TEENAGERS INTERVIEWING PROBLEMS

by

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ABSTRACT

Patriarchal discourse has lead to the marginalisation of women, children and teenagers. The aims of this research were to deconstruct patriarchal discourse; to empower teenagers to speak out for themselves; to facilitate teenagers' identifying, questioning and 'interviewing' of important problems in their lives, and to let teenagers' voices be heard by adults. Post-modern social construction discourse, post-modern and feminist theologies were used to challenge patriarchal discourse. A narrative, pastoral approach was used to assist teenagers to accomplish these aims. Using externalisation, three problems (Depression; Drugs and Alcohol; Verbal, Physical and Sexual Abuse) were exposed for what they really are, and how they influence many teenagers' lives. Alternative stories of how teenagers stand up against these problems were told. The teenagers decided to inform parents and teachers of their lived experiences in three letters. These three interesting, innovative letters are included in this dissertation.

Key terms:

Teenagers; narrative pastoral approach; externalising problems; interviewing problems; patriarchal discourse; depression; drug and alcohol abuse; verbal, physical and sexual abuse; post-modern epistemology; post-modern theology; feminist theology; letter writing; transparency; accountability; power discourse.
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CHAPTER 1

INTRODUCTION

1.1 BACKGROUND AND RESEARCH QUESTIONS

1.1.1 Background to the research project

'“Respect your father and your mother, so that you may live a long time in the land that I am giving you,” says the fifth commandment in Exodus 20:12 in the Old Testament. ‘Children, it is your Christian duty to obey your parents, for this is the right thing to do,’ Paul wrote to the believers in Ephesians 6:1. He repeated the injunction in Colossians 3:21. There is nothing wrong with respecting and obeying one’s parents, but we must bear in mind that these recommendations were written and sometimes misapplied in a patriarchal discourse.’

The word ‘patriarchy’ literally means the rule of the father or the ‘patriarch’ and is used to describe a particular type of ‘male-dominated family’ (Bhasin 1993:3). Patriarchal discourse insists that the father is the head of the family and that he must be obeyed. This kind of discourse functions strongly throughout the Bible. This is also the dominant discourse in which most children in South Africa grow up. In Western culture, a saying such as ‘children should be seen and not heard’ is indicative of a time when patriarchal discourse was strongly dominant in society and was enforced by adults. Davies (1993:4), an Australian researcher, writes that in her research she was particularly conscious of a shift away from the old maxim ‘children should be seen and not heard’, because it is the discourse in which many children grow up.

* Discourse: an historically, socially, and institutionally specific structure of statements, terms, categories, and beliefs that are embedded in relationships, texts, and institutions. The mechanisms of influence are often invisible. Discourse is a product of social factors rather than an individual’s set of ideas. Any discourse reflects and constructs a specific world view. There are dominant and subjugated discourses. Dominant discourses appear natural. That which is not part of the discourse shapes our experience as critically as the discourse itself (Scott 1990:135,136).
Poling (1991:14), an American, focuses on two groups which have been silenced by the patriarchal structures of society: women and children. The patriarchal discourse in the Bible has frequently been misapplied and power has been abused. Poling (1991:290) argues that patriarchy is perpetuated by ideologies and institutions and creates conditions which allow and perpetuate the abuse of power. The effects of the exercise of this power have marginalised and dehumanised many people. Furthermore, patriarchy has failed to provide a healthy family model in which all persons are treated with dignity and respect (Poling 1991:133). For this reason, feminist theologians such as Keane (1998) and Ackermann (1998) are today challenging patriarchal discourse.

Patriarchal discourse can now also be challenged by post-modern theology (see 2.2.1.1), which is, in a sense, a rediscovery of the value of human participation and a quest for wholeness and meaning (Herholdt 1998a:218). The value placed on human participation by post-modern theology also raises various ethical considerations. Rossouw (1993:903) uses the heading 'From being right to doing right'. The phrase implies that Christians of all denominations should therefore not only be sensitive to suffering in general, but should be especially sensitive to the practical consequences of theological perspectives and practices based on beliefs (Rossouw 1993:903). Post-modern theology integrates religion and life, and post-modern theologians do not attempt to quantify aspects such as faith, love and grace. These theologians prefer qualitative methods (see 1.3.1), which means that post-modern theologians tend to be more interested in the patterns produced in society than in attempting abstract definitions (Herholdt 1998a:220). Thus ethical considerations function strongly in post-modern theology, and raise questions about the consequences of patriarchal discourse.

A post-modern approach (see 2.1.1) to practical theology (see 2.2.2) and thus pastoral therapy (see 2.2.3) needs to be holistically integrated with the task of social transformation (Gerkin 1997:74). In pastoral therapy, the prophetic tradition (see 2.2.2) offers an alternative perception of reality (Brueggemann 1978:110). The prophetic tradition, according to Gerkin (1991:163), displays sensitivity to human need, human frailty, and the problems of humans ensnared in deception. The best aspects of the prophetic tradition are its concern for justice, and its awareness of
systemic evil and people's dominance of others. Therefore, the prophetic tradition in pastoral therapy is linked to the ethical considerations of post-modern and feminist theologies (see 2.2.1.2).

Pieterse (1996:60) points out that 'being in the world' means having to roll up our sleeves and getting into the thick of everyday politics and development. This view gives a practical slant to Rossouw's (1993:903) demand that people go from 'being right to doing right'. Pieterse (1996:60,61) argues that, to make this change possible, a post-modern approach gives him

...tools to deconstruct and expose the inherent oppressive nature of dominant discourses in society, which serve to entrench existing relations of inequality between classes and groups;...[and] more susceptible to being 'playful' along with being committed to 'serious' action, i.e. 'seriously playful' and/or 'playfully serious'.

From a radical post-modern perspective, both the church and Christians have a very important role to play. Pieterse (1996:61) asks a critical question: What is the role of the church and Christians? Pieterse (1996:61) answers that the purpose of the church is:

...to fulfil an interlocutor role in creating spaces for different groups to share and express subjective understandings with a view of fostering critical alliances; ...to provide a caring and supportive environment for her members who struggle with the complexity and tiring consequences of political practice at the margin;...

Teenagers are one of the groups of people that have been studied and evaluated, but have seldom been consulted and have therefore been marginalised. When children are seen and not heard, adults decide on behalf of children how children are supposed to experience life: 'We as adults and as professionals are encouraged to present ourselves as being people who know it all. Even if we don't understand the problem, we are encouraged to act as if we know' (Nosworthy & Lane 1996:26).

Society expects adults to discipline and guide children and teenagers. In his book

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*The research is about high school pupils. The participants in the research stated that they wanted to be referred to as *teenagers*, and not as 'adolescents' or 'young people' as many authors refer to them. The term *teenagers* is therefore used throughout the study to refer to high school pupils between the ages of 13 and 18 years. However, to avoid any possibly belittling overtones, when I needed to distinguish between male and female individuals' responses, I chose the terms 'young man' and 'young woman'.*
Foucault's discipline, Ransom (1997:16) writes how discipline functions in an authoritative structure, for example at school: 'Disciplines do not function through consent – they do not derive their legitimacy or their goals from the individuals who come into contact with them. What disciplinary power does is normalize.' Teenagers are therefore seldom allowed to contribute to development and review authoritative structures.

I* am a youth pastor in the Dutch Reformed Church and I meet with teenagers between the ages of thirteen and eighteen years every day. The teenagers meet in youth groups and I often meet them for pastoral therapeutic sessions on an individual basis. They frequently talk about the problems they have to face every day. Many teenagers reveal that they are looking for ways to cope with the challenges they experience.

Teenagers seldom accept support and assistance from adults, because of the hierarchical structures adults use. Teenagers are told by adults what to do, because adults are supposed to know everything and have more life experience (Nosworthy & Lane 1996:26). McLean (1996:2) argues that teenagers's voices and experiences often remain unacknowledged and unheard. Furthermore, she argues that when teenagers try to speak out about the experience of being young, they are often understood as being in 'a stage', or as revealing 'adolescent angst' or 'youthful idealism' (McLean 1996:2). Teenagers' perspectives are marginalised and this disempowers them. Adults are therefore used to making choices on behalf of teenagers, always trying to solve teenagers' problems in an adult way. Thus the voices of teenagers have been silenced and they have been marginalised, which means that they seldom know how to speak out for themselves.

Against this background, I realised that it must be possible to facilitate ways of letting teenagers speak out for themselves and tell adults how teenagers experience the challenges that they have to face every day. Therefore I set three research questions to find a way that would help me to empower teenagers without marginalising them.

*According to Jones (1990:176, 177), 'Postmodernism celebrates the constructedness of accounts thus opening a gap for authors to legitimately reveal themselves in their work, to include our explicit subjective presence in our writing'.

am aware that I initiated these questions without consulting teenagers. Therefore, I endeavoured to deconstruct the power discourse and make sure there was power-sharing.

1.1.2 Research questions

The research questions were the following:

Firstly, how can a narrative pastoral approach (see 1.3.2 & 2.3) use a post-modern, social construction, narrative discourse (see 2.1.2), and post-modern and feminist theology (see 2.2.1) to facilitate the deconstruction of patriarchal discourse to let teenagers' voices be heard?

Secondly, how can a narrative pastoral approach facilitate a situation in which teenagers can identify, question and 'interview' the main problems in their lives and live their preferred realities in an accountable way?

Thirdly, how can teenagers inform adults regarding their preferred ways of doing things in a voice that can be heard?

1.2 RESEARCH AIMS

In order to assist my researching of these questions, I formulated the research aims set out below. While doing this, I was very aware that the teenagers who would be involved did not have a say in the questions and research aims as I formulated them. Thus the research was not a fully participatory research project (see 1.3.1) where power, questions, aims and ways to reach the aims would be shared, as described in Bishop (1996). Hence, I was aware that I would have to deconstruct (see 2.1.2) the power (see 2.1.4) structures which could create distance between the teenagers and myself.

The research project had three aims. The first aim was to deconstruct patriarchal discourse in order to empower teenagers to speak out for themselves. I endeavoured to use post-modern narrative social construction discourse (Freedman & Combs 1996:22) and post-modern and feminist theologies. Adopting a post-modern narrative social constructionist world view offers useful ideas about how power,
knowledge and 'truth' are negotiated in families and larger cultural aggregations (Freedman & Combs 1996:22). The purpose of using post-modern theology, which questions dominant discourses in our society, is to challenge the ethical considerations of these dominant discourses (Herholdt 1998a; 1998b). Feminist theology's main concern is to empower those people who have been marginalised by patriarchal discourse (Keane 1998). The aim of deconstructing patriarchal discourse was to give teenagers a chance to inform adults of their lived experiences, and to deconstruct patriarchal discourse or hierarchical structures, from a post-modern narrative social construction discourse, and a post-modern and feminist theological view.

The second aim of this study was to facilitate teenagers' identification of the problems that they find difficult to deal with, as well as to enable them to question and 'interview' these problems, using externalising conversation (see 1.3.2; 1.4.3 and 2.3.2.2). The purpose was to facilitate the teenagers' 'uncovering' of the main problems in their lives. I endeavoured to give the teenagers a chance to speak, so that they can be heard and can share their lived experiences and preferred realities. The aim was also to introduce these teenagers to the concept of externalising a problem (White & Epston 1990; White 1998), in order to find out who or what the problem is and what it is doing in their lives. By using externalising language, I endeavoured to empower teenagers without allowing room for a language of blame.

The third aim was to assist the teenagers to inform adults about how they experience and get to know the problems they face every day. The purpose was to give them a chance to inform me of how they would like to inform adults, and to look together at possible ways to do so. I endeavoured to assist them to let their voices be heard by the adults.

1.3 RESEARCH METHODOLOGY

1.3.1 Qualitative research

Post-modern research has increasingly moved towards qualitative research, as opposed to quantitative research. According to Denzin and Lincoln (1994:4), the word qualitative implies an emphasis on processes and meanings that are not
rigorously examined, or measured, in terms of quantity, amount, intensity or frequency. Qualitative research stresses the socially constructed nature of reality, the intimate relationship between the researcher and what is studied, and the situational constraints that shape inquiry (Denzin & Lincoln 1994:4).

Qualitative research is a form of participatory research which challenges the traditional notion of the researcher as the expert and blurs the boundaries between 'researcher' and 'researched' (Bishop 1996:228). In some qualitative research, the subjectivity of the researcher is acknowledged. Attempts are made to acknowledge and reduce the distance between the researcher and the researched and so control the effects of subjectivity (Bishop 1996:27). In qualitative research, the researcher and participant are interdependent in the process (Steier 1991). One implication of qualitative research for the power-sharing between researcher and researched or participant is that the participant benefits from the research project at the time that it is taking place. Furthermore, the participant in the project is, from start to finish, an owner and co-creator of knowledge. This has several implications for the ethics of research in that it addresses issues such as accountability, deceit and informed consent. Most importantly, it corrects the injustice that for a long time minority and disempowered groups became research populations in projects which advantaged academics, while those being studied enjoyed no benefits at all.

In research practice, the question focuses on how the voices of participants are to be heard, with what authority and in what form. This concern has moved far beyond the ambit of post-modern discourse and deconstruction and has become a central issue for feminist (see 2.2.1.2) qualitative researchers. These researchers are highly conscious of the absence of women's voices, distortions, and the charge that preparing an account in the usual social science modes only replicates hierarchical conditions found in the parent disciplines, where women are outside the account (Olesen 1994:167).

Bishop (1996:223) quotes Ballard: '...a qualitative approach would involve introducing the practice to the group and then allowing them to develop their own understanding, interpretation, application and evaluation of the practice.' I followed this advice and agree with Ballard that change does not need to involve a
prescription for practice but is a dynamic process in which the community is engaged in joint learning and problem solving (Bishop 1996:223).

Some quantitative research has dismissed, marginalised or maintained control over the voices of others by an insistence on the imposition of researcher-determined positivist and neo-positivist evaluatory criteria, internal and external validity, reliability and objectivity (Bishop 1996:230).

In this research project, there was only partial sharing of power, because I identified the research problem and I determined the research questions and aims. However, the participants determined the outcome of the questions and aims. Although there was only partial sharing of power between the participants and myself, I endeavoured to share power through transparency, frequent reflection and accountability. My aim in power-sharing was to ensure that the participants benefited from the research project at the time when it was taking place.

1.3.2 A narrative approach

A narrative approach seems to offer useful ideas to facilitate a process in which teenagers can speak out. White (1998:1) indicates that the primary focus of a narrative approach is people's expressions of their experiences of life. Winslade and Monk (1999:2,3) say the following about a narrative approach:

We live our lives according to the stories we tell ourselves and the stories that others tell about us. Narrative counselling is a deceptively simple therapy. It is based on the idea that we all generate stories to make sense of ourselves and of the circumstances of our lives. However, we are not the sole authors of our stories. Many of the dominant stories that govern our lives were generated in our early experiences of childhood at home, at school, at church, in the neighbourhood.

These stories constitute our dominant way of interpreting and experiencing our lives. These stories also include experiences that do not fit into people's day to day lives. These experiences are sometimes told as if they are part of someone's life. People experience themselves as the problem, but, according to White (1988/9:6), 'the problem is the problem, the person is not the problem'. Externalising (see 2.3.2.2) the problem opens up fresh ways to talk about the intimate daily struggles of teenagers, without blaming or rejecting these teenagers for what the problem has
caused in their lives. Furthermore, it gives them a chance to share the stories and experiences that constitute their lives.

The narrative approach is derived from a post-modern social construction discourse. The narrative metaphor as a therapeutic tool has emerged principally from the work of Michael White and David Epston (White & Epston 1990). The most outstanding figure to affect the shape of narrative therapy (see 2.3) is Michel Foucault (Gordon 1980), a French historian and philosopher. White has turned Foucault's writings into a highly constructive working resource.

White, following on from Foucault, writes that we tend to 'internalize' the 'dominant narratives' of our culture, easily believing that they speak the truth of our identities (White & Epston 1990:20). Foucault (Gordon 1980) writes that power is knowledge and knowledge is power. This implies that those who have power also have knowledge and vice versa. Power and power relations can be seen in everyday interactions, techniques and practices, such as the hierarchising of individuals in relation to one another (Parker 1989:58). Patriarchal discourse has given power to men in our society, while women and children have been subjugated by this power. This discourse has become a dominant narrative which has been internalised by all those people who were marginalised by it, because they thought that this is the way things should be. By deconstructing this power or patriarchal discourse, space can be opened up for alternative understanding or insights, and the speaking out of those who have been marginalised.

Narrative approaches have already been introduced in counselling in various countries such as New Zealand, Australia and the USA. Several books and articles have been published describing the successful implementation of a narrative approach in schools in the above mentioned countries. Winslade and Monk (1999) counsel teenagers in schools. The title of their book is Narrative counselling in schools. Powerful and brief. The Dulwich Centre Newsletter no 2&3 (1995; White 1995a) has also published new ways of thinking about education and schooling, as well as articles by teenagers and adults working together in a narrative way (Dulwich Centre Newsletter no 4 1996). Morgan's (1999) book, Once upon a time, explores how narrative therapy approaches can inform work with children and their families. Playful approaches to serious problems by Freeman, Epston and Lobovits (1997)
inspired me to face serious problems in children and teenagers' lives. The *Dulwich Centre Journal* no 2&3 (1998) published 'Taking the hassle out of school and stories from younger people'. In 'Taking the hassle out of school and stories from younger people', the problems were personified and 'interviewed' by a group of teenagers. Zimmerman and Dickerson's (1996) book, *If problems talked*, offers another example where problems were externalised and 'interviewed'.

