

Grief, relief, and belief: Transpersonal arts-based therapy for abortion-related loss and grief

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Bio

After 25 years working in television and video production, Gillian Brollo began studying again to re-train as an arts therapist. She has an honours degree in Drama, a master's degree in Film and Television, an honours degree in Psychology, and a master's in Drama Therapy, all from the University of the Witwatersrand. She is currently doing her internship as an arts therapist. Brollo has extensive life and work experience and is exploring ways to use arts therapy to help people find ways to live lives that are more playful, meaningful, and manageable.

Abstract

This article outlines the rationale behind a drama therapy-inspired workshop for grief work with women who are distressed after an abortion. The aim is to explore whether embodied creative activities can help women come to terms with their distress after an abortion. The four participants self-selected. This research uses transpersonal drama therapy ('mountaintop perspective') and a multi-dimensional framework that includes African cosmology in which living beings are connected to the dead. The research uses a grief theory theoretical framework and is an exploration of post-grief resilience theories. The methodology used to explore the post-abortion distress of women who found the experience to be lonely and silent was through a workshop. The workshop techniques used were body mapping, doll making, rock carrying, breathwork, and letter writing. Grounding to material elements was consistent. The study found that participants had applied rituals to reach closure. The drama therapy allowed the participants to imagine a future where the abortion was

in the past. One surprising finding is that the spiritual aspect of existence is persistent, even if un-lived and un-described.

Keywords: Abortion, arts-based therapy, distress and trauma, drama therapy workshop, griefwork, spirituality

Introduction

The workshop outlined in this article was part of my research report for my Master of Drama Therapy, completed through Drama For Life at the University of the Witwatersrand in 2022/2023 (Brollo, 2024).

Abortion is a politicised phenomenon, preventing dialogue between pro-life and pro-choice groups. In this context, whether women need support after an abortion is a contentious issue; pro-choice advocates argue that pro-life supporters exaggerate post-abortion distress for political motives (Csordas, 1996; Raypole, 2020). Women do not all suffer after abortions (McCulloch, 1996; Botha, 2011), although 30% do experience depression, anxiety, or PTSD (Curley, 2014; Reardon, 2018). North American reviews with large-scale samples find that women experience post-abortion distress (Turell, Armsworth & Gaa, 1990; Reardon, 2018). Women are affected for decades and sometimes their whole lives (Angelo, 1992; Molobela, 2017; Molefe, 2020).

A South African qualitative survey study of 11 women in 2021 found three themes in the women's narratives, namely "delayed post-traumatic growth, low body esteem and an alteration of the development of a maternal identity" (Sebola, 2021, p. 4). Among the causes of the distress are coercion to abort (Reardon, 2018), a lack of social support (Sebola, 2021), stigma and a perceived need for secrecy (Curley, 2014), and the loss of a desired pregnancy (Reardon, 2018), although these reasons are complex. Women are still shamed and stigmatised, so they cannot talk to those closest to them about the abortion experience. (McCulloch, 1996; Botha, 2011; Sebola, 2021). Thus, the experience is lonely and silent and affects their mental health.

To be spiritual, or not to be...

In South Africa, a few Christian organisations provide publicly-available healing services for women who have had an abortion (McDermid, 2022; Pavone, 2022). However, non-Christian women may feel alienated. This identified gap presented an opportunity to develop a griefwork model for women holding

various spiritual beliefs. I used a transpersonal approach to drama therapy that could assist distressed people (in the case of this study, distress caused by an abortion) to address the effects of traumatic experiences.

I designed a two-day drama therapy workshop to explore whether embodied creative activities can help women come to terms with their distress after an abortion. I invited the attendance of women students who felt that their abortion had caused them some form of distress. As I considered it an appropriate framework for working with intangible, unnamed, under-explored forms of grief, I used transpersonal drama therapy as the theoretical framework for my activities. Transpersonal psychology arose to support diverse, multicultural clients (Myers, 1985) and seeks to “expand the field of psychological inquiry to include the study of optimal psychological health and well-being. The potential for experiencing a broad range of states of consciousness is recognised, allowing identity to extend beyond the usual limits of ego and personality” (Myers, 1985, p. 31). The founder of Omega transpersonal drama therapy Saphira Linden (2009, p. 211) speaks of people possessing a “higher wisdom of self”. This spiritually inclined “mountaintop perspective” of self and the events we experience obscures the world. Linden (2009, pp. 211–212) determined that “developing methods of accessing and identifying the parts of one’s being that have the answers, that know what is best, and that can offer specific advice to the part of me that is in emotional turmoil” is therapeutic. Drama therapy processes encourage multi-dimensional viewpoints through which clients access a higher sense of self, resulting in a stronger sense of personal agency. I designed a therapeutic space. In this space, complicated feelings about the abortion are explored and expressed through creative, embodied, group-oriented activities that are not aligned to specific religions.

