new practice in South Africa is essential. South African art therapists should be aware of how "culturally unsuitable materials can result in art therapy's indirect Euro-American enculturation and colonisation" (Hocoy 2002, p. 142), which may disrupt the therapeutic relationship and benefits of art therapy.

Drawing on the social constructivist theory, what we consider valuable and significant is often socially constructed, drawing on cultural practices,

economic factors, and access (Moon, 2020). South Africa has a complex social context, with various cultures among people of the same race. Our varied cultural contexts influence the materials we see as valuable and how we interact with those materials. However important race is, it is also equally important to consider South Africa's diverse social and educational cultures when working within art therapeutic practices.

Exposure to art materials and visual artmaking in Bapedi rural Limpopo communities and Zulu culture

This part of the review focuses on art materials and artmaking, specifically in the Bapedi and Zulu cultures. I chose to focus on these cultures because I am from the Bapedi culture and Participant C is from the Zulu culture.

South African black communities have a long history of creating art for functionality. Materials in African art are often resources that are available locally. Materials such as wood, metal, beads, and textiles play a significant role in creating objects. Textile art is well-known and recognised for its rich cultural significance and symbolism.

Literature from Tebogo Maahlamela (2017) and Morakeng Lebaka (2019; 2017) shows that visual artmaking is not a prominent art form in the Bapedi culture, as most of the cultural documentation of art and artmaking mentions poetry, music, performance, and storytelling. Lebaka (2019; 2017) reflects on the societal value of art and music in the Bapedi culture. Maahlamela (2017) discusses cultural art forms in the Bapedi culture, mentioning the traditional Bapedi art forms of *thetotumisho* (oral poetry) and Kiba. Some of the traditional cultural Bapedi dance art forms are *dinaka* (includes song), *sekgapa/khekhapa*, Leboa, *makgakgasa, mokankanyane, mararankodi, mmapadi,* and *mantshegele* (Maahlamela, 2017).

Even though there seems to be no documentation of visual artmaking in the Bapedi culture, in my experience, I found that materials such as *letsopa* (clay), *boloko* (cow dung), and dried *lerotse* (gourd like melon) to make *sego sa meetse* (gourd bowl) were used in my community; however, no one called using these materials artmaking. Thus, since each culture is familiar with specific materials, it would be useful to include the materials in the art therapy space as the inclusion assists in averting a sense of alienation by individuals who have no pre-exposure to artmaking.

It is important to note that clay is already being used in art therapy, with an assumption that the clay can evoke triggering feelings in clients. However, from a cultural perspective, this might not always be true for individuals like me who played with clay in their childhood or those exposed to clay before the therapy sessions commenced. Figure 1 illustrates clay art made in a Limpopo village context.

One art form created in Zulu culture is basketry. Anitra Nettleton (2010) documents that, historically, the baskets were called *imbenge* (pot covers – isiZulu). *Imbenge* are made using a coiling method, similar to the method used in making clay pots (Nettleton, 2010). Artmaking has cultural significance in the Zulu communities, such as clay-pot and basket making (Nettleton, 2010). Making pots and baskets is a functional art practice in the Zulu culture. Artmaking served a functional purpose, and this skill still exists and is passed down generationally.

Complexities of culture and its influence on interpretations

Kit Sinclair (2019) defines culture as learned, based on both the group and individual, socialised in, and involving the knowledge, morals, customs, habits, and laws of a specific group. In South Africa, we have various tribes among members of the same racial group. According to Sinclair's (2019) definition, members of a race and even of one tribe can be socialised differently depending on their environment and thus may have different cultures. This cultural complexity sheds light on how complex culture is and how complex the culture of clients seeking art therapy in South Africa could be. The complex presentation of culture is a challenge that requires us to keep learning and interacting with our clients from an intersectional perspective.