After reading 'Taking the hassle out of school and stories from younger people' (*Dulwich Centre Journal* no 2&3 1998), I developed new ideas and possibilities for facilitating the process of teenagers' speaking out for themselves, because this was done in Auckland, New Zealand. It seemed possible for teenagers and therapists to externalise problems, to re-author (see 2.3.2.3) their narratives or their life-stories according to their preferred realities (*Freedman & Combs 1996*) and to create meaningful and satisfying lives in the midst of institutional demands and pervasive social forces. In doing this, they also seemed to succeed in deconstructing patriarchal discourse and in giving teenagers voices.

### 1.4 RESEARCH PROCESS

#### 1.4.1 Participants

The project included twenty-five participants, thirteen Grade 11 teenagers (between the ages of sixteen and seventeen years) and twelve Grade 10 teenagers (between the ages of fifteen and sixteen years). All the participants came from the same high school. The Grade 11 teenagers formed one group, consisting of seven young women and six young men, all white*, Afrikaans-speaking. The Grade 10 teenagers formed another group, consisting of six young white women, five of whom spoke Afrikaans and one who was bilingual and six young black women, who spoke English.

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*I used the expressions *white* and *black* to refer to the two cultural groups in this particular high school. The pupils in this high school use these terms. See also Chapter 5.*
1.4.2 Research procedures

When I started the research, I had been involved in youth ministry, at a Dutch Reformed Church for three years. Many of the teenagers in the youth groups at the church go to the high school I approached for my research project. The school is situated in the same neighbourhood as the church. I also knew the high school particularly well, because I had been a pupil at that high school about ten years before. I approached the principal, who is also a member of the church. He was really excited about the project, and indicated that he thought there would be little problem getting consent from the governing body of the school, but that I had to obtain consent from the Gauteng Education Department.

I then approached the Gauteng Education Department by writing a letter to request permission for the research project. After approval had been granted, the principal and the chairperson of the governing body were provided with an information sheet containing details of the proposed project (see Appendix 1). With their approval, I started the project.

I made a video with the help of one of my colleagues. We externalised and personified depression. I showed the teenagers this video. In the first session, all the white Grade 11 pupils were shown this video. This was done to provide them with information and an example of what might be expected or negotiated, before they were asked to give informed consent. This group consisted of white pupils only. There were several Grade 11 teenagers who wanted to participate in the research project. Those who decided to participate received information sheets (see Appendix 2) to provide them and their parents with information about the proposed project.

In the second session, all the pupils in Grade 10, both white and black, were shown the same video, and those who decided to participate also received information sheets. All the participants were volunteers and they all received a consent form (see Appendix 3) regarding their participation in the project. Both they and their parents had to complete and return this form.

During the research project, I read relevant literature regarding the problems identified by the teenagers (see Chapter 3). As part of the research process, I also
consulted with my colleagues to hear from them what they had learned from their counselling sessions with teenagers struggling with similar problems.

The research procedures I followed had to mirror the epistemology I had chosen. Accountability and transparency play an important role in the research project. Postmodern therapy approaches emphasize a more egalitarian and open relationship between therapist and client, researcher and participants, supervisor and supervisee, and in this way deconstruct the power within these relationships (Kotze & Kotze 1997:37; White & Epston 1990). If I am transparent, the teenagers are empowered to speak out for themselves and inform me of their knowledge. Therefore, at the conclusion of each interview, the participants were provided with a summary of the interview. I asked the participants to read the summary and make any comments or corrections or to give feedback on what was observed during the group sessions. I indicated to them that their comments or suggestions could be included in the final project report if they so wished. The participants were provided with another consent form (see Appendix 4) regarding the inclusion of their comments or suggestions.

Even though the research report may give the impression that everything was pre-planned, the idea of the letters came from the teenagers and the research was developed, as with action research, together with the participants. This is clear from the way the participants wanted to interview the three problems, because the last problem was interviewed in a different way from the first two problems. Writing letters to parents and teachers was the participants' reaction to the third research question, which challenges the teenagers to inform adults regarding their preferred ways of doing. The whole process has to measured against the principles of qualitative research or participating research, which empower participants to share their lived experiences. All the information gathered by me during the group sessions was negotiated with the teenagers to get their approval.

1.4.3 Collecting information on the problems

Each group identified five problems that they wanted to 'interview' during the group sessions. The problem could be 'interviewed', because the narrative approach externalises the problem. This means the problem becomes a person and has a
personality, with ambitions and plans (*Dulwich Centre Journal* no 2&3 1998:35). The participants chose a variety of problems (see Chapter 3&4).

During the interviews, each group divided into two smaller groups. The one sub-group played the problem and the other sub-group interviewed the problem. The half group that interviewed the problem had to prepare a list of questions. To help them, I gave them the journal 'Taking the hassle out of school and stories from younger people' (*Dulwich Centre Journal* no 2&3 1998), because it contained examples of possible questions. They only used those questions that they found relevant, and constructed the rest of the questions themselves. In the end, we only interviewed three major problems, because of time constraints on this research project. The Grade 10 teenagers interviewed Drugs and Alcohol, and Abuse, while the Grade 11 teenagers only had time to interview Depression*.

I collected information regarding the problems (see Chapter 3), after the teenagers, in a questionnaire (see Appendix 5) had identified the problems. I started reading about the effects these problems have on teenagers' lives. The Grade 10 and Grade 11 teenagers identified the three major problems and informed me about them during the interviews. However, I decided also to conduct a survey after all the group sessions, to determine the seriousness and influence of these three problems in the lives of all the pupils in this particular high school (see Appendix 6). The survey was conducted at the end of the group sessions, and 582 pupils participated in the survey, 217 young men and 365 young women. A discussion of the questions and the information that was gathered from the survey is included in Chapter 3.

It was important to me that my work with the teenagers incorporated ethical principles, because of my post-modern theological viewpoint. A narrative pastoral approach to therapy provided the basis for my work. I entered into the process with a 'not-knowing' position (see 2.3.2.2) and decided to think of the client as the expert (Anderson & Goolishian 1992:25,29). A 'not-knowing' position gave me an opportunity to enter the group sessions considering the teenagers the experts of their lived experiences. This 'not-knowing' position also helped me to give the teenagers a

*If a problem is externalised and personified, I write it with a capital letter, for example, Depression, Drugs and Alcohol and Abuse. This practice reflects a trend found in narrative literature (Kotzé 2000).*
chance to identify the problems that they found difficult to deal with, while at the same time questioning and interviewing these problems. Andersen (1993:305,308) defines the views that the therapist does not have privileged information, can never fully understand another person and needs to know more about what the client says, the unsaid and the not-yet-said, as a philosophical stance and a therapeutic attitude. Furthermore, Andersen (1993:304,321) qualifies this description: the client has local experiences, while the therapist has general experiences. Such approaches allowed for transparency in my counselling practice and accountability to the teenagers, by deconstructing my power as therapist. It also promoted the aim of the project: to help teenagers to get a voice.

1.4.4 Speaking out

The teenagers decided to draw up a document consisting of three open letters to parents and teachers, because this was a possible way of informing adults about their preferred ways of doing, in a voice that can be heard. The importance of the document is that it includes their words, experiences, thoughts and ideas about these three major problems and that it is a way of speaking out. These letters form such an integral part of both the research process and the outcomes of the research that they are included in the main part of this report, not as appendices.

The first part of each letter includes the tactics and plans that the personified problem has for teenagers’ lives. The second part of each document consists of information on how teenagers stand up against this problem to get rid of it. Then the teenagers challenge their parents to support them in standing up against the problem. Two teenagers drew pictures of the three problems, to show how these problems influence teenagers’ lives. This document was distributed in form of a booklet to all the teachers and the parents of the Grade 10 and 11 groups. We distributed about 260 copies. The teenagers requested parents and teachers to respond to the information and share their lived experiences with the teenagers. The teenagers thought it would help them to stand up against these problems if adults shared their experiences with them with regard to these three major problems.

The principal met with these two groups for the last sessions, without me. The aim was to reflect on the process and the interviews. This was done to empower the
teenagers’ to tell another adult about the process followed and whether it had succeeded and had assisted them or not. It also gave them a chance to share information with the principal on how to implement strategies to help and support other teenagers. These sessions were audio taped and the cassettes were given to me. Reflections from these sessions are included in Chapter 5, as a reflection on the interviews and letters.

1.4.5 Ethical considerations

Even though I went to the teenagers to ask what they thought they wanted to talk about, I am very aware that it was I who initiated the research project. The research project was however done in such a way that the participants were the primary beneficiaries, as qualitative research endeavours to benefit the participants. Twenty group sessions or discussions (of thirty minutes each) were contracted with the participants, with the possibility of more sessions if necessary, depending on the availability of the participants. The participants were invited to edit and comment on the letters as a summary to review the sessions, and to make sure the letters met their approval. A consent form (see Appendix 4) was signed by the teenagers to include their suggestions, corrections and comments in the research report. The list of problems (see Appendix 5) which the teenagers filled in anonymously, had to be kept confidential, because teenagers often recognise each other’s handwriting and this can create many problems.

1.5 OUTLINE OF THE STUDY

The following is an overview of the chapters in this project.

Chapter 2: Deconstructing patriarchy in a post-modern discourse

In Chapter 2, the study is positioned in a post-modern social construction and narrative discourse. I describe the shift from modern to post-modern discourse. Social construction discourse and the deconstruction of power discourses are placed in a post-modern epistemological context. I focus on my use of a post-modern theology and feminist theology to question patriarchal discourse, and how this influences my pastoral therapy when I work with teenagers. I discuss a narrative approach, because it informed my methodology and the procedure I followed during
the research. The aim of this research was to empower teenagers to speak out for themselves and let their voices be heard.

Chapter 3: Depression – Drug and Alcohol Abuse – Verbal, Physical and Sexual Abuse

An overview is given of how the teenagers come to 'interview' Depression; Drug and Alcohol Abuse; and Verbal, Physical and Sexual Abuse. Theoretical aspects, background information on these three problems and their influence in the lives of teenagers are discussed.

Chapter 4: 'Interviewing' three important problems

Chapter 4 can be described as the heart of this dissertation. In this chapter, I describe the process of how we came to interview three important problems in the lives of many teenagers. The research procedures are described in detail. The interviews with the three problems by the Grade 10 and 11 teenagers are described.

I describe the way the teenagers decided to inform the adults about these three problems. The document Open letters to parents and teachers that was drawn up by the teenagers is included to show the way teenagers who are empowered to speak out and let their voices be heard can do so. The document consists of three letters to parents and teachers. It is important that this document is included in this chapter and not added as an appendix, because the research aim was to let the teenagers' voices be heard. It was their initiative to write letters to parents and teachers and I want to give them credit for speaking out for themselves and for other teenagers. If I were to include the document as an appendix, I might marginalise the teenagers' voices again. By putting the letters in an appendix, I would imply that their lived experiences (which are the most important aspect of the research project) are just not good enough to be included in the dissertation.

Chapter 5: Reflections on reflections

This chapter serves as a conclusion to the research project. I discuss the outcome of the last group sessions with the principal and reflect on what the teenagers suggested. I reflect on how the epistemology formed and informed my choice of research methodology as well as the procedures I followed to assist teenagers to speak out and let their voices be heard.
CHAPTER 2

DECONSTRUCTING PATRIARCHY IN A POST-MODERN DISCOURSE

2.1 A POST-MODERN EPISTEMOLOGY

2.1.1 A shift from a modern to a post-modern discourse

The shift from a modern to a post-modern discourse is still in the making. It brings with it a new understanding of the self and the world.

*Modernity* endeavours to objectify knowledge and is characterised by a belief in an objective truth that is knowable and researchable. Gergen and Kaye (1992:167) write that the rationale of modernity is that knowledge enables society to make accurate predictions about cause and effect relations and that this allows mastery over the future: ‘...for the modernist, a good society can be erected on the foundations of empirical knowledge’.

Modernity has also influence relationships and assisted in the construction of definite power relations. Patriarchal discourse has functioned very strongly in the modern world view. The father was the head of the family and this was never questioned, or allowed to be questioned. While I was talking to the participating high school pupils and being informed by them, I had to bear in mind that this patriarchal discourse is the culture in which both they and I had grown up, a world with objective ‘truths’, where everything has an absolute accurate answer and little can be questioned. A consequence of the power differential embedded in this discourse was that teenagers’ voices were not heard, because they were not allowed or taught to question such ‘objective truths’.

*Post-modern discourse* can be elucidated as follows: ‘Postmodern culture does not abolish modern culture. It is the critical companion or interlocutor of modern culture, and it is both a reaction to and a result of the modern culture’ (Rossouw 1993:895,903). Müller (1996:55) writes that post-modernism celebrates an inherent
distrust in so-called objective truths as providing hope for society. Post-modernists believe that there are limits to the ability of human beings to measure and describe the universe in any precise, absolute and universally applicable way (Freedman & Combs 1996:21). Therefore it is not possible for a person to find an objective truth that is valid for everybody. Post-modern discourse provokes an attitude of uncertainty. Any attempt to gain knowledge requires continual reflexivity, which underlines the provisional and transitory nature of that knowledge (Lowe 1991:43; Dill 1996:109). Post-modern discourse opens up discussion which questions constructs such as patriarchal discourse. Therefore, I chose to approach patriarchal discourse from a post-modern world view.

2.1.2 Post-modern discourses

There was a shift towards post-modern thought when cybernetics, constructivism and social construction discourse became dominant discourses, challenging the notion of a single meaning of reality. Discourse analysts move from a relationship between mind and language to language as a system of social interdependence (Gergen 1992:17).

According to a modernist world view, we can use language unambiguously to represent external reality, and our internal representations are accurate reflections of external reality. Post-modernists believe differently. They focus on how the language they use constitutes their world and beliefs (Freedman & Combs 1996:28). As Anderson and Goolishian (1988:378) put it: 'Language does not mirror nature, language creates the natures we know.' Language in a post-modern discourse has developed in different disciplines, such as post-structuralism, constructivism, social construction discourse and deconstruction.

Post-structuralism evolved amongst French philosophers, including Derrida, Foucault, Deleuze and Levinas (Lechte 1994:95). Post-structuralists suggest that language does more than represent or reflect a reality. Language mediates and constitutes our lives (Kotzé & Kotzé 1997:32). Post-structuralism has influenced the ideas of many therapists such as Anderson and Goolishian (1992) and White and Epston (1990). Post-structuralism influenced the thinking around narrative therapy.
Social construction discourse can be associated primarily with Kenneth J Gergen (1985). Gergen (1985:266) describes social construction discourse as follows: 'Social constructionism inquiry is principally concerned with explicating the processes by which people come to describe, explain or otherwise account for the world in which they live.' Thus knowledge is socially constructed in language. According to Gergen (1985:270), 'knowledge is not something people possess somewhere in their heads, but rather, something people do together. Language is essentially shared activities'. Social construction discourse is an attempt to approach knowledge from the perspective of the social processes through which it is created (Kotze & Kotze 1997:29). A social construction of knowledge emphasizes the importance of language as a social phenomenon through which individuals as relational beings live (Kotze & Kotze 1997:30).

Deconstruction developed mostly under the influence of Derrida and Gadamer. Gadamer (Anderson & Goolishian 1988:380) maintains that any linguistic account carries with it a 'circle of the unexpressed' which he calls the 'infinity of the unsaid', because no communicative account, no word, is complete, clear and univocal. Gadamer (Anderson & Goolishian 1988:380) also argues that all words carry unspoken meanings and possible new interpretations that require expression and articulation.

Jacques Derrida's efforts to deconstruct Western metaphysics helped to inaugurate the post-structuralist movement (Sampson 1989:7). Derrida explains that to deconstruct is to undo, not to destroy (Sampson 1989:7). Sampson (1989:7) demonstrates how Derrida, in his deconstruction, wanted to undo the tradition that dominated Western thought and formed the roots of understanding by deconstructing the tradition, while at the same time using the tools of that tradition. One of Derrida's central methodological devices is to place a term under erasure. A word is literally first written and then erased, simultaneously keeping both the erased word and the word itself. Words used are therefore necessary in order to understand, while they are at the same time inaccurate (Kotze & Kotze 1997:34). Within the meaning of any possible text, there is also its opposite text (Sampson 1989:8).

Chang and Phillips (1993:100) quote Anderson and Goolishian's definition:
Deconstruction...is to...‘take apart the interpretive assumptions of a system of meaning that you are examining...[so that] you reveal the assumption on which the model is based. [As] these are revealed, you open space for alternative understanding’.

This research is based on the concept of deconstruction in general, and the deconstruction of patriarchal discourse in particular, which is linked with the deconstruction of power and power relations. The term discourse is a central concept in post-modern thought (Gordon 1980; Lowe 1991) and does not refer to language or social interaction, but to relatively well-bounded areas of social knowledge (McHoul & Grace 1993:31). The term discourse is used, firstly, to indicate a process of conversation through which meanings are constituted and, secondly, to refer to systematic and institutionalized ways of speaking/writing or otherwise making sense through the use of language (Lowe 1991:44,45). Discourses as the dominant text or bodies of knowledge marginalise some voices and privilege other ‘knowledgeable’ voices and thereby constitute power-knowledge relations (Kotzé & Kotzé 1997:35). Therefore, a dominant discourse such as patriarchal discourse can be deconstructed within a post-modern social construction world view.

2.1.3 Language and discourse

Both the constructivist and social construction approaches emphasize the importance of language (Kotzé & Kotzé 1997:30). Constructivists Maturana and Varela (1992:246) use the term ‘languaging’ to explain how social structural coupling between human beings comes about. In social construction discourse, the expression ‘to be in language’ (Anderson & Goolishian 1988:377) is used to explain that language is a dynamic, social operation and not a simple linguistic activity (Kotzé & Kotzé 1997:30). People exist in language, because meaning and understanding come about in language.