Theoretical frame

Grief, complicated grief, and a way to uncomplicate it

In developing a theoretical framework, I drew on theories of griefwork that particularly lent themselves to embodied work rather than cognitive therapies. Women have various ways of processing grief (Maddrell, 2016). Grief theory has developed over the decades from Elisabeth Kubler-Ross’ linear arrangement of the stages of grief to dual simultaneous process models

(where grief is described as a process moving between two nodes) through concepts focusing on emotional coping mechanisms (loss orientation) or solution-oriented models that focus on problem solving (Hamilton, 2016). Grief theory was further developed to look at post-grief resilience theories, which explore post-traumatic growth (Hall, 2014).

For this article, I bring to the foreground complicated grief, which I believe to be the type of grief associated with abortion distress, and narrative theory to make meaning of this grief. Complicated griefwork brings the continuing bonds theory (that further extends grief therapy into the exploration of connections between the bereaved and the source of the bereavement) (Klass, Silverman & Nickman, 1996) and the psychological state of the client at the time of a traumatic event or loss, the number and intensity of earlier adverse life experiences, current support systems, previous experiences of bereavement, and the coping with the experiences (Hamilton, 2016; Nakajima, 2018).

The experience of grieving an abortion is complicated by a sense of culpability or deliberate-ness (Angelo, 1992; Curley, 2014). Holland, Currier and Neimeyer (2006) posit that recovery from pathological grief requires vital “sense-making and benefit-finding” processes. Meaning making or constructing personal narratives is the human process of recovering from tragedy. An intervention is required when the narrative no longer makes sense – when the person suffers from “stuckness” (Grauerholz et al., 2021). Using concepts familiar to drama therapy, African psychologist Augustine Nwoye (Nwoye & Nwoye, 2012) helps the bereaved by re-framing personal narratives. The transpersonal framework dovetails with African cosmology, in which living beings are intimately connected to the dead. I was hoping to unlock connections between the participants and the other people involved in the abortion.

When developing the methodology, an initial idea drew on creative and embodied activities. The activities would provide an opportunity for spontaneity and a perhaps revelatory expression of distress. I hoped that the expression would allow for a dramatic reenactment of relationships with the aborted child that would bring about a sense of relief.

Methods

Sampling participants

In selecting participants, I used the University of the Witwatersrand's database to send an email call for participants. The participants who responded were sent a Google Forms link to check if they matched the selection criteria.

This selection process ensured that participants had relevant experiences and felt prepared for the workshop's focus on post-abortion healing. Participants in this academic study on post-abortion healing must have an interest in attending a workshop focused on post-abortion support. Potential participants must have had an abortion, and the study sought information on how long ago the abortion took place and the participant's age. Additionally, participants were asked if they feel their abortion caused them distress and were encouraged to share any concerns or specific information they would like the facilitator to know.

The participants were stuck. They felt isolated and found no relief using talk therapy, medication, and/or cultural rituals from the emotional weight of the abortion. Mourning rituals are not applied to abortion because abortions are secret: "yet [...] if we recognise the primary space of mourning as embodied by the mourner, [...] [we] carry grief within and can potentially be interpellated by it at any juncture of time-space" (Maddrell, 2016, p. 170). The participants experienced the grief as a nameless, shapeless sense of doom or ill-being or as an entity alongside whom they were living.