Photographs and photography in art therapy

Rosy Martin (2009) points out that photographs can be used in multiple ways and forms; one form uses found photographs, decontextualises issues, and guarantees anonymity. One way photography can be used within a therapeutic relationship is through photo art therapy, which is defined by Judy Weiser (2015, p.164) as "a specialised adaptation of photo therapy techniques which can be conducted by an art therapist showing that photographs can access unconscious material and explore what is underneath". Photo art therapy is

a branch of phototherapy that clients can only do in the presence of an art therapist (Weiser, 2015).

Photographs carry multiple narratives and can be projected onto the person analysing them (Martin, 2009). Another form of photography used as a catalyst for communication is from personal family albums, and these "provide a rich resource for autobiographical storytelling" (Martin, 2009, p. 70). There are multiple ways photographs can be used within a therapeutic relationship and possibly for research to harness the power of photographs (Martin, 2009). Furthermore, Martin (2009) states that photographs can stimulate storytelling, allowing us to tap into the unconscious and express things without self-silencing being evoked.

According to Claire Craig (2009), photographs also improve an individual's confidence and self-esteem due to the affirming nature of image-making. Del Loewenthal (2013) explores instances where art therapists use photographs in clinical settings and states that this method is a form of phototherapy that therapists sometimes adapt by introducing other art activities more typical for art therapy, like photo-collage. In a study with Korean adolescents, Jee Hyun Kim (2022) uses smartphones to take photographs in an art therapy intervention to alleviate stress levels and promote self-esteem. While a few instances of photography are being used in art therapy settings, there is not enough data to demonstrate the effectiveness of this approach. The possibility for such evidence is then presented by research that uses this methodology.

There are five phototherapy techniques used in therapy. The five techniques are photos taken by clients, photos taken by other people, self-portraits, autobiographical photos and photo projective interactions (Weiser, 2015). I outline below the only phototherapeutic technique used by the participants in this research, namely photos taken by them as an artistic expression.

Methods

Data collection

This study conducted two separate data collection processes: self-study and four art therapy focus group sessions with three participants. I conducted the self-study over two weeks, which involved taking photographs and creating

images using the photographs as a starting point. Later, I conducted the four art therapy focus group sessions over four weeks with the participants. The sessions took place once a week for 90 minutes. The session started with three participants, all of whom were women. Only one woman (Participant C) attended all four sessions. The research question dictated the choice of sampling because it focused on black students' experiences in higher education. The sample represented black students in university because the research speaks to black students' experiences. However, the sample did not fully represent all black students, which, through an intersectional lens, makes the data biased. I note this bias as I am also a black student. Thus, I attempted to mitigate this bias by including self-study and the supervision of the group sessions.

Conducting the self-study before the group sessions gave me insight into developing the process and helped me revise the prompts I initially planned to use.

Data analysis

The data was recorded through audio recordings and images and then analysed thematically. I used reflexive thematic analysis, which involves coding data carefully to identify patterns within the data (Maguire & Delahunt, 2017). During the coding process, the researcher aims to remain self-aware and reflect on how their own biases, experiences, and perspectives as a researcher directly influence the process of interpretation (Maguire & Delahunt, 2017). The data was then interpreted through an intersectional and social identity theory framework.

Findings

Conducting the self-study section involved taking photographs and then later using them as starting points for the artmaking. I created artworks by taking the photography process to reflect and make sense of my thoughts and experiences. The artmaking afterwards was usually met with resistance to the making.

I found my resistance towards the artmaking part of this process interesting as I have created art many times in both studio practice and my own time. Due to this resistance, I used art materials with which I was comfortable

and familiar. Figure 4 shows the artwork made in acrylic paints, which are a familiar and safe medium for me, so they helped the artmaking feel like a safe space to hold my emotions. Acrylic paints are comfortable for me because I often use them in my studio practice when making art (Figure 4).

Figure 4: Comfort (created by author), photography by author, 2024

This need to be familiar with art materials was also evident in Participant C's choice of materials. In Figure 5, Participant C demonstrates a sense of having grown accustomed to pencils and that the pencils were safe for her due to familiarity. Pencils, as mentioned above, are considered a traditional art material. However, in South Africa, pencils are familiar due to how cheap and accessible they are.