It is through language that meaning is created, yet it is not in language per se, but through the way language is used in a discourse or conversational manner that it becomes constitutive of our reality (McLean 1997:14). The post-modern emphasis in social construction discourse is not primarily on language, but rather on discourse (Kotzé & Kotzé 1997:31). The various discourses in society have a constitutive or shaping effect on the personal discourses and lives of people.
Patriarchy is a dominant discourse which has constituted the lives of many people. Patriarchy encapsulates the mechanisms, ideology and social structures which have enabled men throughout much of human history to gain and to maintain their domination over women (Ramazanoglu 1989:33). This discourse has been widely accepted by women and children, and has seldom been questioned. Women and children were disempowered and marginalised through this discourse. Oppression and violence against women and children has today led to a challenging of this dominant patriarchal discourse. Ruether (1989:31) argues that domestic violence against women (and children) – wife battering or beating – is rooted in and is the logical conclusion of basic patriarchal assumptions about women’s subordinate status. Patriarchy has constituted and influenced many relationships and the lives of people by reinforcing such assumptions.

2.1.4 Power and discourse

In the discussions surrounding power and family therapy, the work of Foucault plays a most important role, because he examines discourses that entrench power and power relations. Foucault (Gordon 1980:141) explained that ‘power is always already there and that one is never outside it’. Power and power relations can be seen in everyday interactions, techniques and practices, such as the hierarchizing of individuals in relation to one another (Parker 1989:58).

To Foucault, power is knowledge and knowledge is power (Gordon 1980). To Foucault, language is an instrument of power, and people have power in a society in direct proportion to their ability to participate in the various discourses that shape that society (Freedman & Combs 1996:37,38):

He [Foucault] argues that there is an inseparable link between knowledge and power: the discourses of a society determine what knowledge is held to be true, right, or proper in that society, so those who control the discourse control knowledge. At the same time, the dominant knowledge of a given milieu determines who will be able to occupy its powerful positions.

The operation of power, however, exists outside the individual’s locus of control, for the systems of power recruit people into collaborating in the subjugation of their own lives (White & Epston 1990; White 1992:138). White, following on from Foucault,
writes that we tend to 'internalize' the 'dominant narratives' of our culture, easily believing that they speak the truth of our identities (White 1988/9, 1992, 1998).

Patriarchal discourse has given power to men in our society, while women and children have been subjugated by this power (see also 3.4.2). Thus, patriarchy refers to male domination, to the power relationships by which men dominate women, and characterises a system whereby women are kept subordinate in a number of ways (Bhasin 1993:3). This discourse has become a dominant narrative which has been internalised by those people who are marginalised by it, because they think that is the way things should be. In the past and even in the present, men have had all the power, thus all the knowledge. Women and children were not allowed to question men's knowledge or their power, because the father ruled the household (Bhasin 1993:3). By deconstructing this power discourse, we open up space for alternative understanding and for the 'unsaid' or the 'unexpressed' (Anderson & Goolishian 1988:380) of this discourse.

2.2 THEOLOGY AND PRACTICAL THEOLOGY

Theology and practical theology plays an important role in this research. Modern theologies have kept patriarchal discourse alive in our communities. Maimela (1996:173) argues:

... in order to make this exploitative sexist domination work and be respectable patriarchal societies [men] coopted religion for the express purpose of justifying the subjugation and oppression of women...

Religious traditions were relied upon to provide an underpinning for social norms. The shift, however, from a modern to a post-modern culture, a shift which is still in the making, obviously requires new theological reflection, because it brings with it a new understanding of the self and the world (Rossouw 1993:895). Therefore, post-modern theology has to question these taken-for-granted 'realities' of male dominance and it has to open up discussion on ethical considerations concerning patriarchy in theology. Patriarchal discourse can also be questioned and deconstructed from a feminist theological view (Keane 1998:122), an approach which is important to accomplish the aims of this research.
This research is based on practical theology, because pastoral therapy is one of the operational fields of practical theology (Heyns & Pieterse 1990). Therefore, it is necessary to situate this research in a practical theological approach which corresponds to the epistemology and the post-modern theology of this research. A narrative hermeneutical approach (Gerkin 1986) and another approach called a 'communal constitution of knowledge' (Dill 1996) are described as two possible practical theological approaches for this research. Pastoral therapy and a narrative approach to therapy are contextualised within these two practical theological approaches.

2.2.1 Theology

Theology is a 'logos', a word about 'Theos'. Theology is a scientific study. God, however, cannot be the object of scientific study; nor can God be captured in human language (Heyns & Pieterse 1990:3). Therefore theology could be defined as a scientific study of people's faith in and their religious statements about God (Heyns & Pieterse 1990:3). We could ask questions such as the following: 'How can we come to know God?' or 'What is knowledge of God?' Kotze (1992:16) writes that the term theology points to knowledge of God. If knowledge is scrutinised, from a post-modern epistemological point of view, it can be described using two perspectives: constructivism regards knowledge as a human construct; social construction discourse describes knowledge as a social construct. Thus I consider theology both as a human and a social construct about God and how people associate these constructs with their lives.

What, then, is the object of theology? I would choose as the object the 'coram Deo' (the entire reality before the face of God). König writes that theology works with the entire reality 'coram Deo' (König 1973:14). Kotzé (1992:17)* responds that theology is not only a study of God as the object of theology, but that theology is also a study which attempts to obtain a specific perspective on the entire reality in its relatedness to God or God's relatedness to the entire reality. Thus theology can be regarded as a

* Kotzé (1992:17): 'Dit gaan dus in die teologie nie bloot om die bestudering van God as die objek van die teologie nie, maar om 'n bepaalde perspektief op die ganse werkliefde vanuit die betrokkenheid daarvan op God of God se betrokkenheid daarby.'
body of human and social constructs of the entire reality, because we as human beings stands in relation to the entire reality and the entire reality stand in relation to God. This seems to be important when we talk about pastoral therapy and God’s involvement in every session (see 2.2.3).

2.2.1.1 Post-modern theology

A post-modern theology underpins my epistemology. Because many theologians have already written about post-modern theology (Davaney 1987; Griffin 1989; Peters 1985; Van Aarde 1995; Van Huyssteen 1995 and others), I do not want to go into the details of post-modern theology. I only want to highlight those aspects of post-modern theology that I regard as applicable to a deconstruction of patriarchal discourse.

Herholdt (1998a:218) states that post-modern theology aims to provide fresh insights, answer existing anomalies and provide new meaning by moving beyond modernism. Thus post-modern theology displays a much greater openness to non-conceptual ways of knowing. In post-modern theology, a believer is not called upon to master abstract truth, as in modernist discourse; instead the believer is challenged to make sense of the world by participating in the creation of a new world in terms of which the self can be redefined. This can of course only be accomplished by using language in a creative way – a language of imaging or imagining God (Herholdt 1998a:225).

Another aspect that is very important for this study is the ethical considerations of post-modern theology. Rossouw (1993:903) uses the phrase ‘from being right to doing right’, to describe this ethical aspect of post-modern theology. A Christian understanding of the world can never be anti-human. Christians of all denominations should therefore not only be sensitive to suffering in general, but should be especially sensitive to the practical consequences of theological perspectives and practices based on belief, as I already mentioned in Chapter 1. In post-modern theology, the emphasis is no longer on dogma, which focuses the rules and regulations of the church, but on the ethical implications of such rules and regulations on the lives of human beings. Dogmas have tended to marginalise and
disempower many people, which also means that these people's voices have been silenced.

Rossouw (1993:902,903) writes:

Theology has a long and rich tradition from which it can draw in its response to the challenge to care for the marginalized in society. Liberation theology and the most recent research on the historical Jesus are only two of the recent developments which have again focused on the special concern displayed in Scripture for the marginalized...God therefore reveals and illustrates through the story of his people and the story of Jesus a special concern for those whose human value and dignity is denied by society – those in danger of dropping out of the care of society, or who have been excommunicated from society.

Ethical considerations function very strongly in post-modern theology. At this point, I again want to mention Foucault (Gordon 1980; Fillingham 1993), because he is a post-structuralist who concentrates on ethical issues and relational power. Parker (1989:61) writes the following about Foucault's idea of relational power:

What is spoken, and who may speak, are issues of power. As well as organizing and excluding forms of knowledge, discourse relates and helps organize social relations as power relations.

In a post-modern world view, I think it is important to ask the question raised by Parker (1989:61): 'What is spoken and who may speak?' I raise the question in order to ask about the ethical implications of an action or discourse. Ethical considerations involve a focus on power relations. Parker (1989:67) says: 'Not only are social relations stressed, and social relations as they are embodied in discourse, but we may view these relations as power relations.' McHoul and Grace (1993:39) quote Foucault:

Power is everywhere, not because it embraces everything but because it comes from everywhere...Power comes from below; that is there is no binary and all-encompassing opposition between ruler and ruled at the root of power relations, and serving as a general matrix – no such duality extending from the top down and reacting on more and more limited groups to the very depths of the social body. One must suppose rather that the manifold relations of force that take shape and come into play in the machinery of production, in families, limited groups and institutions, are the basis for wide-ranging effects of cleavage that run through the social body as a whole.

If power is everywhere, then women and children have power to resist, although they have been silenced by patriarchal discourse. Post-modern culture insists that those
with so-called expert knowledge are not the only ones to whom one should listen when decisions are made. Those who are affected by such decisions also have a valuable and indispensable contribution to make – even if they are considered non-experts or non-literates in terms of modern rationality. Expertise must be enriched and informed by the experience of those on the receiving side of expert opinion. This post-modern emphasis becomes especially clear in the concern for those who have been marginalised in modern culture – those who have been socially rejected by modern society and those who are not fit to compete in modern society (Rossouw 1993:902).

Post-modern theology is concerned with the ethics of our day-to-day life, and not with the dogma of 'being right'. Patriarchal discourse has involved, for many years, a misapplication of dogma, resulting in a negative influence on many people and a marginalisation of many voices. Post-modern theology leaves a door open to deconstruct patriarchal discourse because of its relational power and ethical considerations, to do right instead of being right. Post-modern theology has definitely influenced my thoughts about dogma and ethics, and opened my mind to listen to people's lived experiences, instead of the theories and dogmas that I once thought were the only way.

Feminist theology also takes into account ethical considerations. Griffin (1989:8) states that post-modern theology is supportive of feminist or post-patriarchal theology.

2.2.1.2 Feminist theology

Feminism originally meant 'having the qualities of females', but in time it became identified with a movement for the liberation of women (Keane 1998:122), a movement that strongly questions patriarchal discourse. Patriarchy (literally 'rule by the father') perpetuates a system of male domination at the expense of women. Within a cultural-religious context, it became inevitable that patriarchy would reach the momentous conclusion that the domination of wives by their husbands is something of which God approves and therefore, the ideal for women was one of total servility, meekness and submissiveness (Maimela 1996:174). Reformist feminist theologians recognize patriarchy as clearly a 'universal political structure which
privileges men at the expense of women' (Keane 1998:124). Therefore, patriarchy can never be condoned. Brock (1989:59) writes about the structures and practices that produce male dominance and radical gender differences in a patriarchal family. These days, families continue to implement an orientation of control toward children. Children are seen as extensions of adult needs, and their voices are silenced by this adult domination.

One of the chief aims of feminist theology is to correct such imbalances by promoting an alternative way of looking at life, taking seriously woman's giftedness and women's experience (Keane 1998:122). Furthermore, Keane (1998:122,123) points out that the task of feminist theologians today is to criticize abuses in the church which seriously affect women, because abuse and sexual violence are viciously intertwined with patriarchy. Bloomquist (1989:62) argues that violence against women can be seen as an outgrowth of patriarchal social constructs that define the relationship between women and men as one of subordination and domination. Poling (1991:13) challenges religious leaders to decide whether to collude with the dominant culture as sanctioning agents of abusive power or to be prophetic critics of the way power is distributed and defined. Poling (1991:23) argues that men have resources they can and do use abusively to exploit the vulnerabilities of women in a patriarchal society. When the oppressions of age, race and class are added, the possibility of an abuse of power is increased.

Seen from a feminist perspective, we are called upon to be like Jesus, we are called 'to a radical activity of love, to a way of being in the world that deepens relation, embodies and extends community, passes on the gift of life' (Ackermann 1996:47). A feminist theological perspective believes that the mending of creation rests on transforming our relationships with ourselves, with one another, with God and with our environment through actions for justice and freedom, as well as changing those societal structures which perpetuate economic, political and social separateness among people (Ackermann 1996:47). Christianity has in it the seeds of an alternative theory, a theory of liberation, equality and dignity for all persons (Ruether 1989:40).

Feminist theology could be described in more detail, but for the purposes of this study it is most important to realise that feminist theology differs from other theologies in its conscious decision to take a stand for the full humanity of women,
children and also for everyone that suffers from male domination and oppression. I read several documents on feminism and feminist theology (Brown & Bohn 1989; Lather 1991; Schneir 1995; Trask 1986) which describe the influence and consequences of patriarchal discourse. In place of patriarchal discourse, feminist theologians seem to hold on to a radical activity of love, which resonates with post-modern theology's ethical considerations. Furthermore, feminist theologians strive to bring out an alternative story of Christianity, a story of liberation, equality and dignity. This is also a story of deconstruction, the 'not yet said', an alternative story to dominant patriarchal discourse.

### 2.2.2 Practical theology

A narrative pastoral approach must be contextualised in practical theology, because pastoral therapy is one of the fields of study of practical theology. Practical theology focuses on people's religious actions, with the emphasis on the word 'actions' (Heyns & Pieterse 1990:6). Gerkin (1986:61) defines practical theology as follows:

> Practical theology, as here conceived, is the critical and constructive reflection on the life and work of Christians in all the varied contexts in which that life takes place with the intention of facilitating transformation of life in all its dimensions in accordance with the Christian gospel.

Practical theology can thus be seen as a reflection on Christians' lives in all contexts, even in a group session with teenagers, interviewing their problems.

There are five main approaches in practical theology. Burger (1988:84) identifies three, namely a confessional approach, a correlative approach and a contextual approach. Dill (1996:114,115) postulates two more approaches, a hermeneutical approach and a constructivist approach. In Dill's (1996) overview of these approaches, he came to the conclusion that these approaches, although they are essentially modernist approaches, show signs of the emergence of a new paradigm and thus of a new epistemology. Post-modern narrative social construction discourse, however, does not slot in neatly in one of these five approaches. Therefore I choose a narrative hermeneutical practical theology (Gerkin 1986), although this narrative hermeneutical approach is more modernist than post-modern. Therefore, the communal constitution of knowledge, although it is rather a new
CHAPTER 2

approach, is followed as a practical theological approach in accordance with the approach described by Dill (1996:224).

Practical theology, seen from a narrative hermeneutical perspective, involves a process of the interpretive fusion of horizons of meaning embodied in a Christian narrative with other horizons that inform and shape perceptions in the various arenas of activity in which Christians participate (Gerkin 1986:61). According to Gerkin (1984:45-47), Gadamer’s concept of fusion of horizons has the following implications for pastoral therapy: there is a bilateral understanding process between two subjects; the person's own pre-understanding must be heard and a new narrative with new meaning has to be created; and any attempt to understand the other person needs to create new meanings and alterations.

Thus, pastoral therapy becomes, according to Gerkin (1984:47), a meeting between narratives. In the gap between my own pre-understanding of what I am about as a pastoral therapist – what I hear, and see and look for – and the other person with her or his* pre-understanding of what the problem is and what is needed, lies the arena in which the Spirit may be expected to be active.

People live coram Deo in contemporary events in time and are engaged in an ongoing process of generating new metaphors and disregarding old metaphors while holding on to the Scriptures (Botha 1998:120). Gerkin (1986:48) adheres to the notion of an open-ended historical process:

The biblical story of God is an open-ended story. It does not stop with the end of the collection of biblical texts. Rather it concerns the activity of God in all of history, a story that continues in the present and is to be fulfilled in the future.

Thus the story of God and the story of human beings are in conversation and this is a hermeneutical process through which new meaning is created. I agree with Gerkin (1986:48) that the story of God is an open-ended story and that we as human beings are creating new meanings ‘in language’ with God every day. However, Gerkin is still confessional in his narrative hermeneutical approach, because he still emphasises the horizon of the confessional tradition which has to fuse with the horizon of a

* The normal order of he and/or she, his and/or her is inverted in this study to break down the marginalisation of women implicit in a word order that could have hierarchical implications.
Therefore I also want to include the approach that Dill (1996:224-225) proposed for practical theology, an approach that is based on post-modern social construction discourse as epistemology:

In my research, I have shown...that the enormous epistemological dilemma of modernism, i.e. subject-centred thought, has also influenced practical theology. The dilemma is that modernistic man relies primarily on his rational insights to achieve knowledge...and does not consider the broad context sufficiently. This leads to serious reductionism and an attenuation of possibilities. Over and against this limited epistemology, I propose a postmodernistic epistemology of the 'communal constitution of knowledge'. Gergen's social construction theory is the basis of this epistemology and I build my proposal for a new basic theory for practical theology on this epistemology.

The communal constitution of knowledge is a new course for the process of conversation. Thus all traditions are social constructions and no single one can claim the truth over others. Therefore, the communal constitution of knowledge using social construction discourse as a basis is an attempt to approach knowledge from the perspective of the social processes through which it is created, or the social processes that are constituted in the community.

I would, however, like to include an element of the prophetic pastoral practice proposed by Gerkin (1991) and the political-critical current suggested by Heitink (1999:174). In practical theology, the focus was, until recently, on the hermeneutics of the confessional tradition. Critical questions were seldom asked about the practical consequences of these theological perspectives and practices based on belief. In practical theology we have to shift from a hermeneutical tradition to a more political-critical current. Heitink (1999:174) quotes Otto who describes practical theology as 'a critical theory of a religiously mediated praxis in society'. According to Heitink (1999:175), two themes are central: the knowing subject and the ideological and historical-practical impact of theories and practices. This demands a critical approach to ideology and praxis to raise awareness of the need for solidarity. Heitink (1999:175) prefers qualitative action research, where the aim is not just an increase of knowledge, but also a change in the oppressive situation of those with whom researchers establish a close bond. In this sense, practical theology proceeds from post-modern theology, which emphasises ethical considerations.
Gerkin (1991) regards the pastoral prophetic role as important for a transformative vocation for Christian people in the world. Prophetic ministry consists of offering an alternative perception of reality (Bruegemann 1978:110). The prophets took care of the moral life of people in the Bible (Gerkin 1997:84). Gerkin (1997:84) also states the following about a prophetic role: ‘To care pastorally for the people, was to consistently inquire about and help the people to consider the morality of their actions.’