Workshop (transpersonal drama therapy)

The two-day, in-person workshop took place over a weekend in a neutral, central location in Johannesburg. Rituals marked a clear beginning and end, inducting and releasing participants into and out of the group. Activities were split between embodied drama-therapy exercises and a separate recorded group discussion, framed as both a healing opportunity and a research study with voluntary participation. In order to allow open sharing during therapy without recording concerns, the space was divided into a creative area with beanbags and art supplies and a research area with chairs around a small recording table. Each session ended with the group members' reflections on the experiences and insights gained.

Structure of the workshops

Each day is shown in the session plans in Table 1 below:

Table 1: Session plans for the two day workshop (Brollo, 2024).
Session Plan Day 1

Time allocation	Activity	Details	Motivation	Materials
08h30 – 09h00	<ul style="list-style-type: none"> • Orientation • Group contracting • Consent forms signed 	<p>Orientation: Toilets, layout of house, our room</p> <p>Group contracting:</p> <ul style="list-style-type: none"> a) Explain workshop structure b) Hand out packs for writing personal notes c) Get consent forms signed d) Confidentiality e) No photos, videos, or social media f) No cross-talk or advice g) No pressure to perform or talk or share, only share what you feel safe with h) If you feel overwhelmed, there is a breakaway room 	<p>Group gathers</p> <p>Get familiar with space</p> <ul style="list-style-type: none"> - toilets, kitchen, etc. <p>Enhanced safety through rules of group work with emphasis on confidentiality</p>	<p>Labels and pens</p> <p>Tea, biscuits, coffee, sugar, milk</p> <p>Plastic document folders with journals and pens</p>

Time allocation	Activity	Details	Motivation	Materials
09h00 – 12h00	<ul style="list-style-type: none"> • Group bonding ritual 15 mins • Tree visualisation 15 mins • The Rock 5 mins 	<p>Move to studio. There is gentle music playing. Space is separated into two clear sections: 1) a 'stage' area and 2) floor cushions, low seating around a low table for sharing and reflecting. On the table are recording devices. Against one wall in the stage space is a low table with a cloth on it, a tray with a jug and small glasses, unlit candles, and rocks. Music is playing.</p> <p>Group bonding 15 mins: There is a jug and small glasses – one for each of us. Each person is invited to speak out loud "what I am hoping for in this workshop is [...]" and then pours dry lemon juice from our glass into the jug, naming the aim and hope. We then pour out glasses from the mutual jug of everyone's hopes and we all drink to the aims and hopes of the weekend.</p> <p>Visualisation 15 mins: Getting comfortable in the space: Lie or sit comfortably, then go into guided imagery – the tree (Appendix D) – this is the place you can revert to if you are feeling overwhelmed. AIM – to speak and visualise internal strengths and the deep place of safety, the untouchable inner self, within each participant.</p>	<p>Shared drink ritual offers a symbolic way of identifying individual aims while still showing commitment to the group experience. The act of shared drinking is somewhat unusual. There is a level of risk required, which opens the participant to innovation. The element of surprise and challenge hints to participants of the type of work to come – which is tactile, sensory, symbolic and always supported in a safe group space.</p>	<p>MUSIC: The sound of inner peace, Tibetan healing flute meditation Jug, small glasses, bitter lemon.</p> <p>MUSIC: Peaceful Yoga Music</p> <p>4 Rocks</p> <p>Guidelines for writing your story, journals and pens</p>
			<p>The reason for being here is this story. For many people this is the first time it has been told. The telling and the hearing of the others bonds the group and creates a great sense of safety.</p>	

Time allocation	Activity	Details	Motivation	Materials
	<ul style="list-style-type: none"> • My story 20 mins writing with prep questions in journal • My story 1,5 hours: Narrative 	<p>The Rock 5 mins: Explanation: Each of us is carrying around with us a weight. It could be the weight of guilt, of sadness, of brokenness, of broken relationships. You feel this weight with you always. It's possibly a weight which says "I am not worthy; I am not good enough". Pick up one of the rocks. This is your personal weight. You must carry it with you over the weekend. Toilet, shower, bed etc. At any point in the weekend, when you feel ready to let it go, you can come and place it at the "altarpiece" and share what you are feeling (what made you feel ready to give up the rock?)</p> <p>Introduce the journal. Here is a place where you can make notes, write anything. We will also use it for various activities over the weekend. If you want to share anything from your journal, please feel free to do so when we do sharing sessions.</p> <p>My story 20 mins: Lead into the narrative: This is the hardest part so let's tackle it first. For many of you this may be the only time you have ever told your story. Know that everyone here sits in non-judgement and solidarity with you. In your journal you have some guide questions about what to consider when telling your story. We will now spend twenty minutes thinking and making notes about the abortion we had. After which we will return to this space and share. 20-minute break to write story.</p>		
		<p>My story 2 hrs: NARRATIVE: My story – one by one, each person tells their abortion story. There are short guidelines to help keep it on track. i.e., Briefly describe your family situation. Family beliefs and values, the relationship that led to pregnancy, the abortion – details of what you recall – colours, smells, attitudes, – feelings – if any. The days or years after the abortion.</p>		