While this article mainly focuses on Participant C, as she was the most committed, it is important to note all three participants' resistance to artmaking. In the first session where all three were present, instead of making art, the present participants spent time creating a group contract. The participants indicated they did not want to create art but were open to discussion. Within my observation, I found a sense of resistance to art therapy itself, and I feel that this may be because art therapy is something unfamiliar and not 'normal'. This unfamiliarity with art was evident in how art was also seen to fit into a limited category, as one referred to it as drawing. In instances where therapy/art therapy is unfamiliar, it is important to adequately explain "what it is and what it is not" to allow individuals to see potential benefits better (Malchiodi, 2012). To get the participants to engage with artmaking, I put a big piece of paper with various art materials in the middle of the room.

I suggested that they could create a mark if anything came up, and no one created anything. This idea of art therapy as 'drawing' was solidified in the second session when Participant C created a pencil drawing. This drawing demonstrated the role of familiarity and one's understanding of art itself. She went for the material she was familiar with and created art based on her understanding of what art is (Figure 5).
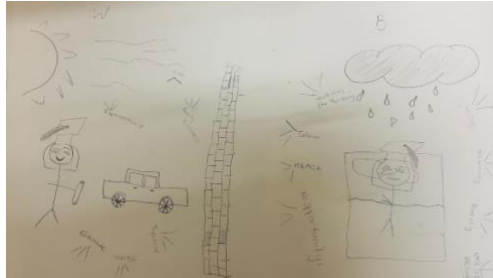

Figure 5: Comfort, photograph by participant C, 2024

In most of the sessions, Participant C picked up a pencil. Then, before creating any artwork, she talked about the images she had photographed. Taking pictures seemed to be easier for Participant C. This ease was because the photographs depict reality and show things as they are, and she was concerned that she might create something I would not understand. She was overthinking the artmaking process and told me that she did not know what to draw, which again returned to her idea about art therapy and art itself being just drawing. Noticing Participant C's discomfort was significant as she resisted making art.

We both reflected on her resistance to artmaking. Participant C commented that taking photographs made the experience more practical as she could see her mental images depicted more clearly in the photographs than in what she had drawn. She seemed concerned about my perception of her drawing, displaying a sense of inadequacy and a fear of judgement. She did not have this sense of fear and inadequacy about the photographs, as they were representations of reality, and she did not physically create these representations. I realised that for her, taking photographs did not require specialised skills with which she was unfamiliar. I realised that she felt safer sharing and projecting her feelings onto photographs rather than risking the vulnerability of creating an image which was not good enough, in her opinion.

Similarly, Donald Winnicott (2016) notes the importance of a "good enough" mother when faced with her new infant. I infer there was a fear of not producing a good enough image in this instance. For Participant C, good enough meant a photograph rather than a hand-drawn image. Figure 6 includes some of the photographs she took. More photographs were taken compared to the artworks created in the sessions by Participant C and me, indicating less resistance to the photography process than the artmaking.

Figure 6: Photographic collage, photograph by participant C, 2024

In the third session, I was interested to notice that Participant C was more open to using paint/art materials in this session, perhaps due to having built a sense of trust that the witness (myself as a training art therapist) would hold within the space. Importantly, I noted that in this session, she became

more expressive with her art making, and there was less resistance to both the process and art materials. I have found this expressiveness to result from embracing her resistance by allowing the expressiveness to exist in the therapeutic space. In addition, Participant C was allowed to take her time with the making.

After giving Participant C a prompt, she held a pencil for a while (which is a material that she picked up every time, even when she was not going to use it). This pencil preference demonstrates the safety and familiarity created for her whenever she was experiencing resistance. Moon (2020) reflects on how familiarity with materials may hinder or encourage expression. Participant C spoke about how her marks are the positive thing she brings to the university. I then suggested she create an artwork. She spent some time on the photographs before starting to create. In this session, she created two more expressive images than those created in previous sessions. Figures 7 and 8 demonstrate how expressive she became compared to Figure 5. This expressiveness shows how familiar materials made her feel good 'enough' (Winnicott, 2016) to create a mark and be expressive with her, indicating less resistance.
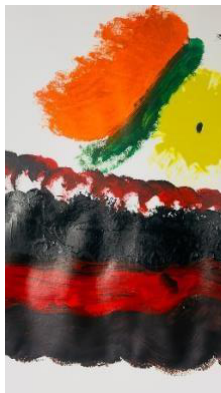