Therefore, a pastoral prophetic role has to be inquiring and assist people to take responsibility for their actions and to be accountable. I regard a prophetic role as important for this research project, because a pastoral prophetic role questions dominant discourses in society, such as patriarchal discourse. A prophetic role challenged me to question dominant discourses and to consider the consequences of such discourses and to be transparent and accountable towards the participants in the research. Furthermore, in my pastoral prophetic role, I hoped to challenge adults to take responsibility for their actions, although this was not included as a research aim. However, there was little reaction to this challenge. Perhaps in a political-critical current this can be seen as a wake-up call to the fact that patriarchal discourse has silenced the voices of teenagers and that adults should take notice. A prophetic role and a political-critical current played an important part in this research project.

2.2.3 Pastoral therapy

'Pastoral' (poimhn, poimainw) and 'therapy' (qerapeuw) are both Biblical terms (Botha 1998:147). Pastoral (poimhn, poimainw) means 'to be a shepherd' (Liddell & Scott 1989:652). The shepherd metaphor is also a Biblical metaphor for God as our Shepherd. As the Shepherd, He protects His flock and He is involved with each member of the flock. This comes back to the coram Deo concept, implying that God is involved in every therapy session, in every human being's story or narrative, and not only for those who believe that God is their God and that He exists.

Therapy (qerapeuw) means 'to do service, to serve, to heal or cure' (Liddell & Scott 1989:362). Although some might use the term 'therapy' in a modern discourse, I prefer to use it in a post-modern discourse. Therapy, and hence therapeutic conversation, entails an 'in there together' process. People talk 'with' one another
and not ‘to’ one another (Anderson & Goolishian 1992:29). The therapist and the person who wants therapy go into a conversation together to find the person’s preferred reality and not the therapist’s. Both are involved in the healing process and God is involved from a coram Deo position. I also like the translation of the term ‘therapy’ as ‘to serve’, because a therapist serves the person who needs help, and this is what Jesus Christ’s example was, to serve people.

Modern discourse and positivist theology place pastoral therapists in a superior and thus powerful position (Dill 1996). Thus a pastoral therapist has to correct a client if she or he is outside the boundaries of the fixed agenda, according to such positivist theology (Botha 1998:152). Theology reacted to and embraced a positivistic methodology, which has led to foundationalist theology. Foundationalist theology claimed that a pastoral therapist was an expert on the Bible. The therapist’s expertise jeopardised the power relationship between pastoral therapist and client. Pastoral therapist and client were not free equals; the knowledge of the pastoral therapist became the source of the pastoral therapist’s power to control the therapeutic relationship (Botha 1998:152).

A narrative approach to pastoral therapy may change the hierarchical relationship in therapy (Botha 1998:154). The client is seen as the expert of her or his life, and that means the therapist is no longer an untouchable expert (Anderson & Goolishian 1992:29). Post-modern social construction discourse insists that people with ‘expert’ knowledge are not the only ones whom one listens to when decisions are made. A narrative approach in pastoral therapy is one of the possible approaches that complies with post-modern social construction discourse as epistemology.

2.3 A NARRATIVE PASTORAL APPROACH

2.3.1 Narrative therapy

Post-modern approaches to therapy focus on the client’s narrative. The narrative world view proposes that human beings are interpreting beings and that we are active in interpreting our experiences as we live our lives (White 1995b:13). According to White (1995b:14), a narrative perspective proposes that we live
according to the stories that we have about our lives, that these stories actually shape our lives, constitute our lives and that they 'embrace' our lives.

Freedman and Combs (1996:31) suggest that, when therapists listen to people's stories in order to 'make an assessment' or 'take a history of the illness' or 'offer an interpretation', they are approaching people's stories from a modernist, 'structuralist' point of view. However, within a post-modern social constructionist world view, it is important to attend to cultural and contextual stories as well as to individual people's stories. I agree with McLean (1997:17) that an individual's stories have been influenced by the social, cultural, political and economic environments in which the individual has lived. Freedman and Combs (1996:32) quote Mair in this regard:

Stories inform life. They hold us together and keep us apart. We inhabit the great stories of our culture. We live through stories. We are lived by the stories of our race and place.

Narrative therapy is about retelling and reliving stories. As people retell their stories in therapy, they often 'notice that they have already experienced participating in an alternative story' (Zimmerman & Dickerson 1996:235). I approached the teenagers who participated in the research with intense curiosity about their 'local knowledge' (Freedman & Combs 1996:33). I wanted to listen and develop an understanding of the influences of the dominant stories in their lives. I tried to invite them to celebrate their differences and to develop and perform narratives that they prefer around the particularities of their lives.

2.3.2 The deconstruction of narratives

The narrative approach relies on Derrida's idea of deconstruction to take apart and analyse the problem-saturated narratives that dominate a person's life (Sampson 1989:7). Derrida examines and illustrates how the meaning of any symbol, word or text is inextricably bound up in its context. Derrida believes that it is fruitless to search for the one 'real' or 'true' meaning of any text, as all narratives are full of gaps and ambiguities (Freedman & Combs 1996:46). According to Wolfreys (1998:50), Derrida says that being faithful to a text, to any text, means resisting the temptation to impose a single method of reading onto all texts. White (1992:121) gives a loose definition of deconstruction:
deconstruction has to do with procedures that subvert taken-for-granted realities and practices; those so-called 'truths' that are split off from the conditions and the context of their production, those disembodied ways of speaking that hide their biases and prejudices, and those familiar practices of self and of relationship that are subjugating of persons' lives. Many of the methods of deconstruction render strange these familiar and everyday taken-for-granted realities and practices by objectifying them.

Deconstruction thus implies that stories have many possible meanings, and that we have to listen carefully to the 'not yet said', the alternative story that people do not tell. To listen for what was not said in this sense does not refer to the subconscious or repressed in a psychodynamic sense, but to listen for the opposite meaning within what was said, to validate and to question both what has been said and what has not been said (Kotze & Kotze 1997:34). By listening deconstructively to a person's story, a context can be created in which re-authoring can occur.

2.3.2.1 The client is the expert, a not-knowing approach

Anderson and Goolishian (1992) approach therapy with the idea of the client is the expert and they adopt a not-knowing position. Adopting a not-knowing position requires the therapist to have a genuine curiosity for the client's story, and always to position herself or himself in a state of 'being informed' by the person. Anderson and Goolishian (1992:29) write the following about this 'being informed' position:

This 'being informed' position is critical to the assumption in hermeneutic theory that the dialogical creation of meaning is always a continuing process. In not-knowing the therapist adopts an interpretive stance that relies on the continuing analysis of experience as it is occurring in context. The therapist does not 'know', a priori, the intent of any action, but rather must rely on the explanation made by the client.

Andersen (1993:321) emphasizes that this approach does not mean that 'anything goes' or that 'I do not know anything' (Freedman & Combs 1996:44) or that the therapist's experiences and knowledge are useless, it just means that they are to be considered no more valid than those of the client. According to Andersen (1993:321), the client has local experiences, while the therapist has general experiences.

Anderson and Goolishian (1992:29) regard the therapeutic conversation as an 'in there together' process, where people talk 'with' one another and not 'to' one another. This means that a therapeutic conversation becomes a collaborative effort
of generating new meaning based on the linguistic and explanatory history of the person, and that his or her story is continually retold and elaborated through the therapeutic dialogue.

2.3.2.2 Externalising conversation

'Externalising' is an approach to therapy that encourages persons to objectify and, at times, to personify the problems that they experience as oppressive. In this process, the problem becomes a separate entity and thus external to the person or relationship ascribed as the problem (White 1988/9:5; White 1992:126; White & Epston 1990:38). When a person seeks therapy, it is not unusual for her or his to present a 'problem-saturated description' (White 1988/9:5; White & Epston 1990:39) as a dominant story of her or his life. People present their problem-saturated story when they have internalised the problem. They see themselves as the problem. White (1988/9:6) has introduced the idea that the person, or the relationship between persons, is not the problem, but the problem is the problem. Then the relationship between the person and the problem becomes the problem.

White (White & Epston 1990:39,40) concludes that there is a positive response to externalising conversation, when such an approach

(1) decreases unproductive conflict between persons, including those disputes over who is responsible for the problem; (2) undermines the sense of failure that has developed for many persons in response to the continuing existence of the problem despite their attempts to resolve it; (3) paves the way for persons to cooperate with each other, to unite in a struggle against the problem,...(4) opens up new possibilities for persons to take action to retrieve their lives and relationships from the problem and its influence; (5) frees persons to take a lighter, more effective, and less stressed approach to 'deadly serious' problems; and (6) presents options for dialogue, rather than monologue, about the problem.

White (White & Epston 1990:42) refers to 'relative influence questions' which assist people to externalise a problem. A first set of questions encourages people to map the influence of the problem in their lives and relationships and a second set encourages people to map their own influence in the 'life' of the problem.

By using externalising conversation, a person gets the opportunity to take control over her or his own life, and take responsibility for solving the problem. Externalising
conversation empowers a person to stand up against the problem. Externalising conversation also gives a person space to explore her or his alternative stories and preferred realities of who she/he might be.

2.3.2.3 Unique outcomes and alternative stories

Wylie (1994:43) quotes White, who says: 'There is always a history of struggle and protest, always.' White and Epston (1990:55) look for evidence of what they call the unique outcomes or alternative stories in people's lives and the counterplots.

For an event to comprise a unique outcome, it must be qualified as such by the person to whose life the event relates. Unique outcomes provide a gateway to what we might consider to be the alternative territories of a person's life (White 1992:127). When it is established that particular events qualify as unique outcomes in that they are judged to be both significant and preferred, the therapist can facilitate the generation of and/or resurrection of alternative stories by orienting herself/himself to these unique outcomes as one might orient oneself to mysteries.

White (1992:127) says that a therapist can facilitate this process, which he calls 're-authoring', by asking a variety of questions. He includes 'landscape of action' and 'landscape of identity or meaning' questions (White 1992:127). These terms are described by White (1992:127) as follows:

Landscape of action questions encourage persons to situate unique outcomes in sequences of events that unfold across time according to particular plots. Landscape of consciousness [identity or meaning] questions encourage persons to reflect on and to determine the meaning of those developments that occur in the landscape of action.

These unique outcomes and alternative stories have to be internalised, because they are the success stories of a person's life.

2.3.2.4 Transparency, reflexive conversations and accountability

A narrative approach emphasises transparency, reflexive conversations and accountability. White (1992:144) uses Epston's notion of transparency to describe the deconstruction of the therapeutic process. Multiple reflexive conversations used in post-modern discourse act as ways of deconstructing the power/knowledge
relation (Kvale 1992; Steier 1991). In this way, the number of interpretations are expanded and ‘subjects’ are made ‘participants’, co-producing research, training and therapy (Kotzé & Kotzé 1997:37). Through transparency, the therapy is deconstructed, in such a way that the participants can reflect on the process of communication. It contributes to a context in which people are more able to decide for themselves how they might take the therapist’s responses (White 1992:144).

Thus transparency involves a deconstruction of the power of the therapist, entering the therapy or research equal to the clients or participants.

Accountability is about addressing power differences. McLean (White 1995b) interviewed White about the implications of accountability for therapy. White (1995b:166) argued that there is a power differential in the therapy context, and that it is one that cannot be erased, regardless of how committed we are to egalitarian practices. White (1995b:168) says:

> I have an ethical commitment to bring forth the extent to which the process of therapy is a two-way process, and to try to find ways of identifying, acknowledging, and articulating the extent to which the therapeutic interactions are actually shaping of the work itself, and also shaping of my life more generally in positive ways.

Accountability requires therapists and researchers to confront the ethical responsibilities involved in the work they are doing with regard to the people they are working with.

### 2.4 CONCLUSION

Post-modern discourse has definitely influenced my thinking and views on working with teenagers at schools and in church. In post-modern discourse and in both post-modern and feminist theology, with their ethical considerations, I found ways to question patriarchal discourse. Although the participating teenagers did not speak explicitly or openly about patriarchal discourse, they did question it by informing adults about how they experience problems. Practical theology, a narrative pastoral approach (in a pastoral prophetic role) and narrative therapy gave me tools to listen to the teenagers and, by doing so, to question patriarchal discourses as ‘children should be seen and not heard’. In Chapter 3, an overview is given of and background information is discussed on three important problems in the lives of teenagers.
CHAPTER 3

DEPRESSION – DRUG AND ALCOHOL ABUSE – VERBAL, PHYSICAL AND SEXUAL ABUSE

3.1 INTRODUCTION

As a youth pastor, I listen to many teenagers every day when they talk about the problems they have to face. I am therefore familiar with some of the problems central to the lives of many teenagers. I also realise that there are many problems that I am not aware of. Teenagers may be ashamed to talk about a problem, especially in the presence of their friends, because they think their friends do not struggle with the same problem. One of the young women who participated in the study said during the reflection session: ‘It was nice talking about the problems in our lives, because now I know I’m not alone, others have problems too.’

I also experience situations where teenagers do not want to talk about their problems because of the fear that people with problems may be seen as failures. Because of the above mentioned reasons I drew up a list with all the problems I knew teenagers face and I included many open lines in which teenagers could add to this list (see Appendix 5). I requested the teenagers who participated in the research to choose five major problems that they would like to 'interview'. I explained that the problem would be externalised, or in other words, that the problem would be personified as an entity, and that that was the reason why we were going to 'interview' the problem (White 1988/9:5; White 1992:126; White 1995a; White & Epston 1990:38).

The Grade 10 teenagers chose to 'interview' the following five problems: abuse (verbal, sexual and physical), drugs and alcohol, relationship with friends or partners, divorce and generation gap. Problems they added to the list included racism and its effects, making choices and dealing with disappointments.

The Grade 11 teenagers regarded depression as one of the major problems in their lives and in the lives of their friends. All of them wanted to 'interview' depression. The other problems they identified were relationships with friends or partners, the role of
drugs and alcohol, abuse and the generation gap. One person added suicide as a major problem.

The Grade 10 teenagers had time to 'interview' two problems, while the Grade 11 teenagers 'interviewed' one problem. The Grade 11 teenagers 'interviewed' Depression*. The Grade 10 teenagers 'interviewed' Drugs and Alcohol as well as Abuse* in its various forms: Verbal, Physical and Sexual Abuse*.

In this chapter I give an overview of, and background information on, three problems, namely Depression, Drugs and Alcohol, and Verbal, Physical and Sexual Abuse. I believe it is important to read previous information and research studies on these three problems before we read the next chapter, which focuses specifically on the interviews with these three problems. Therefore I included this chapter especially for background information.

3.2 BACKGROUND TO DEPRESSION

Depression has a real effect on teenagers' lives. This can be seen in the many articles and books that have been written on teenagers (or adolescents*) and Depression (Allen-Meares 1987; Brage & Meredith 1994; Kendall, Cantwell & Kazdin 1989; Lastoria 1990; Manning 1997; Marais 1997; Papp 1997; Reynolds 1984; Rutter, Izard & Read 1986; Van Wicklin 1990; Wright 1993). Therefore, it is necessary to give background information on how people address Depression in a modern discourse, and how another dimension may be added by addressing Depression in a post-modern narrative pastoral approach.

3.2.1 Depression in the lives of teenagers

Human beings have known depression for a long time, but it is only in the last few decades that it has been acknowledged to exist or appear in the lives of teenagers. Van Wicklin (1990:5) quotes Papulos and Papulos:

* If a problem is externalised and personified, I write it with a capital letter, for example, Depression, Drugs and Alcohol, Abuse. This practice reflects a trend found in narrative literature (Kotze 2000).

* Many authors use the term 'adolescents'. In this context, teenagers and adolescents refer to the same age group and these terms will be used as alternates as the authors that are quoted used them.
Until about thirty years ago, it was widely believed that children and adolescents could not experience depression. Depression was said to require an advanced level of ego development; one had to have lived long enough to be knocked around by the harsh realities of life.

Reynolds (1984:171) holds the same view about depression and teenagers and writes that depression was viewed for quite some time as occurring only in adults, and it is only more recently that we have found that this may also be a major problem in the lives of teenagers (or adolescents). According to Marais (1997:192), adolescents are more vulnerable to the influence of depressing feelings, because of the vast development and transformations that adolescence requires at the physical, emotional, cognitive, moral, religious and social level. Mussen, Conger, Kagan and Huston (1990:677) as well as Harrington (1995:6) confirm that both major and moderate depression can occur during childhood, puberty and adolescence.

Clinicians regard the manifestation of depression in teenagers as similar to that found in adults, and therefore the adult criteria for the diagnosis of depression are believed to be appropriate and applicable to children and teenagers (Reynolds 1984:172). The *Diagnostic and statistical manual of mental disorders – IV* (or DSM-IV 1994:324), used by psychologists and psychiatrists to diagnose mood disorders, states that the core symptoms are the same for children and adolescents; however, the mood in children and adolescents may be irritable rather than sad.