Time allocation	Activity	Details	Motivation	Materials
12h00 – 12h30	RESEARCH SPACE: 30 mins: Reflection and sharing.	Recorded discussion at table		Table, chairs, water, phone to record
13h30 – 14h30	<ul style="list-style-type: none"> • Warm up 10 mins • Body mapping 40 mins • Reflection on body mapping 	<p>LUNCH</p> <p>WARM UP 10 mins: Walk around space – consider body parts you lead with, now exaggerate them, now shrink them, now try leading with a different body part, now exaggerate it, now shrink it. How do various parts of the body affect how you walk? Or behave in the space?</p> <p>BODY MAPPING 40 mins: Getting in touch with body, getting out of head: where does the pain lie now? In pairs, lie on a giant piece of paper and one partner outlines the other one's body very broadly.</p> <p>Using paint, kokiis and coloured pencils, wrapping paper, glue, each participant now draws on the image of the body outline, responses to the prompt questions.</p> <p>10 mins: walk around and look at each body map, what do you notice. SEE (not: interpret) about each one. Share if you want to. Owner of image can respond and also write in Journal what they felt or realised as others were talking about their images.</p>	<p>Embodied activity to bring awareness to the body.</p> <p>Makes manifest internal processes and emotions.</p> <p>The creative process allows for unformed thoughts and feelings to emerge.</p> <p>Makes conscious the unconscious</p>	<p>Large pieces of paper, marker pens, paints, tins of water, brushes, fabric, scissors, glue, wrapping paper, cotton wool, various</p>
14h30 – 15h00	RESEARCH SPACE: 30 mins reflection and sharing	<p>Research space 30 mins: Each person will then share with the group one by one what the body mapping activity brought to the surface, what came up during the activity? Any insights that arose when looking at their final product?</p>		Table, chairs, phone for recording,

Time allocation	Activity	Details	Motivation	Materials
15h00 – 16h00	<ul style="list-style-type: none"> • Broken relationships • Sociometry • Letter writing 	<p>Broken relationships – sociometry 30 mins: Think about the other people involved in your abortion – it could be parents, the father, friends, the medical staff, anyone. Do you have unfinished business with any of them? Unspoken resentments or pain that you want to communicate with someone else? What do you wish you had said? We often feel that we should not have negative feelings about others, that shows a weakness of character in us, that it's not charitable. Yet we do experience negative feelings. Now is an opportunity to express those feelings. If you want to.</p> <p>On the floor are pieces of paper with the following feelings: Shame, guilt, anger, resentment, jealousy, rage, fear, numbness.</p> <p>Stand next to the feeling that best describes how you are feeling about other people in your abortion story. If you have two feelings, move papers around and stand with one foot on each. Brief sharing of who it is and what the main feeling is.</p> <p>Pick the one person you feel strongest about.</p> <p>Letter writing 30 mins: In your journal, write a letter to that person explaining your feelings. Keep them in your pack.</p>	<p>Sociometry is a visual way to identify common patterns or themes, and outliers within a group.</p> <p>Embodied action is a distanced method that allows safe entry into talking about difficult emotions. By offering a limited choice of emotions, the psychic energy required to unpack difficult relationships is reduced, and the participant is freer to start exploring.</p>	<p>Pieces of paper with words written on them, notebook paper and pens</p>
16h00- 16h30	<ul style="list-style-type: none"> • Final reflection 	<p>Final reflection 30 mins: Open time to share anything that has come up, any rocks abandoned etc.</p> <p>10 mins: Instructions for home:</p> <ul style="list-style-type: none"> • You may feel isolated and out of sync with people you live with, that's normal. Tell them if you need some space. • Try not to socialise or be around lots of people tonight. • Keep rock with you at all times (Unless you have given it up) • Don't feel pressured to tell people about the day's workshop – unless you want to. Take a journal and write your impressions and any feelings that arise. 		<p>Table, chairs, phone for recording</p>