Figure 7: Perceived butterfly, photograph by participant C, 2024

Figure 8: Diversity tree, photograph by participant C, 2024

Cultivating cultural inclusivity through familiar art materials

Participant C and I reflected on the sessions and recognised resistance to artmaking from both myself and her. The resistance to creating was less whenever we used photographs because the photographs seemed to be less alienating and intimidating. Familiarity with photographs and other art materials seemed to play a significant role in what Participant C made. The photographs offered some level of safety that I think the other art processes could not.

When discussing making an artwork with a pencil or paint, Participant C said, "I don't know if you will like it, but I know with pictures [photographs], a building is a building". Participant C often wanted to ensure that I understood what she made and seemed to fear judgement from me whenever she was invited to create art. Her fear of judgement demonstrated a need for validation from me and perhaps a lack of understanding of what art therapy is.

In the intake session, I explained what art therapy was and what the expectations for the sessions were. However, Participant C still felt a sense of fear that the art she would create would be inadequate. She seemed to believe there was an expectation of what the art should look like and that she needed my approval and validation. This sense of inadequacy that Participant C felt might indicate resistance to the therapy itself. However, with photographs, there was a protective distance factor when using a camera. Prior skills and knowledge were not needed, and it was possible to project meaning onto

images in a less personal way, as there was no need to justify how the image looked (Martin, 2013). The image was simply a reflection of what already existed. Therefore, the photographs represented a created reality through the materiality of a created image but with less personal artistic expectation.

It is important to note the intersubjective identities the participants came with and the identities' complexities. It is therefore impossible to make simple assumptions or definitive conclusions about why this resistance to making artworks existed. Reasons noted in this research are prior exposure to artmaking, one's understanding of art, cultural background, and one's understanding of and relationship with therapy/art therapy.

The factors identified in this research were that participants were unfamiliar with the materials, had no prior artmaking experience or exposure to artmaking, and lacked an understanding of art therapy. One's culture can influence these factors, and one way we can be culturally inclusive is by having what clients are familiar with at our disposal. The pencil and photographs are examples of familiar art materials for Participant C, which she usually gravitated towards before making art. I hypothesise that the familiarity of these materials helped ease her into making art, causing her to experience less resistance. The progression of Participant C's artmaking shows the value of photographs when creating a safe space, which allowed her to explore other mediums with which she was less familiar (Figures 5, 7, and 8). Therefore, I feel that the presence of culturally inclusive art materials and familiar art materials could help create psychological safety and confidence within the client to get to a place where they feel comfortable enough to explore and engage with other art mediums and use the art therapy sessions.

Limitations

The sample size was too small and not fully representative of all black South Africans; however, it provided insights that can inform future researchers and art therapists to consider in their practice.

Recommendations

Only two cultures were represented in the research. Therefore, future researchers must include a more culturally diverse group and a larger sample size. The findings from this small study suggest that art therapists practising

in South Africa need to be aware of materiality linked to culture and consider the sensitivity of cultural experiences of prior artmaking.

Conclusion

It is demonstrated both in the findings and discussions that unfamiliar art materials can alienate individuals who seek art therapy. This alienation can result in resistance to creating art in sessions. The resistance can be mitigated through using familiar materials, which in this case can be culturally inclusive materials and photographs. It is important to remember that South Africa is a diverse country and that individuals who seek therapy have multiple intersubjective identities; thus, one person's experience cannot be generalised. These identities affect how individuals interact with materials and the artmaking process. Embracing this resistance means allowing it to exist and being curious about it, which can better improve our practice. We are then presented with a challenge as art therapists in the context of South Africa: How do we become more inclusive in an overwhelmingly diverse and complex society such as our country?

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