On the other hand, Rutter et al (1986:513) argue that there are several difficulties involved in the diagnosis and classification of depression in childhood and adolescence, because depression in non-adults is different from the depressive disorders that occur in adults. It is also generally believed that depression can disguise itself as other problems in the lives of teenagers, such as academic difficulties, eating disorders, sleep difficulties, antisocial behaviour, substance abuse, sexual promiscuity, risk-taking, suicide attempts or running away (Allen-Meares 1987:512; Reynolds 1984:171; Van Wicklin 1990:5). Depressed feelings arise during and directly after puberty and about 40% of adolescents have depressed feelings directly after puberty (Strober, McCracken & Hanna 1991:11). Weisman and Klerman (1991:212) indicate that 4% to 7% of adolescents in the USA aged between 14 and 16 years display symptoms of major depression.
Several empirically validated instruments (see Appendix 7.1) exist for identifying depression, and therefore, according to Marais (1997:195), depression is observable and measurable. The DSM-IV (1994) discusses the diagnosing of various mood disorders. These mood disorders are classified in the DSM-IV (1994:317) as follows: mood episodes, depressive disorders, bipolar disorders, other mood disorders and specifiers describing the most recent mood episode and course of recurrent episodes (also see Appendix 7.2).

The DSM-IV (1994:320) states:

The essential feature of a Major Depressive Episode is a period of at least 2 weeks during which there is either depressed mood or the loss of interest or pleasure in nearly all activities. The individual must also experience at least four additional symptoms drawn from a list that includes changes in appetite or weight, sleep, and psychomotor activity; decreased energy; feelings of worthlessness or guilt; difficulty thinking, concentrating, or making decisions; or recurrent thoughts of death or suicidal ideation, plans, or attempts. The mood in a Major Depressive Episode is often described by the person as depressed, sad, hopeless, discouraged, or 'down in the dumps'.

Depression in the lives of teenagers has previously been researched, written about and diagnosed. These studies and information are valuable sources of background information. However, in the narrative pastoral approach, I tend to focus on how the teenagers have experienced and managed depression in their lives and not on how I thought they are supposed to experience it from what I have read or know.

3.2.2 Statistics on depression and suicide in the lives of teenagers

Statistics on depression cannot be given without mentioning the suicide rates of teenagers. Emery (1983:246) argues that depression and suicide in adolescents are more than mere symptoms. Articles on depression and suicide (Emery 1983; Taalg enoot 1998) have been published to make adults aware of the causes, symptoms and effects of depression in the lives of teenagers. Botha is quoted in Taalg enoot (1998:18) as claiming that scientific research on depression and suicide among teenagers in South Africa is very limited but that the incidence of depression and suicide is increasing. For international statistics see Appendix 7.3.
In the high school where my research project was conducted, only one suicide case had been reported in the last six years. I conducted a survey (see the questionnaire in Appendix 6) at the high school. The pupils of the high school were asked whether depression ever occurs in their lives. A sample of 582 pupils completed the questionnaire. They were told what depression was before they completed the questionnaire on depression. Of these pupils, 32% acknowledged the presence of depression in their lives. Depression occurred more in the lives of young men (36%) than in the lives of young women (30%). Of the pupils, 17% were uncertain about whether they had experienced or were experiencing depression in their lives.

The pupils were asked for how long they had experienced depression in their lives, and whether they had received any help, and to specify the help they had received. Of the pupils, 14% had experienced depression in their lives for more than three years, 21% had had depression for two years, 13% had experienced depression for one year, 16% had experienced depression for between three and eleven months, and 36% had experienced depression for less than two months. Only 38% of the pupils who had experienced depression had received some help. They went to psychologists, psychiatrists, therapists and general practitioners that prescribed medication such as Prozac, Arapax, Nefiriprimal and St John's Wort. Many pupils' parents were understanding and helped them to get past the depression. Family members like an aunt, or friends, teachers, reverends, psychiatrists at school and God were also named as persons who had helped and supported pupils to get past their depression. Some pupils indicated that they had helped themselves and had not had any support.

These statistics cannot be ignored. Too many teenagers have experienced the effects of depression in their lives. On the other hand, too many teenagers do not know what depression really is. Many teenagers and parents ask for information on how to cope with the effects of depression. Who else but teenagers who have themselves experienced the effects of depression can inform other teenagers about this major problem?
3.2.3 Depression and a narrative pastoral approach

A narrative pastoral approach distinguishes between the problem and the person (White 1988/9:6). A title of a chapter in a post-modern narrative approach is the following: Objecting to pathologising 'female disorders': taking a stand against depression and anorexia (McLean 1997). Manning (1997:34) uses externalised language to describe Depression: ‘My family is haunted by Depression’. Teenagers seldom externalise their problems. One young man in Grade 11 said in the reflection session: ‘It was strange talking about the problem as a person, because we are not used to see problems in this way.’ Teenagers use internalised language to describe Depression’s influences in their lives. Words such as ‘I feel depressed’ (a favourite sentence these days) or ‘I have depression’ are some ways in which teenagers describe Depression.

Many authors use the terms ‘depressed children or adolescents’ (Kendall et al 1989; Lastoria 1990; Marais 1997; Reynolds 1984:177; Van Wicklin 1990) when they refer to children and teenagers whose lives have been taken over by Depression. Reynolds (1984:179) and other authors regard depression as a disorder or syndrome and some therapists regard the person as the problem. System therapists view the family as the actual patient (Lastoria 1990:49). White (1995b) argues that mental health professionals typically engage in pathologising and reduce psychopathology (such as depression) to the individual’s biology. White (1988/9:6) says: ‘The person is not the problem, the problem is the problem.’ A post-modern narrative approach uses terms and concepts that do not pathologise people, but empower them to stand up against the problem. This opens up new ways of talking about depression.

3.3 BACKGROUND TO DRUG AND ALCOHOL ABUSE

The trying out and use of drugs has become so widespread and parents have been so shocked that a vociferous media-led ‘debate’ has emerged making teenagers’ drug use the most written about and broadcast youth topic of the decade (Parker, Aldridge & Measham 1998:1). Many articles have been published on drug and alcohol abuse in the last decade (Barnard 1998; Bryant 1997; Bryant 1998; Dulwich Centre Journal no 2&3 1998; Dulwich Centre Newsletter no 1, no 2&3 1997; Miner 1997; Moss & Butterworth 1999a, Moss & Butterworth 1999b). Parker et al (1998)
book *illegal leisure* is based on the view that teenagers themselves are worth listening to regarding these topics.

### 3.3.1 The use and abuse of alcohol

By far the most problematic drugs in contemporary western society are alcohol and tobacco (Raven 1997b:48). According to Parker et al (1998:50), alcohol is teenagers' 'favourite drug'. The Grade 10 teenagers who participated in this research project confirmed this statement and informed me that alcohol and smoking are important if you want to be accepted in the group, in other words if you want to be 'in'. One young woman said: 'If you don't drink and smoke you're out.'

#### 3.3.1.1 Different views and definitions regarding alcohol abuse

Lewis (1997:37) describes how the medical or biological approaches see 'alcoholism':

> Medical/biological approaches see 'alcoholism' as a biological malfunction, as a physical problem. Within psychological perspectives it's often seen as a 'malfunctioning psyche'. From some sociological perspectives excesses of alcohol are seen as a problem of 'deviance'...There has of course been a religious view of alcohol that has stated that alcohol in and of itself is a bad thing – 'the demon drink' if you like.

Hindmarsh (1993:26) gives the following definition of alcoholism:

> Alcoholism has been defined as 'a chronic disorder in which the individual is unable, for physical or psychological reasons, or both, to refrain from frequent consumption of alcohol in quantities sufficient to produce intoxication and ultimately, injury to health and functioning'.

The DSM-IV (1994:194,195) describes alcohol-related disorders under two headings: alcohol use disorders and alcohol-induced disorders. Alcohol use disorders can be alcohol dependence (individuals continue to consume alcohol, despite adverse consequences) or alcohol abuse. The DSM-IV (1994:196) describes alcohol abuse as follows:

> School and job performance may suffer either from the after effects of drinking or from actual intoxication on the job or at school; child care or household responsibilities may be neglected; and alcohol-related absences may occur from school or job. The person may use alcohol in physically hazardous circumstances. Legal difficulties may arise because
of alcohol use. Finally, individuals with alcohol abuse may continue to consume alcohol despite the knowledge that continued consumption poses significant social and interpersonal problems for them.

The DSM-IV (1994:195) further names the categories for alcohol-induced disorders (see Appendix 7.4) and many psychiatrists use these categories to diagnose people with an alcohol problem.

3.3.1.2 Statistics on the use and abuse of alcohol

Both qualitative and quantitative alcohol studies are influenced by under-reporting, faulty recall, reinterpretation of previous events and experiences over a period of time, and methodological issues regarding alcohol-consumption measures in general and the standardisation of units of measurement in particular, especially with regard to self-reported drinking. Nevertheless, given the legality and availability of alcohol, information can be more easily gathered on the use of alcohol than on the use of illicit drugs (Parker et al 1998:52).

In general, teenagers in Britain start drinking alcohol in their mid-teens (Parker et al 1998:80). In a five-year study, Parker et al (1998:57) found that almost all respondents claimed to have tried an alcoholic drink: at the age of 14, 90.2% of teenagers had tried alcohol and this figure rose to 96.8% by the age of 18 (see Appendix 7.5 for statistics in Canada).

In South Africa, Rocha-Silva (1998:10) found that drinking among teenagers was mainly a male phenomenon. For example, a 1994 national survey among 10 to 21 year-olds in historically disadvantaged households found the male:female ratio among persons who had used alcohol in the 12 months prior to the study to be 40:29 (Rocha-Silva, De Miranda & Erasmus 1996) (also see Appendix 7.6 for a 1989, 1990 survey).

In the high school where my research was done, I conducted a survey (see the questionnaire in Appendix 6), which also included questions regarding the use of alcohol. At the time of the survey, 74% of the teenagers between the ages of 12 and 18 years had experimented with alcohol. Experimenting with alcohol means that they had tried it, maybe in order to taste it and to see what would happen. Of the young men, 78% had experimented with alcohol, while 71% of the young women had done
so. A question was also asked about the misuse or abuse of alcohol, which means to drink alcohol irresponsibly and to drink alcohol with the purpose of getting drunk. Of these teenagers, 30% indicated that they had abused alcohol. In the sample, 38% of young men and 25% of young women had misused alcohol.

Alcohol had infiltrated the lives of many teenagers. Therefore we cannot stop talking and writing about responsible ways of drinking alcohol.

3.3.1.3 The effects of alcohol

In Hindmarsh’s (1993) book Drugs. What your kid should know, he describes the short-term and long-term effects of alcohol. There is a misconception that alcohol is a stimulant; however, it has just the opposite effect and is actually a depressant that depresses brain function (Hindmarsh 1993:16). The influence of alcohol on the human body can be described as follows:

Medically speaking, alcohol acts on a system of nerve cells known as the ‘reticular formation’ which is located in the brain stem. When stimuli such as sound and pain act on the body, information is sent to the brain in the form of coded electrical impulses. These prompt the brain to identify the information and match it with memory. This identification initiates a response. Alcohol...suppresses this matching process. Individuals become less attentive and are preoccupied with their inner thoughts and emotions and a response may not be initiated or, if initiated, the response or reaction time is slow...Substances are ‘screened’ by the liver and are seen as being something useful for the body, something that could be useful if converted into some other chemical structure or something which should be eliminated...Alcohol is eliminated primarily by chemical structural changes occurring in the liver. In fact, alcohol is eventually converted into carbon dioxide and water.

(Hindmarsh 1993:18-19)

When one understands the influence of alcohol on the human body, it is easier to identify its short-term and long-term effects. Many short-term effects, however, have long-term outcomes. The short-term effects of alcohol are centred on a person's judgement and self-control. According to Hindmarsh (1993:23), this means that a person under the influence of alcohol is not able to drive a motor vehicle safely and may cause an accident. Intoxicated people react irresponsibly. Violence is often an outcome of alcohol abuse. Rape may also occur when a person is under the influence of alcohol, either because of lowered inhibitions in the rapist, or because some rape victims are unable to defend themselves when they are themselves under
the influence of alcohol at the time of the assault. The use of alcohol has been linked to sexual activity and disinhibition. According to Hindmarsh (1993:23), there have certainly been unwanted pregnancies resulting from sexual encounters while under the influence of alcohol. A study in Scotland showed that almost 50% of males and females had consumed alcohol before their first experience of sexual intercourse, and those who had taken a drink were much less likely to have used condoms (Hindmarsh 1993:23). This implies that alcohol consumption and a lack of information concerning alcohol could be considered a risk factor in respect of AIDS and other sexually transmitted diseases.

The long-term effects of drinking alcohol for an extended period of time can be devastating, according to Hindmarsh (1993:19-24). The effects of alcohol abuse on the gastro-intestinal tract (stomach and intestine) are severe -- it causes a breakdown of the protective lining; the walls of the stomach become inflamed, which generally results in pain, bleeding and ulcers. Perforation may also result. The effects on the liver are cirrhosis (inflammation) often liver. A damaged liver is unable to utilize sugar, proteins and fat effectively, so that blood sugar levels may become dangerously low. Alcohol is poisonous to muscle fibre and the heart is a muscle. The heart muscle is thus weakened or destroyed. Alcohol also has a significant effect on blood pressure, which influences the heart. Alcohol weakens all muscles, so that, eventually, muscle tremor, muscle incoordination and an increase in reaction time in the use of muscles may occur. Alcohol produces a drop in the male hormone testosterone, which is important for growth. Consistent low levels of the hormone can produce feminine features. Alcohol consumption definitely has an effect on the development of the foetus during pregnancy: there is a decrease in body size, the brain is smaller and varying degrees of mental retardation may occur. The effects of alcohol on the nervous system are delirium tremens (when the brain has become accustomed to the presence of alcohol and alcohol is withheld) and inflammation of the nerves (causing prickly sensations in the hands and feet). Serious brain damage can produce syndromes such as Wernicke syndrome and Korsakoff's psychosis. Continued use of alcohol increases the incidence of cancer of the mouth, throat and lungs (Hindmarsh 1993:19-24).
Teenagers have their own points of view regarding the effects of alcohol. According to Parker et al (1998:73), teenagers have reported that there are both positive and negative effects to consuming alcohol. The positive effects are that alcohol consumption makes teenagers happy, helps them to have a good time, to be at ease with their friends and with strangers (Parker et al 1998:74). The negative effects were described as an inability to remember things, headaches, being sick, guilt feelings, hangovers, feeling very unhappy, worrying about sexual encounters, having arguments and having their drinking criticised (Parker et al 1998:75).

3.3.1.4 Alcohol and teenagers

According to Parker et al (1998:68), the reason why teenagers drink alcohol is that they are expected to do so on special occasions, or because it is fun and it makes them less shy. Teenagers drink with their friends in public places, streets, nightclubs and at their own and friends' houses and are less likely to drink alcohol with their parents (Parker et al 1998:60). British and Canadian teenagers' favourite alcoholic drinks are ciders, lagers and beers (Parker et al 1998:64; Hindmarsh 1993:14).

A 1994 study in South Africa (Rocha-Silva et al 1996) among teenagers aged between 10 and 21 years found that shebeens (taverns run from private homes) were particularly popular drinking venues among young male drinkers and that the popularity of this type of venue increased progressively with age. Female drinkers tended to drink in private, in their own homes. Drinking also occurred at other venues. For example, a fair proportion of the current male drinkers in urban areas (12%) usually drink at clubs/discotheques; a substantial proportion (18%) of the current male drinkers in rural communities frequent bottle stores. In urban areas, 15% of the current male and 22% of the current female drinkers mostly drink at their friends' homes; in rural areas the comparative figures were 22% and 20%. Rocha-Silva et al (1996:58-61,135-137) pointed out, moreover, that legal drug use (alcohol and cigarettes) generally took place in company; the opposite applied to illicit drugs and inhalants. Furthermore, the 1994 survey emphasised that drinking and the smoking of cigarettes mostly occurred in the public domain, among friends.

In the survey conducted at the high school where this research project was done, the teenagers were asked to give information on how frequently they consumed alcohol.
They indicated that they drink alcohol on weekends, at parties or at social events or on special occasions. Furthermore, 44% of the teenagers indicated that they drink alcohol in groups with their friends, 5% enjoy drinking alone and 7% drink alcohol with their parents. The teenagers also had to specify the kinds of alcoholic drinks they prefer to drink. They mentioned a wide range of alcoholic drinks: beers or lagers (Black Label, Hansa, Milk Stout) and ciders (Hunters, Hunters Dry, Redd's, Savannah, Crown) were their favourites. They drink spirits such as brandy (Klipdrift, Mellowood, Bertram and V.O.), whisky, rum (Red Heart, Spiced Gold, Captain Morgan) and vodka. Wine, champagne, sherry (Old Brown Sherry or OBS), liqueurs (Cape Velvet and Amarula) and shooters (Tequila, Archers, Sambuca). Names such as Bacardi Breezer, Malibu, Hooch, Olé, Esprit and Solantis Spice were also mentioned by the teenagers.

Teenagers tend to drink alcohol for different reasons. The study by Parker et al (1998) and the survey conducted at the high school indicated that teenagers consume alcohol, and that they know what they prefer to drink and where and when they want to drink it. However, the statistics from the high school show that many teenagers do not know how to consume alcohol in a responsible manner. Therefore it is important to support teenagers by helping them to inform one another about responsible ways to drink alcohol, if they intend to consume it in any case.

3.3.1.5 Alcohol abuse and a narrative pastoral approach

Although a narrative pastoral approach was followed in this research project to interview Alcohol Abuse (as explained in Chapter 4), it is important to make a few remarks at this stage on alcohol abuse and therapy. There is a whole vocabulary associated with this field of work, which features a particular range of expressions including alcoholism, addiction, dependency, diagnosis, assessment, treatment, relapse, recovery and tolerance. Diagnostic terms have the advantage of being succinct. However, Raven (1997a:5) is probably justified in asking what impact diagnostic terms can have on a person when that person is labelled an ‘alcoholic’ (or ‘problem drinker’), as opposed to a ‘person with an alcohol problem’. These expressions bring with them a lot of baggage which could pathologise and disempower a person. Externalising the problem (White 1988/9) empowers the person to stand up against the problem and does not pathologise the person.
Externalising language would not describe a person as an ‘alcoholic’ or an ‘addict’, but as a person whose life has been intruded upon by alcohol or a person whose life has been taken over by alcohol. In Chapter 4, externalising language is used to talk about alcohol abuse.