Session Plan Day 2

Time allocation	Activity	Details	Motivation	Materials
08h30 – 09h30	<ul style="list-style-type: none"> Meet, coffee Research space: discussion about the night before and how people are feeling 	<p>Once everyone has arrived and had a cup of tea, we move to the research space for a recorded session where people can share how the night went, any strong feelings, any insights. If anyone wants to, they can also abandon their rock if they feel it is time.</p>	<p>Bring the group together, debrief from the night apart, allow for individual experiences to be shared.</p>	<p>Table, chairs, phone to record, tea, coffee and biscuits</p>
09h30 – 12h00 Doll making.	<ul style="list-style-type: none"> Warm up Doll making Naming and memorialising Letter writing Performance 	<p>Warm-up 10 mins: VISUALISATION – into the cave (Appendix E). 50 mins: doll making. THE CHILD: Each person gets a doll frame – sticks and a cloth head. There are scraps of material and fabric to decorate and build up a doll representing the child. 20 mins: NAMING: You may know the gender of your child, or you may not, it doesn't matter. Give the child a name, which can be symbolic such as "my love", or "angel". Write it on a label and stick it on doll, place doll on table and light a candle for your child. 30 mins: Write a letter to the child. Sit somewhere comfortable and write a letter. It can be short or long. Write it in your journal. Say anything you feel you want to say. Focus on speaking to the child. 30 mins: Each person comes up one by one and reads their letter to their child (if they want to), then places doll in the basket with all the others. Sits down. Leave the candles burning. (I will keep the dolls and bring them to the meeting in a months' time)</p>	<p>Passive listening allows the participant to relax and not have to think The content of the story introduces the core concept of day 2 – the relationship with their children Naming and memorialising are grief rituals aimed at acknowledging the loss and achieving closure Letters are embodied ways to tell someone about your relationship with them, including how you would like the relationship to be in the future.</p>	<p>MUSIC: Buddha Flute/the sound of inner peace Sticks, masking tape, fabric, scissors, glue, wool, ribbon, stuffing, plastic bags Paper and pens Candles, matches.</p>

Time allocation	Activity	Details	Motivation	Materials
12h00 – 12h30	<ul style="list-style-type: none"> Breathwork Visualisation 	<p>15 mins: VISUALISATION: The children in the meadow – Now that you have seen and named your child, we can say farewell. Get comfortable in the space, close your eyes or soften your gaze and become aware of your breathing. Don't force your breath, just notice how the air enters your nose, circulates into your body and is breathed out gently through nose or mouth. With each breath in, imagine a golden light entering into your head and swirling there. With each exhale the light stays in your skull. With the next inhale the golden light moves further into your body, into your chest, down your arms, into your fingers, into your pelvis, your legs, your feet, with each exhale, only air comes out, the golden light is swirling inside you.</p> <p>The children in the meadow: guided imagery (Appendix F).</p> <p>When you are ready, slowly become aware of your breath. Bring your mind back into the space. And slowly open your eyes.</p>	<p>Breathwork regulates the parasympathetic nervous system and brings any overwhelming emotions under control</p> <p>The story content manifests the idea of existence beyond the curtain, thereby allowing the participants to continue a relationship with the child after the workshop, or if they so wish, to trust that the child is at peace and the participant can move on with their lives.</p>	<p>MUSIC: Ultra relaxing music to calm the mood/Tibetan healing flute meditation</p>
12h30 – 13h00	RESEARCH SPACE: 30 Mins reflection and sharing	Reflection on the entire process looking at the relationship between each participant and her child/children	Allows for sharing of new insights, listening to others allows for diversity of experiences within the safety of the group.	
13h00 – 14h00		LUNCH		