3.3.2 Drug abuse

3.3.2.1 Introduction to drug abuse

Drug use and drug issues are highly political issues (Moss & Butterworth 1999a:4; Raven 1997a:4). The legal and illegal drug trade is the second most lucrative industry in the world, following the arms trade, but preceding oil (Raven 1997a:4). Moss and Butterworth (1999a:4) write: 'Which drugs are legal and which drugs are illegal, which drugs are considered to be fine and which ones are considered to be only used if you’re really screwed up, is completely political.' Drug issues can be complex. No matter how comfortable we are about drug use, even if we see it all the time, we exist in a society in which the use of certain drugs has negative effects.

Drugs cannot be neatly divided into good and bad, soft and hard, safe and dangerous, or any of the other appealing and convenient dichotomies (Raven 1997a:4). In order to understand drugs and drug use, and to find helpful ways of addressing drug-related problems, one must consider many different dimensions, including political, medical, psychological, legal, economic, moral, cultural, religious and social issues as well as public health perspectives (Moss & Butterworth 1999a:4; Raven 1997a:4).

3.3.2.2 Statistics on drug abuse

Parker et al (1998) did a five-year study on drug use in Britain, asking teenagers how they experienced drug abuse in their lives. According to many teenagers, they had been in situations where drugs were available to try and/or to buy, and these opportunities increased as these teenagers grew older. By the time they were eighteen, almost all of them were in situations where drugs were available.

* When I refer to drug abuse, I specifically mean illicit drug abuse, because teenagers talk about illicit drugs as ‘drugs’ and not as ‘illicit drugs’.
Furthermore, teenagers are trying drugs when they are much younger, irrespective of gender, class or race. More than six in ten British teenagers had tried an illicit drug at some stage.

In South Africa, statistics on drug abuse among teenagers are limited. A number of studies have suggested that cannabis is the most commonly used drug among South African teenagers besides alcohol, over-the-counter medicines and tobacco, and its use is particularly prevalent among males (Department of Education and Culture 1990; Flisher et al 1993; Rocha-Silva et al 1996) (see Appendix 7.7 for statistics on cannabis in South Africa).

In line with trends overseas and in the rest of Africa, the studies reviewed by Rocha-Silva (1998:17) pointed out that the use of illicit drugs was fairly common among teenagers in South Africa (see Appendix 7.8 for more information on solvents, the tranquillo-sedative groups, stimulants and common injection drugs).

The survey conducted at the high school where this research project was done included questions on drug abuse. The high school pupils were asked whether they had ever experimented with drugs (in other words, had they tried illicit drugs), excluding alcohol and tobacco. In response, 13% responded in the affirmative. More young men (18%) have experimented with drugs than young women (10%). In the survey I asked pupils to indicate how many times they had experimented with drugs. Of the pupils, 57% indicated that they had taken drugs between one and three times, 16% indicated that they had taken drugs between four and nine times, and 27% indicated that they had used drugs more than ten times. The principal told me that three young men had been caught taking drugs during 1998 and 1999. The police had arrested one of them, another left school and the third boy received therapy at the Castle Carey Clinic.

Teenagers use a variety of drugs. According to Parker et al (1998:82), cannabis is the drug most likely to be ‘offered’ or available, followed by amphetamines, LSD and ecstasy. Heroin, tranquillisers and cocaine remain the least accessible or least available drugs. In the survey I conducted at the high school, the teenagers indicated that they had tried the following drugs: A’s, E’s, Coke, wheelchair, cannabis (‘dagga’), tablets, ecstasy, ganja (‘zol’), zorlo, LSD (acid), chloroform, 201, medicine
and domestic chemicals. Many of these are the street names of illicit drugs. Many of these drugs were unknown to me, therefore I read about and include a short description of the drugs mainly used by teenagers (see Appendix 7.9).

3.3.2.3 Substance abuse and substance dependence

The DSM-IV Classification (1994:16-19) distinguishes between the following substance-related disorders: amphetamine (or amphetamine-like)-related disorders; cannabis-related disorders; cocaine-related disorders; hallucinogen-related disorders; inhalant-related disorders; nicotine-related disorders; opioid-related disorders; phencyclidine (or phencyclidine-like)-related disorders; sedative-, hypnotic-, or anxiolytic-related disorders; polysubstance-related disorders and other substance-related disorders.

According to the DSM-IV Classification (1994:181), the criteria for substance dependence are manifested as the following, occurring at any time in the same 12-month period:

(1) tolerance..., (2) withdrawal..., (3) the substance is often taken in larger amounts or over a longer period than was intended, (4) there is a persistent desire or unsuccessful efforts to cut down or control substance use, (5) a great deal of time is spent in activities necessary to obtain the substance, use the substance, or recover from its effects, (6) important social, occupational, or recreational activities are given up or reduced because of substance use, (7) the substance use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance.

The criteria for substance abuse, however, differ from the criteria of substance dependence. The criteria for substance abuse are manifested as one (or more) of the following, occurring within 12 months:

(1) recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home, (2) recurrent substance use in situations in which it is physically hazardous, (3) recurrent substance-related legal problems, (4) continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance.

(DSM-IV 1994:182,183)
Thus substance abuse and substance dependence are two different conditions. The difference cannot be ignored while one is talking to people who are abusing drugs.

3.3.2.4 Drugs and teenagers

Parker et al (1998:155) deduce from their interviews with teenagers that teenagers in Britain are drugwise. Abstainers demonstrated their considerable knowledge of the recreational drug scene simply because they could not escape encounters with drugs and drug users. Drugs are a everyday reality to teenagers; drugs no longer belong only to an unknown subculture. According to Gillespie (1998:72), South African children today are far more informed (by television, Internet etc.) than they used to be, and they do not pay attention to the scare tactics used by many drug awareness groups, parents or teachers.

Moss and Butterworth (1999a:9) discuss alternative resources for working with teenagers on issues surrounding drug use. According to them, teenagers make choices about drug use based on what they know (Moss & Butterworth 1999a:9):

They are informed choices. Young people are generally aware of the effects of the choices they have made... If these conversations happen then young people are allowed to access their own history of being responsible. This can redress the message of irresponsibility that is implied by the dominant ideas around drug use.

Another issue they address is drugs as avenues of pleasure (Moss & Butterworth 1999a:9):

People have many reasons for taking drugs – escape is one of them, but not necessarily the major one. People take drugs because it’s fun, because of a sense of adventure. Or simply because they like the way they feel when they are using.

Parker et al (1998:89) also conclude that teenagers use illicit drugs because there are positive and negative effects connected to the using of drugs. According to the teenagers they interviewed (Parker et al 1998:89-90), the positive effects of using illicit drugs are feeling part of a group, feeling energetic, excited, friendly, carefree, relaxed, confident, loving or caring, sexy, strong, happy, in control, outgoing, and they had fun. The teenagers responded to questions about the negative effects of drugs that drugs made them feel angry, out of control, worried about drug content,
foolish, sad, depressed, lonely, anxious, scared, queasy, frustrated, paranoid, disappointed, guilty or sick or they experienced headaches and pain.

According to the above mentioned data about drugs and teenagers, it is clear that teenagers can speak for themselves regarding drugs and drug abuse. Bryant (1998) also wrote an article about 'youth warning other youth about drugs and alcohol', which indicates that teenagers can inform other teenagers and their parents about drug abuse. I found the same idea expressed in the Dulwich Centre Journal no 2&3 (1998:34-38), which describes how teenagers inform each other about drug abuse at Melville High School in New Zealand. Peer information may be one of the most effective strategies to stop teenagers from taking drugs.

3.3.2.5 Drug abuse and a narrative pastoral approach

From the research of Moss and Butterworth (1999a) an important aspect of counselling drug-using teenagers emerges: the focus is more on the alternative stories than on diagnoses. A narrative pastoral approach suits this focus very well, because a narrative approach focuses on people's alternative stories and preferred realities (White 1992:127; White & Epston 1990:55). According to Moss and Butterworth (1999a:9), drug use can also be about a history of protest. It may be a choice people have made to avoid another kind of experience, or to change their relationship with that experience. Drug use is not only a way of surviving, but also a way of being able to face certain aspects of people's lives (Moss & Butterworth 1999a:10).

Moss and Butterworth (1999b:97) asked deconstructive questions, which form an important discourse in the narrative approach. They write the following:

So, some drugs are sanctioned, advertised and glorified, while on others war is declared. What are the implications of declaring war on drugs – which in reality means declaring war on the people who use those drugs? How did the drug laws convince us they were for our own good? How is declaring war on young users going to help them? How is a criminal record going to help them? How can workers ensure that the politics of drug use are not obscured in their conversations with young people around drugs?

(Moss & Butterworth 1999b:97)
Deconstructive questions are about the 'not yet said' or the 'unsaid', the alternative stories that people do not tell. Drugs also have an alternative story, a 'not yet said', that needs to be explored and told. Part of this alternative story about drugs is what Moss and Butterworth (1999a:16,17) describe as alternative services to teenage drug users. These alternative services are services such as Assisting Drug users INC, NSW Users and Aids Association – the TRIBES project and RaveSafe (Moss & Butterworth 1999a:16,17) (see Appendix 7.10).

There are a number of drug education programmes in the USA. The most popular drug education programme is ‘Project D.A.R.E.’ (Drug Abuse Resistance Education) (New Therapist 1999:7). The researchers offer two possible answers why D.A.R.E. appears to work. First, teaching children to refrain from drug use is a widely accepted approach with which few individuals would argue. Second, adults rightly perceive that most children who go through D.A.R.E. do not engage in drug use. Recent studies, however, show that this programme has no long-term effect on drug use.

Jett (1998) describes another programme in the USA. The GBCS (General Board of Global Ministries) has offered seminar programmes to encourage teenagers to become involved in social issues (Jett 1998:33). Jett (1998:33) writes:

...the seminar program, using biblical and theological reflection, seeks to educate and motivate youth groups that come from all over the country to study issues such as HIV/AIDS, homelessness, substance abuse, violence, terrorism and racism. The young people receive first-hand experience...The GBCS is committed to listen to and acting to serve the needs of young people. It is committed to advocacy for young people, and to their empowerment, so they can speak for themselves. The GBCS joins with local churches in this mission of empowering youth and young adults to be a part of the decision-making processes in both their church and their society.

According to Jett (1998:33), the US Department of Education Office of Educational Research and Improvement cites lack of discipline, use of drugs and lack of financial support as the top three problems facing public school students. The church, however, needs to pay special attention to issues affecting youth and young adults daily, like addictions, lack of quality education leading to a lack of quality employment, and the criminal justice system, of which more youths are becoming a part.
Currently there are about 45 alcohol and drug centres in South Africa where people can go to for help and rehabilitation. Since 1995 there is also a RaveSafe organisation in South Africa and the committees are situated in Cape Town, Johannesburg, Namibia and Durban (Gillespie 1998:70). RaveSafe’s target market is youths between the ages of 15 and 30 years who are experimenting and using drugs, mainly the so-called recreational drugs, and who have always received only a strong anti-drug message. They have information stands or encampments at most raves where they distribute information, provide counselling, assist anyone who needs help and do surveys to collect information on drug use patterns. They have distributed over 15 000 of their drug information booklets nationally, and are better able to get information across by taking a non-moralistic position on drug use. As a result, they get more respect from the users and they have thus been able to make an impression in an area traditionally hard to get through to. They have a home page on the Internet that draws up to 5000 accesses per day and they launched a Safe House Project in August 1998 which seeks to promote public safety at rave events and in rave clubs. According to Gillespie (1998:70,71), they emphasise objective and factual information in order to shift the focus from prevention to health promotion, recognising that drugs are not going to go away. This emphasis on objective and factual information is designed to minimise the damage that people could do to themselves and to society and to empower individuals to make informed, responsible decisions. RaveSafe opts for an approach of treating people as intelligent individuals with a right to know the truth.

There is also some support in the form of church youth groups, where drug and alcohol use is discussed freely. At the high school where the research project was conducted, a drug and alcohol awareness play was performed in 1999 by an outside organisation.

Many people, especially parents, teachers and teenagers, question discourses concerning the use and abuse of drugs. Post-modern culture, however, requests us to rethink and deconstruct our views on drug use and abuse. Part of this deconstruction is to listen to teenagers’ experiences of drug use, to let them speak for themselves and to let them inform one another about drug use and abuse.
3.4 BACKGROUND TO VERBAL, PHYSICAL AND SEXUAL ABUSE

Durrant and White (1990:5) argue that abuse has been largely ignored in the therapy literature for many years. Many survival stories are found in the literature, describing how women and children have survived the effects of physical abuse, sexual abuse or rape which happened to them in their childhood (Dulwich Centre Journal no 2&3, no 4 1998; Laux 1997; Poling 1991:35; Terr 1994). In feminist literature, there are many books and articles on women, children and violence (Brown & Bohn 1989; Burstow 1992; Jenkins 1990; Madanes 1990; Poling 1991; Ramazanoglu 1989; Thorpe & Irwin 1996; Trask 1986). There are not many articles and books available on verbal abuse. The reason for this is maybe that verbal abuse is seldom considered to be a form of abuse. A Grade 10 teenager participating in the research project said: 'Maybe parents think verbal abuse is a way to discipline their children.'

3.4.1 Definitions of verbal, physical and sexual abuse

I believe it is necessary to give definitions of verbal, physical and sexual abuse, because many teenagers do not know what verbal abuse is, or what the difference is between physical abuse and sexual abuse. Therefore, I want to extend on these definitions, for it can be very helpful in working with teenagers.

3.4.1.1 Verbal abuse

The Nisaa Institute for Women's Development (Nisaa is an Arabic word which means 'women') produced a pamphlet (Act against violence against women 1998) on abuse. According to them, emotional abuse includes criticism and verbal abuse, pressure tactics, abusing power, denying and blaming, disrespect, economic control, self-destructive behaviour, isolation, abusing trust and breaking promises and harassment (also see Appendix 7.11).

Verbal abuse has not been recognised as abuse for very long, because of the myth that it leaves no physical effects like scars and bruises. The Grade 10 teenagers thought verbal abuse was a way adults used to discipline children, always yelling, blaming and accusing their children in the hope that they will listen and not do the same thing again. Exploring what verbal abuse is and what the effects of it may be
on people's lives was a rather new concept to these teenagers. When my survey was conducted in the high school, verbal abuse had to be described to the pupils, because they did not know that it exists or what it is. Verbal abuse was not only a closely kept secret, it was also not known and not spoken about, which made the abuse even worse. Many teenagers were subjugated to verbal abuse and they did not even know it. Working as a pastoral therapist in a primary school, I realise that verbal abuse in the form of teasing and bullying amongst peers starts early in the lives of many children.

The effects of verbal abuse in the lives of many teenagers are destructive. Many teenagers are left without friends, feeling miserable and lonely. Sexism and racism also surface in verbal abuse. Discrimination between races or genders destroys many relationships. The effects of verbal abuse are to take teenagers' power away, leaving them with no self-value and thinking they are 'not good enough' or 'cannot keep up' with the rest.

Verbal abuse exists and it needs to be explored for what it really is. Talking about verbal abuse and its effects can make people more aware of it. It is also important to listen to others' experiences of verbal abuse to extend our knowledge of verbal abuse.

3.4.1.2 Physical abuse

Physical abuse was more familiar to the teenagers in the study, although they seldom talk about it. In most families, it is kept a secret. Bullying at school is also kept a secret because pupils are afraid of threats from the perpetrators. Physical abuse is all about an abuse of power, controlling another person by physically denigrating that person. The *Act against violence against women* (1998) describes physical abuse as destruction, intimidation, physical violence and the use of weapons (also see Appendix 7.12).

3.4.1.3 Sexual abuse

Kamsler (1990:10-11) proposes the following definitions of child sexual assault and incest:
Child sexual assault is a sexual act imposed on a young person or child by another person (usually male). The ability to engage a child in a sexual relationship is based on the all-powerful and dominant position of the adult (or older adolescent) offender, which is in sharp contrast to the child’s age, dependency and powerlessness. Authority and power enable the perpetrator to coerce the child into sexual compliance. Incest is any sexual act imposed on a young person or child by another person (again usually a male), taking advantage of his position of power and trust within the family. ‘Family’ can mean natural parents, step-parents, grandparents, uncles, brothers and so on.

The Act against violence against women (1998) describes sexual violence as degrading treatment based on a person’s sex or sexual orientation, using force, threats or coercion to obtain sex or perform sexual acts.

Those who have experienced sexual violence are the victims of an abuse of power. Poling (1991:23) argues that children are vulnerable to adult abuse of power because they lack understanding and resources for self-protection:

Some children are physically overpowered and raped by men who have no concern for their well-being. Some are sexually exploited and then intimidated into silence by being made to fear for their safety or the safety of their family. Some children are manipulated over long periods of time into gratifying the sexual needs of a molester, usually a trusted family member. The use of threats and rewards to exploit a child’s vulnerability is abuse of power. All sexual contacts between adults and children are destructive because of the power inequities between them.

Poling (1991:63) also gives several reasons why children may be likely targets of sexual abuse:

First, children are vulnerable unless protected by adults. Many children are unprotected and thus are defenseless against adults who want to use them for inappropriate needs. Second, because of their youth and innocence children seem, for some men, symbolically closer to the source of life. To an adult whose inner life is empty, the spontaneity and energy of children can mistakenly seem to be the fullness of life.