Time allocation	Activity	Details	Motivation	Materials
14h00 – 15h30	<ul style="list-style-type: none"> Check in Letter burning 	<p>15 mins: Check-in are there any rocks still being held? 30 mins: FAREWELL, BURIAL AND CLOSURE: We place the letters of unfinished business and the child's letters in a large brass bowl with incense granules and burn them outside. As the smoke rises, we say goodbye for now. If anyone wants to keep their letters, they are welcome to burn, tear up or otherwise dispose of something else.</p> <p>15 mins: GROUP CLOSURE: Group share drink of freedom – each person describes a positive feeling and pours it from their glass into the jug, then I pour into all glasses, and we all drink to our shared healing.</p>	<p>The rock ritual must be concluded. Burning notes, letters, allows for letting go. The power is given to participants to decide what to do with the written artefacts of the workshop. Echoing the opening ritual – gives a strong sense of closure and ending. Securing the workshop experience within a frame, in this space.</p>	<p>Rocks Pottery bowl Matches Jug, grape juice, glasses, tray</p>
15h30 – 16h30	<p>RESEARCH SPACE: Reflection and sharing</p> <ul style="list-style-type: none"> Closing of event 	<p>1 hour: Final reflection and sharing. Does anyone have anything pressing to raise? What stays with you? What most resonated with you? What was hard? What did you enjoy? Not enjoy?</p> <p>Final instructions before departing:</p> <ul style="list-style-type: none"> Thank participants for their bravery and explain how their willingness to participate will be helping other women. Discuss date and place to meet in about a month. Invite anyone to contact me about obtaining their artworks or dolls. Remind people about clinical psychologist who is available if they feel this process has brought up issues which need attending. They can contact me to set up sessions with the psychologist. Discuss WhatsApp group where people can stay in touch. Invite anyone to send me voice notes of anything that arises, or anything they think of that I may need to be aware of Invite and answer any questions about the research process from here on. 	<p>Reminder that this is a research process and there are avenues for support after the workshop.</p>	

Key elements of transpersonal drama therapy

I explored four key elements of transpersonal drama therapy for a more spiritual sub-consciousness:

“The age of multi-dimensional expression” (Linden, 2009, p. 205)

The transpersonal paradigm views humans as multi-dimensional beings—material, spiritual, mental, psychological, and emotional—who relate to others both within this life and beyond. This framework balanced material and spiritual realities, with body mapping as the main activity to express lived experience and doll-making as the primary means of connecting to a spiritual dimension.

“Creating a special, engaging environment” (Linden, 2009, p. 206)

I invested significant time in designing a sensory-rich environment that was comfortable, private, spacious, and thoughtfully curated. In order to set a mood during embodied activities, I played soft, ambient music. At one end of the space, I placed a cloth-covered shelf with rocks, each symbolising the pain or distress participants brought into the workshop and would carry throughout the weekend. I arranged materials around the room for creative use—fabric, paints, water containers, tissues, pens, coloured paper scraps, rolls of white paper, and relaxed, colourful beanbags.

A combination of “psychological and spiritual disciplines in a healing experience” (Linden, 2009, p. 207)

In her early therapy, Linden (2009, p. 207) used Sufi healing breathwork “based on the healing energies of earth, water, fire, and air, as an underlying framework for change”. Breathwork moves *air* and focuses on deep breathing and helps regulate the parasympathetic nervous system, especially during anxiety. Other elements in the workshop included a shared drink of *water* to open and close the session, *earth*-themed meditations with a tree and cave, and a final *fire* ritual to burn letters and messages created during the workshop.

Interconnectedness: “The sacredness of life is about realising our essential connection to all of life’s creation” (Linden, 2009, p. 208)

Two activities focused on relationships: the ‘unfinished business’ activity and the ‘letter-writing’ activity. In the unfinished business activity, participants reflected on a relationship that was hurt by the abortion, such as with a partner, parent, friend, or sibling. They started by identifying their strongest emotion related to that relationship, choosing from options like shame, rage, guilt, fear, anxiety, and hate. The letter-writing activity included writing one letter to someone affected by the abortion and another to the child. The imaginative world created by the visualisations was a frame of the natural world – the elements of earth, stone, water, wind, flowers, caves, and trees – and was a consistent grounding (Pendzik, 1988, 2006; Jones, 2007).