The legitimation of male violence takes forms which treat the victims of violence as responsible for being raped, or assaulted or harassed or murdered: they asked for it, flaunted their sexuality, enjoyed it although they pretended not to, started something they could not stop, were out alone at night, hitched a lift, dressed provocatively, nagged their husbands and so on (Ramazanoglu 1989:67).
The increase in sexual violence towards women and children may also be linked to the increase in pornography depicting women and children as being degraded, and 'liking it'. To show images of women bound and being beaten indicates to boys that this attitude of violence to women is permitted (Hite 1994:307). Poling (1991:133) argues that sexual abuse is a form of devaluation. Instead of being nurtured, as a child has a right to expect from the caregiver, the child who is molested is used to gratify the selfish desires of the adult. The mothers of children who are being sexually abused by men are sometimes blamed for the abuse, although they may also need help and support (see Appendix 7.13 for more information on mothers of abused children). Poling (1991:13), on the other hand, has counselled many perpetrators, or as he called them 'molesters', and writes that most of them were victims of sexual and/or physical violence themselves. The violence of these molesters against others was a continuation of what they had learned about relationships in the past. 

Poling (1991:14) questions the silence of church and society on sexual violence against women and children. It has been a widespread phenomenon for centuries, and it seems to be getting worse in modern times. Even though both church and society claim to be concerned about human suffering and injustice, society is ineffective in facing and dealing with this problem, and the church has kept a literally deadly silence in spite of its claim to be concerned for all people. Poling (1991:14) argues that many people have been silenced and ignored:

The voices of those suffering from sexual violence have been ignored in most theological discussions about the relationship of God and humans, sometimes giving the impression that God is uncaring. Many survivors of sexual violence have great difficulty with traditional images of a male God who requires obedience to dominant powers even in situations of great injustice. New definitions of the relation of love and power are coming from counter-communities of resistance to evil.

To understand this betrayal by community, society and church, we must understand how families, churches, schools and societies become organised so that their most vulnerable members experience extreme suffering.
3.4.2 Statistics on verbal, physical and sexual abuse

Many women and children are beginning to break the silence and talk about their experiences of physical and sexual abuse. Poling (1991:11) claims that 20% to 40% of all children experience some form of sexual violence before the age of eighteen, and that more than half of all women have experienced a rape or attempted rape in their lifetime.

It is even more disturbing that most sexual violence is perpetrated within families and by people who are trusted leaders in communities (Poling 1991:11,12). The Hite report (1994:49,216), conducted in the USA, the UK and Western Europe, states:

As documented by this study and many others, fathers, and especially stepfathers, brothers and male relatives or friends are almost always the abusers, and girls are almost always the objects of the abuse... Sexual abuse or provocation and suggestion are more likely to take place between stepfathers and daughters than between fathers and daughters. In any event, out of all cases of abuse and incest, fathers or male relatives are the perpetrators 99 per cent of the time, not mothers or female relatives.

Thorpe (1996:111) provides information on the statistics on abuse in Australia:

In Australia in 1990-1991 parent figures were considered by statutory authorities to be responsible for 65 per cent of all forms of officially recorded child abuse and neglect. This figure rises to 75 per cent when sexual abuse is excluded, since parent figures were classified as responsible for only 30 per cent of sexual abuse (with a further 46 per cent perpetrated by other relatives, friends or neighbours). While official statistics remain genderless we know from research studies that it is males who are responsible for nearly all sexual abuse — around 95 per cent of that perpetrated on girls, 80 per cent on boys, 90 per cent over all. Moreover, sexual abuse by females is not only relatively rare but, most frequently, is perpetrated together with or under the influence of a male partner. In Gil's survey mothers were responsible for only 48 per cent of physical abuse overall, and in two-parent families father figures were responsible for nearly two-thirds of physical abuse.

Statistics on abuse are limited in South Africa. The Crime Information Analysis Centre (unpublished) has statistics on cases that were reported. I used the figures available from 1996 to June 1999. These figures include information on adults and children (between the ages of 0 and 17 years) that have been victimised through abuse (see Appendix 7.14). These figures are conservatively low compared to figures and statistics in other countries (possibly due to underreporting). However, it
still shows us the urgency of the problems of abuse that we are facing in South Africa.

The results of the survey conducted in the high school where this research was done, were distressing. The teenagers were asked to give an indication of whether they had ever been verbally abused. A teacher explained verbal abuse and examples such as 'as swear at' and 'called names', were given on the questionnaire (see Appendix 6). In the sample, 59% of the teenagers said that they had been verbally abused (58% of the young women and 61% of the young men). Another 4% indicated that they did not want to answer the question. They were also asked to indicate who had verbally abused them. Of them, 62% had been verbally abused by their friends, 29% by their brothers or sisters, 18% by their fathers, 14% by their mothers and 11% by their teachers. Other persons who had abused them verbally were strangers, an uncle or aunt, neighbours, grandparents, prefects at school, a stepmother, a boyfriend or girlfriend.

The next question was: *Have you ever been physically abused?* Physical abuse was also explained and examples such as 'kicked', 'punched', 'burnt' and 'thrown with objects' were given (see Appendix 6). In the sample, 26% indicated that they had been physically abused and 2% did not want to answer the question. Of the young women, 23% had been physically abused by their friends (31%), father (28%), mother (24%), brothers or sisters (22%), and teachers (1%). They also mentioned stepmothers, boyfriends and ex-boyfriends, uncles, strangers, cousins and grandparents. Of the young men, 31% had been physically abused. They were physically abused by their friends (45%), brothers or sisters (21%), teachers (18%), father (16%) and mother (9%). They also mentioned cousins, strangers, schoolmates, uncles, stepfathers, gangsters and the police.

I asked three questions concerning sexual abuse. The teenagers were asked to give an indication of whether they had ever been sexually harassed or not. Sexual harassment was explained as follows: when somebody makes humiliating sex-related remarks or gestures, or degrading treatment based on your sex and sexual orientation, or threats or coercion to give sex or perform sexual acts. Of the pupils, 14% indicated that they had been sexually harassed and 2% did not want to answer the question. Of the 14%, 18% were young women and 8% were young men. They
had been sexually harassed by their friends (47.5%), father (6%), mother (1%), brothers or sisters (4%) and teachers (1%). They also mentioned other persons, like girlfriends, classmates, friend’s boyfriend, best friend’s brother, boyfriend, girlfriend, cousin, mom’s best friend’s husband, co-workers, manager at work, father’s friend and an uncle, as perpetrators.

The second question on sexual violence was: Have you ever been molested? I used the word ‘molested’ because many people are familiar with it. ‘Molested’ is taken to mean that somebody touches the private parts of the body (also called ‘indecent assault’). Of the pupils, 12% answered in the affirmative and 1% did not want to answer. Of all the young men, 7%, and of all the young women, 14.5%, indicated that they had been molested. The young men had mostly been molested by friends (67%), by a brother or sister, a girlfriend and a strange man. The story differs, however, when it comes to the young women. Of those young women who indicated that they had been molested, 30% had been molested by their friends, 13% by their uncles, 5% by their fathers, 5% by their brothers and 4% by their teachers. They also named a co-worker, stranger, boyfriend, grandfather, classmate, father’s friend and friend of the family, as perpetrators.

The third question involving sexual violence was: Have you ever been sexually abused or raped? In this context sexual abuse and rape meant that somebody was sexually violent and forced the sex act on you without your permission. Of all the pupils (young men and women), 20% indicated that they had been raped. Only 0.9% did not want to answer the question and all of those were young women. One person indicated that she had almost been raped by a boyfriend. Of the young men, 2% indicated that friends and strangers had raped them. Of the young women, 30% indicated that the following persons had raped them: friends (30%), their fathers (20%), brothers (30%), uncles (20%) or strangers.

These statistics indicated the urgent need to talk about abuse in families, schools and communities. Abuse seems to be a large problem amongst the pupils at school. More pupils have experienced verbal, physical and sexual abuse from friends or classmates than from their family members. Young women seem to be more victimised. The perpetrators are mostly men, even when abuse occurs between young men. Furthermore, the statistics from this high school indicated that there is
something wrong in our society. Why have so many teenagers been abused by friends and classmates? Maybe Poling (1991:12) is on the right track when he writes that without the protection of silence and taboos, sexual violence is unmasked for what it really is – the evil of abuse of power. Abuse in all its forms has to do with power.

3.4.3 Abuse of power in a patriarchal society

According to Poling (1991:12), power is a complex term with personal, social and religious connotations:

At a personal level, all persons have some power by virtue of being alive, along with an inner drive to use this power to become all they can be. Some are denied the chance to exercise their power because of oppression. Others use their power for destructive ends. Society dictates how power is distributed. Institutions and ideologies determine who has privilege to be dominant and who must defer...many are denied the power to control even their own bodies and minds...These inequities create the occasions for abusive behaviors and unjust power arrangements. Religion serves to define the nature of power and its legitimate uses.

To Foucault, power is knowledge and knowledge is power (Gordon 1980). Ramazanoglu (1989:156) argues:

Foucault has influenced feminism through his argument that sexual desires are not biological essences but are constructed in historical discourses. Power and knowledge came together in sexuality.

I agree with Poling (1991:143) that rape and the sexual abuse of children are not primarily sexual acts, they are primarily forms of control and violence. For the victim, such abuse is an experience of terror that has long-term consequences for the development of trust and competence. For the perpetrator, it is an experience of controlling another for the expression of power and rage. According to Young-Eisendrath and Wehr (1989:131) the idealisation of sex as power, autonomy, and control over others has been noted to be a problem among American males:

From the adolescent social situation...boys learn that sex is power. They act – the other must react...They find that the female object they choose for sexual release cannot say no, or that even saying no, she really means yes.

Boys learn from a young age that they have power over women and over their sexuality. Girls, by contrast, learn that they must be submissive to men, in order to be
accepted and cared for. Sexuality is socially constructed (Bloomquist 1989:63) and is a political issue. Ramazanoglu (1989:155) states:

New-wave feminists argue that sexuality is not private, it is a political issue in the relations between women and men, the individual and the state, the acceptable and the criminal. It has been a strength of feminist theory to reveal the existence of sexual politics, the extent of male control over women's bodies, and the prevalence of male sexual violence.

According to Poling (1991:27,28) abuse of power is also socially constructed:

Abuse of power for the individual is motivated by fear and by the resulting desire to control the power of life. This fear and arrogance are then used to create societies in which structures of denomination create special possibilities for the privileged at the expense of shared power for all persons. The power that is intended by God for everyone who lives is used to destroy relationships in exchange for control. Rather than live in insecurity, some persons choose to create structures that dominate and control others for personal gratification and false security. This describes the dilemma of the abusive parent within social circumstances of parental privilege...All parents abuse their power at times in relation to the children they care for. They lack the strength and discipline to engage creatively the complex processes of development. Some parents abuse their power in extreme ways...They would rather destroy their children than face their own failure and disappointment in life...A society that creates the conditions for such parental abuse of children is unjust.

Child abuse is the result of many complicated problems. Brock (1989:42) believes that patriarchy is the encompassing social system that sanctions child abuse. Bloomquist (1989:62) states that sexual violence is viciously intertwined with patriarchy. Patriarchy, the unjust relationship of men and women perpetuated by ideologies and institutions, is, according to Poling (1991:29), a structure of domination that creates the conditions for abuses of power. In patriarchal systems, self-acceptance and intimacy are difficult achievements; instead, a legacy of domination and abused children is found (Brock 1989:59). Ruether (1989:34) states that it is still generally assumed in patriarchal families that parents have certain rights, including the right to beat their children, both girls and boys. The obedience learned in families thus has political consequences (Hite 1994:52). Kamsler (1990:18) cites Waldby's comment on incest:

The kernel of the feminist understanding of incest is formed by the assertion that father-daughter sexual abuse is a particularly intense variant of 'normal' male-female relations in a patriarchal society.
Incest was, until recently, regarded as an extremely rare problem in western culture, which occurred in only few grossly deviant families. Only in the last ten years or so has the true extent of the problem begun to be revealed. The lifting of the veil of secrecy which has kept the problem of incest hidden can be largely attributed to the feminist movement. Feminist analyses have located the existence of incest in the way in which gender relationships are structured in society, and argue that the problem cannot be understood outside this societal context (Laing & Kamsler 1990:160).

Theologically, the patriarchal family has been and continues to be a cornerstone for Christological doctrines, especially in father-son imagery and in the unquestioned acceptance of benign paternalism as the norm for divine power (Brock 1989:42). However, patriarchy has failed to provide a healthy family model in which all persons are treated with dignity and respect (Poling 1991:133). Instead, patriarchy protects men as a group from suspicion of sexual violence. The patriarchal ideal of autonomy and individualism also enables the powerful to hide or be invisible (Poling 1991:142), and furthermore the notions of family privacy and secrets contribute to sexual violence (Poling 1991:129).

Poling (1991:64,65,67) describes why men are more likely than women to become child abusers:

One reason men are more likely than women to become child molesters is that sexualized dependency is more consonant with predominating images of what it means to be male. Some scholars have suggested that growing up in a patriarchal society means that men and women learn very different ways of expressing dependency needs and sexuality. It is much more acceptable for a woman to be vulnerable, to allow herself to be taken care of by another person. Women are encouraged to share feelings and touch with others without fear of loss of identity...Since destructive aggression is more consonant with the dominant images...The image of a man who gets what he wants without regard for the other is a stereotype of male competence.

Dominant discourses such as patriarchy and power abuse have a negative effect on our society. According to Drewery and Winslade (1996:35), within human communities, what can be said, and who may speak, are issues of power. Discourses organise and regulate even interpersonal relationships as power relations (McHoul & Grace 1993:57). Relational power is an issue wherever there are attempts
to make sense of living, in everyday interactions in homes, playgrounds or workplaces, and, in this sense, power is something that can be positive and productive rather than repressive and negative (Drewery & Winslade 1996:36).

Poling (1991:33) describes a more ideal form of power:

Power in its ideal form is the energy of life itself as it is organized into the relational web that includes us all. This primal relational power is distorted through human sin by individuals and societies into abuse of power and is the cause of much human suffering. Through resistance to the abuse of power and the work of God’s love in Jesus Christ, the human spirit is made resilient. We search for the resilient hope of the human spirit, which can resist abuse and create new communities for the restoration of communion and freedom of self, others, and God.

By deconstructing dominant power discourses, we can open space for alternative understanding and for the 'unsaid' or the 'unexpressed' (Anderson & Goolishian 1988:380) aspects of these discourses.

3.4.4 Verbal, physical and sexual abuse and a narrative pastoral approach

According to Redmond (1989:72) child sexual abuse is now being discovered as one of the initial traumatic causes behind such illnesses as multiple personality disorders and eating disorders such as anorexia and bulimia. Redmond (1989:73,74) argues that children in Christian homes learn five virtues: the value of suffering; the virtue of forgiveness; the necessity of remaining sexually pure (especially for little girls); the fact that they are in need of redemption; and most important, the value that is placed on their obedience to authority figures. Many of these virtues of Christianity make it difficult, if not impossible, for the child who suffered from the effects of sexual abuse to overcome the effects of this abuse successfully and lead a rewarding existence as an adult – particularly in the area of interpersonal relationships (Redmond 1989:79,80).

According to Kamsler (1990:11), many writers have emphasised the use of traditional psychiatric classification practices to understand and deal with responses to child sexual assault. Overall, the terms such as 'helping clients get in touch with repressed emotion', 'working through feelings', 'dealing with repressed memories', 'working through painful experiences', used to describe approaches to therapy imply
that they are based on ideas about diagnosing the client's pathology, which will then be treated by the therapist (Kamsler 1990:12).

Kamsler (1990:14, 15) believes that child assault does not necessarily lead to long-lasting 'intrapsychic damage'. Kamsler (1990:15) argues:

The more traditional intrapsychic perspectives view the client as having some kind of pathology, which the therapist, as an expert on pathology, will fix through 'diagnosis' and 'treatment'. The implications of this way of thinking is that somehow the damaged personality of the client will be understood and repaired through the expertise of the therapist's interventions... In contrast to this, a contextual, interactional perspective does not see the development of difficulties as taking place inside the person and as being pervasive to their personality. Instead, attention is paid to the various interactional contexts within which a person's difficulties may emerge.

White (1995b:82) argues that many persons who survived abuse in childhood or adolescence are brought to him with certain behaviours that are self-destructive or self-abusive. These behaviours are experienced as actions against the self and these actions can take many forms, including self-mutilation, addictions, and multiple suicide attempts. White (1995b:83) says that self-abuse is an expression of a person's experiences of abuse, an expression that is shaped by the meanings given to the abuse.

I agree with Kamsler (1990:23) that externalising the problem is a first step in inviting a person to separate her/himself from the effects of labelling. This leads to the possibility of noticing alternative stories about the person who at times has not let the problem entirely dominate her/his life. Thus, besides naming the injustice of the verbal, physical or sexual abuse that is provided by the dominant story, a narrative approach also emphasises the alternative story of resistance. According to Adams-Westcott & Isenbart (1990:43), intervention serves as a rite of passage to help family members escape disempowering dominant stories, challenge restraints that create vulnerability to abuse, and utilize strengths to develop alternative and more empowering stories.
3.5 CONCLUSION

This chapter has provided background on three problems identified in the lives of many teenagers. Although this information is very important, it is now time to listen to what the teenagers have to say, because they are the ones who best understand the situation, because they have experienced these three problems either in their own lives or in the lives of their friends.

In Chapter 4, the interviews are described and the open letters to parents and teachers are shared.
CHAPTER 4

INTERVIEWING THREE IMPORTANT PROBLEMS AND THE OPEN LETTERS TO PARENTS AND TEACHERS

4.1 INTRODUCTION

In this chapter I describe the process of how we came to interview three important problems in the lives of many teenagers today and the outcome of this interviewing process. The open letters to parents and teachers compiled with the teenagers are included in this chapter because the letters are the voices of the teenagers informing adults (see 1.2 for the third research aim).