Findings

Where is the grief and where is the relief?

The group experience, where women share their stories and listen to each other, was very healing. The creative activities help women explore areas in their lives where they want to grow. This approach empowers women dealing with distress after an abortion by letting them address their personal struggles while feeling supported by the group. The ritual aspect offers a sense of closure, helping each woman move forward without the heavy burden of past suffering. The externalisation of this weight, in the form of the rock, was an effective, dramatic way for a participant to both let go of past distress and perform an act of letting go for the small group of witnesses.

During the body mapping activity, participants identified where they felt grief in their bodies. One woman felt it in her womb, another in her mouth from the words she spoke, a third in her thoughts, and a fourth in her hands. One participant was hesitant to engage with the activity, completing it quickly and not wanting to share her feelings afterwards. This reluctance may suggest she was trying to distance herself from her body. A common response to trauma is retreating into the mind (Sajani & Johnson, 2014; Van der Kolk, 2015). The woman isolates her thoughts, protecting herself from the negative effects of the procedure. The survey showed that she had found relief and

insight, and that drama therapy activities were a challenge she would take on when ready (Linden, 2009).

Link to a belief system – traditional, cultural, or self-found

Three of the four participants mentioned a cultural ritual after the abortion (or miscarriage).

It is a big thing in our community. You make your way to the river and then you have to buy the baby clothes, food and snacks or whatever, like basically make a party for the child and then give them a name. And then you're cleansed.

Some rituals were discussed with other family or friends.

After I went through the abortion last year then I told my friend about it. We talked about an abortion cleansing and actually entertained the idea and the thought that I need to go for a cleansing [...] so that they can pass on – to go to the other side.

One participant initiated her own ritual with her partner out of a sense of need to perform some ceremony for closure.

So my boyfriend and I talked and we're just like [...] we named the baby and then we just prayed about it and we decided that was sufficient [...] because then she'll have to understand we were students, and you have to pay money to the healer so that they can like buy the stuff.

Participants reported that traditional ritual was not effective. They also did not believe in the efficacy of such rituals, revealing that they were unsure what they really believed.

I thought that maybe it [...] means that my child's spirit is wandering somewhere because I have not done a process of [...] telling my ancestors about them and all those things. And I do not believe in that, but I wondered if it's something that I should have done or not. [...] it leaves me in a place where it just it conflicts everything that I believe in and it's a scary thought to say that, okay I thought I was doing what is best for my child, but now I dumped them somewhere and now they're wandering.

Another participant's view:

I don't come from a very cultural background, so I don't really have that belief of this ancestors and stuff like that. So that's why I think I [...] looked at it as a rational thing, right? It's just scientific and stuff like that. I didn't look at it religiously or culturally [...] from what they are saying [...] the wandering spirit. I always feel that there is something there, you know? But I don't pay too much attention to it. [...] I just brush it off.

A participant had mixed feelings about her beliefs:

I first believed that it's, yeah, it's just blood. But the amount of effort that was put to just remove blood was quite indicative that it's not just blood for me and just that I never wanted to entertain the thought that it's somewhere else.

The prevailing sense of confusion exacerbates the grief associated with the abortion, as there is an absence of a cohesive belief system that could help participants integrate their experiences of the abortion into their lives and their relationship with the child. Despite this lack of belief in the effectiveness of the therapeutic approach, all four participants had no prior experience with drama therapy and expressed scepticism about the potential benefits of a drama-oriented workshop. Although this study involved a small sample size, post-workshop surveys clearly indicated that all four participants found the process unexpectedly effective, despite their initial doubts. The playful and imaginative aspects inherent in drama therapy facilitated the exploration of their experiences from multiple perspectives without necessitating the labelling or categorisation of every emotion. While it may seem counterintuitive to engage playfully with a traumatic experience, the creative and expansive nature of drama therapy allows individuals to alleviate the burden associated with such experiences.

Conclusion

The positive feelings expressed by the participants post-workshop indicate that this process could be extended for use with larger groups. The client could start to imagine a different way of being in the future through the process of being encouraged to be imaginative. The distress of the abortion was confined to the past through the vision of life after the abortion. The

client could see the abortion as a life experience instead of the end of their life experiences.

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