The Grade 11 teenagers who participated interviewed one problem, namely Depression*, which all of the teenagers thought was a central problem in teenagers' lives. The Grade 10 teenagers who participated identified and interviewed Drugs and Alcohol, as well as Verbal, Sexual and Physical Abuse, two key problem areas in the lives of many teenagers.

The Grade 11 teenagers identified other problems that they also wanted to interview, but we had time to interview only Depression. The other problems the Grade 11 teenagers regarded as major problems (from major to minor) were Relationships with friends and partners, Drugs and Alcohol, Verbal and Sexual Abuse, the Generation Gap between teenagers and parents and Parents' Divorces. The Grade 10 teenagers also named many other problems which they regarded as major problems (also from major to minor), namely Relationships with friends and partners, Divorce, the Generation Gap, Handling Disappointment, Making Choices and the Influence of Racism. It was unfortunate that there was not time to interview these problems.

* If a problem is externalised and personified, I write it with a capital letter, for example, Depression, Drugs and Alcohol, Abuse. This practice reflects a trend found in narrative literature (Kotzé 2000).
CHAPTER 4

4.2 INTERVIEWING DEPRESSION

4.2.1 Information session with the Grade 11 pupils

Accountability (see 2.3.2.4) was very important in my approach to the research process. My ethical responsibility included getting consent from the Gauteng Education Department, the principal, the chairperson of the governing body, the pupils and their parents. Accountability is, according to White (1995b:166), about deconstructing power differences. Asking for consent made me accountable, because everybody who was involved was informed, so that power concerning the research project was shared.

After consent had been granted by the relevant authorities, I needed to ask the teenagers' consent. I arranged to meet the Grade 11’s in one of their free periods. Only the white Grade 11 pupils turned up, because of a misunderstanding between the principal and myself. I tried to be transparent (see 2.3.2.4) by informing the pupils about the purpose of this research project. I informed them that I wanted to structure an opportunity to let their voices be heard, by externalising the problems they faced every day and by informing adults about their experiences. I showed them a video as an example of how a problem can be interviewed. By doing this, I tried to be transparent with regard to what the purpose of the research project was and how I could give the teenagers an opportunity to speak out.

Transparency was very important in this information session. Transparency contributes to creating a context in which the teenagers are more able to decide for themselves how they want to respond to the information given (White 1991:144). Being transparent also means that 'subjects' of a research project can become 'participants' (Kotzé & Kotzé 1997:37), because power is deconstructed. In my qualitative research (see 1.3.1), the teenagers became participants and co-creators to the research project, because I deconstructed the patriarchal power discourse. Deconstructing the patriarchal discourse in my information sessions and later on in my group sessions, being transparent, made me as a researcher accountable.

The teenagers made their own decisions concerning their participation in this project. Those who decided to participate received an information letter (see Appendix 2).
The letter was addressed both to them and to their parents, to inform their parents about their participation in this project. Thirteen teenagers wanted to participate in the project, seven young women and six young men. Many of the participants knew me very well from the youth groups at church.

I asked these thirteen teenagers to stay behind, because we had to arrange a time and place for us to meet. We negotiated time around their class periods. They have about sixteen free periods per week, in which they are supposed to do self-study and homework. They all agreed to give up two periods a week for this project. A period was thirty minutes long, which meant we had one hour a week. Later on the year, we had to change to only one period a week. This made it difficult to interview more than one problem. The venue was not negotiable, because we had to use a classroom that was free. I wanted the teenagers to make their own decisions as far as possible, because then they take responsibility for the project and for their participation.

4.2.2 Group sessions with the Grade 11 teenagers

The second session was also used for information and for signing consent forms. We read through the consent form (see Appendix 3), with time to comment on the content of the form. The teenagers were asked to sign it if they wanted to participate. I assured them that the information would be kept confidential, and that their names and the name of the high school would not be mentioned in any document. They preferred it this way. We negotiated confidentiality regarding any information disclosed during a group session. Furthermore, I asked their consent to transcribe the interviews, using their exact words, or if possible to tape the interview on cassette. They gave consent for both, but because I did not have access to a cassette player, I took notes during each session.

I stressed the fact that I was there to get information from them. I wanted to hear how they experienced the problems that they face every day and how they stand up against these problems. Explaining to them that I wanted to listen to their voices made me more transparent. I asked them whether they felt that they were growing up in a context where children should be seen and not heard. Although some of them felt that they are allowed to speak more openly, they still felt that adults do not listen to what they have to say about their experiences. Adults like telling them that they
are too young and do not know anything, that they do not have experience and that the adults know what is best for them (see 1.1.1). Therefore, adults seldom listen to their side of the story or to their voices. I told them that my main purpose was to listen to their lived experiences and to assist them to let their voices be heard. Listening to their voices meant deconstructing the patriarchal discourse which silenced teenagers' voices. Recognizing the power difference between the teenagers and myself as an adult made me more accountable.

They had to identify the problems that they wanted to interview. Therefore, I gave each teenager a list of possible problems. As youth pastor I had heard from teenagers what kinds of problems teenagers struggle with. I included these problems in the list (see Appendix 5), but also left room for the participants to add to the list anything they thought was important. We decided to choose five problems that they regarded as major problems in their lives or in the lives of their friends. These lists were anonymous and confidential.

I explained to them what it meant to externalise a problem. White (1995a:57) says that externalising conversations introduce children to ways of speaking about their lives that do not implicate their own identities in the definition of the problem, but that instead focuses on their relationship with the problem.

The Grade 11 group divided into two groups. The one group wanted to ask the questions, while the other group wanted to externalise and personify Depression. White (1995a:57) argues that the ‘problems’ tend to be rather arrogant and boastful, and that it is rarely difficult to get the problems to talk about their successes and to ‘spill the beans’ on how they have achieved these successes. I informed the group playing Depression about this, and they were ready to give the interviewing group a very hard time.

I also gave the group who interviewed the problem some information on the questioning process. According to White (1995a:57,58), the problem’s influence in the different areas of the subject’s life, the strategies, the techniques, the deceit, and the tricks that the problem resorts to in its efforts to get the upper hand in the subject’s life, have to be uncovered. The interviewers also have to look out for the special qualities possessed by the problem, what it depends on to undermine and to
disqualify the subject's knowledge and skills, the purposes that guide the problem's attempts to dominate the subject's life, and the ambitions and hopes that the problem has for the subject's life. Furthermore, White (1995a:58) proposes that one has to find out who or what supports the problem, and the plans that the problem has already put into action should also be revealed.

Despite appearances to the contrary, problems are never totally successful in their ambitions for people's lives and relationships. Following White (1995a:58), I told the interview group to try to expose the problem's failures. White (1995a:58) suggests enquiring into

...the territories of life over which the subject still has some influence despite the problem's attempts to totally dispossess the subject; the counter-techniques or counter-strategies, and the tricks that have been developed by the subject...; the special qualities, knowledges, and skills possessed by the subject that have been proven difficult for the problem to undermine and to disqualify; the purposes and commitments that guide the subject's efforts to challenge the attempts of the problem to dominate the subject's life, and that have frustrated the dreams and the hopes of the problem; who stands with the subject, and the part they have played in denying the problem's desires and wishes; the options that are available to the subject for taking advantage of the problem's vulnerabilities and for the reclamation of the territories of their own life.

It was important that I gave the groups this information, because externalising conversations were a new way of dealing with problems. Externalising the problem was at first very strange and different from the usual way of speaking about the problem. In due course, as we met once a week, for about six months, the teenagers found it easier to think of the problem as the problem.

The interviewers used the document 'Taking the hassle out of school and stories from younger people' (Dulwich Centre Journal no 2&3 1998:34-38), to guide their interview. This journal includes a chapter on 'Talking to Dak" (Cronin-Lampe et al 1998:34-38). Deconstructive questions were used to interview 'Dak'. The interviewing group came up with the following deconstructive questions to ask Depression.

* Dak is a colloquial term for dagga, marijuana or cannabis.
What is Depression doing?

Depression, how did you get permission to come to our high school and into our lives? How do you see your future? Depression, who and what gives you power? How do people feel when you are in their lives? Depression, who or what is helping you to get into our lives? Who are your friends? Depression, what are the ambitions you have for teenagers? Who are your clients?

How do teenagers stand up against Depression?

What are the things we do that undermine your power? Depression, do you ever give up and go away? Who or what works against you? Which methods can people use to stand up against you? Please tell us about the most difficult case you have had to face.

I wrote down the words of the conversations for each session. Epston (1994:32) prefers to stay as close to the exact words clients use as he can, quoting them as often as possible. I read my notes back to the participants, to check with them if those were their words and I verified the meanings. Epston (1994:32) also reads his notes back to his clients, because this creates a possibility that they can intervene and make changes and rewrite their stories. I tried to be accountable, and not to write words that the teenagers had not said or used. Accountability and transparency are very important, as I have already argued. I also tried to be transparent in what I was writing down. If I thought of another concept or word I asked them if that word could be used. I also participated in interviewing Depression. Especially if Depression responded with short answers, I asked for more detail. White (1995b:167) says:

I believe that any recording of the discussion in interviews should be undertaken only within the presence of those people who are seeking our help, and that it should not be done outside of that context. It is also important that anything that gets written down should be transparent in that context of the therapeutic interaction.

I gave everyone a summary of the interview after they had finished the interview. We read through it and I asked them to edit the summary, comment on it and make sure that it was an accurate copy of their words. I asked their consent to give this information to my supervisor to read it and also comment on it and I asked their permission to share comments and questions from my supervisor with them. Asking their consent made me more accountable, because there was power-sharing. I also
made the teenagers part of the process and they collaborated, which is very important in qualitative research. After the supervisor had read the summary, I took it back to the teenagers, asking their reaction to her comments.

I explained why it was important to me to be transparent about the process. The purpose of this study was to externalise the problem and to let teenagers' voices be heard. The externalising of the problem was done by interviewing the problem, but how did they want to let their voices be heard? I asked whether they had any idea of how to take the information to other adults, because I had heard their voices by listening to their interview, but what about other adults? They said that it must reach other teenagers, as well as their parents and teachers. We discussed writing a letter (see 4.4.2). First they thought that it would not work, because many teenagers do not like to read, and that they seldom give their parents letters, especially letters from school. However, there was no other way of spreading this information at that time and they decided to write letters to parents and teachers. Our time was limited, and I proposed to them that I would write the letter, using their words and ideas in the letter and that they would evaluate the letter. So, I wrote the letter according to what had been said in the interview, also using the summary. As I wrote it page by page I gave them a copy each week. In the sessions, we read through the letter, page by page, and they edited the letter. White (1995b:167) says that anything that gets written down should be transparent in the context of the therapeutic interaction. Giving them copies and letting them edit the letter made me more transparent and accountable. As White (1995b:166) argues: ‘...accountability is about addressing power differences.’ I deconstructed the power discourse by sharing the letter and asking the participants to edit it, so that the letter met their approval.

After we had finished the letter, I gave a copy to the principal. He was very impressed, but suggested that the teenagers made the letter more visual. I asked the teenagers what they thought of adding pictures to the letter, and they were very excited. They organised that one of their friends would draw Depression. Although she was not part of the group, they gave her the letter and explained to her what this letter was all about. She has drawn two pictures of Depression, which are included in the document at the end of this chapter.
The writing of the letter took about half of all the sessions. It was a long process and the letters went from me to the teenagers, back to me and then to my supervisor and again back to the teenagers, to meet their approval. At the end I asked their consent (see Appendix 4) to include their words and comments in my dissertation.

4.3 INTERVIEWING DRUG AND ALCOHOL ABUSE AND VERBAL, PHYSICAL AND SEXUAL ABUSE

4.3.1 Information session with the Grade 10 pupils

I organised another information session with the Grade 10 pupils. In this session both black and white pupils turned up. In this session, transparency and accountability (White 1992:144) were also important and I informed them in the same way I had informed the Grade 11 pupils. I showed them the same video that I had showed the Grade 11 pupils. The black pupils were very excited to participate and about eighteen pupils gave me their names. I supplied each one with an information letter and requested them to read it at home with their parents.

I found the reaction of the white pupils puzzling. Some reacted by saying they did not have problems, others did not want to talk about problems. After I had assured them that we would only interview the problem and that everything would be kept confidential, they still had excuses. Some just stood up and walked out. They decided that they did not want to expose their problems. Thirteen white pupils decided to participate and they received an information letter. In the end, only six white young women and six black young women wanted to participate. At the end of the information session, I requested the interested teenagers to stay behind. We arranged to meet a week later.

4.3.2 Group sessions with the Grade 10 teenagers

I was supposed to meet the twelve participating Grade 10 teenagers a week later. Unfortunately, many did not come because they did not hear the announcement at school. I arranged with those who were present that I would phone everybody for the next meeting. I telephoned everybody for the next session and everyone turned up. This session was used for further information and for signing the consent forms. We
read through the consent form (see Appendix 3), and I gave the teenagers time to comment on the content of the form. They signed if they wanted to participate. We talked about confidentiality. I requested their consent to transcribe the interviews, using their exact words, or if possible to tape the interview on cassette. They gave consent for both, but because I did not have access to a cassette player, I took notes of each session.

We negotiated around their free class periods. They all agreed to give two class periods a week for this project. We met for the rest of the year for two periods a week. This meant they could interview two problems. The venue was not negotiable, because we had to use a classroom that was free.

As with the Grade 11 teenagers, I also emphasised the fact that I was there to get information from the teenagers. I gave the Grade 10 teenagers a list (see Appendix 5) to identify the problems that they wanted to interview. I assured them that these lists were anonymous and confidential.

As with the Grade 11 teenagers, I explained what it meant to externalise a problem (White 1995a:57). The Grade 10 teenagers also divided into two groups. The one group wanted to interview the problem, while the other group wanted to personify the first problem, Drugs and Alcohol. For the second problem, Abuse, they formed different groups so everyone got a chance to play the problem. I informed the group playing the problem that problems tend to be rather arrogant and boastful, and that it was difficult to get problems to talk about their successes and to 'spill the beans' on how they achieved their successes (White 1995a:57).

I also gave the interview group information regarding the questioning of the problem, according to White's (1995a:57,58) arguments (see 4.2.2). The Grade 10 teenagers were very excited about externalising the problem and they thought it was a challenge to see how they can destroy the problem by interviewing it.

The interview group studied the document 'Taking the hassle out of school and stories from younger people' (Dulwich Centre Journal no 2&3 1998:34-38). The chapter on 'Talking to Dak' (Cronin-Lampe et al 1998:34-38) consisted of many questions that the interviewing group could use, because they interviewed Drugs and Alcohol first. It was, however, interesting to see and hear how they decided which
questions were relevant or which questions should be asked differently to fit in with their situations. The interview group was so excited that they could not decide who was going to ask which question. They enjoyed getting the questions ready for the interview. They came up with the following questions to Drugs and Alcohol (these are just some of the questions):

**What are Drugs and Alcohol doing?**

Drugs and Alcohol, what do you aim to do to people, especially teenagers? Who invented you? Are you the same all the time? What ambitions do you have for the future? What influence do you want to have in the world? How did teenagers first hear about you? How do most teenagers feel after their first experience of you? How are you affecting our community? What makes you so powerful? Who are your friends in crime?

**Teenagers can stand up against Drugs and Alcohol!**

What happens when teenagers say 'NO' to you? What happens to your ambitions when you get rejected? Drugs and Alcohol, how have people managed to avoid you? How do you deal with resistance? Does determination frustrate your plans for teenagers? How can some teenagers manage to kick your butt? If groups of people stand together against you, what will you do? Some teenagers control you, how does it feel that you do not control them? Are the media on your side, or do the media reject you? How do you know when you have lost?

The second problem, Abuse in its various forms, was very difficult to interview, because the teenagers in this group had not had an opportunity to talk about Abuse in a way they felt safe about. The Grade 10 group again divided into two groups. They used three class periods to prepare for this interview. However, when the interview started, it was difficult for the group personifying Abuse to answer the questions. So, they requested me to interview them, while all of them personified Abuse. They gave me the questions they had worked at. As the interview developed, all of us, including myself, interviewed Abuse, and all of us had one or more turns to personify Abuse. It was interesting to me how the Grade 10 group used externalising language to conduct the interview. They enjoyed it more by externalising Abuse in their own way and talking together about this big secret in high school. In this specific
interview, I was definitely accountable, because I was sensitive to their ways of dealing with Abuse. Some of their questions included:

**What are Abuse's plans for teenagers' lives?**

Abuse, can you specify yourself please? Abuse, what are your ambitions for teenagers' lives? Can you identify a few friends? How do you disguise yourself? Why do you use people to abuse others?

**We can challenge the biggest secret in high school!**

Abuse, how do teenagers get rid of the effects you have on their lives? What happens to you if teenagers seek help and talk about you? What would you do if teenagers stand together against you, especially against racism, sexism and date rape?

To be accountable and transparent, I wrote down the teenagers' interviews (Epston 1994:32; White 1995b:167). I read my notes back to them, to check that I had written their words down accurately and to make sure I had understood what they meant.

I followed the same process that I had followed with the Grade 11 teenagers after the interviews. I gave everyone a summary of the interview after they had finished each interview. We read through it together and I asked them to edit the summary, comment and make sure that it was what they wanted. I also asked their consent to give this information to my supervisor to read it and also comment on it. I asked their permission to share comments and questions from the supervisor with them. After the supervisor had read the summary, I took it back to the teenagers for further comments.

As with the Grade 11 teenagers, I explained to them that this information was very important, so that their voices can be heard and to reach other people. They also felt that it was important that this information reached adults, especially their parents, teachers and youth workers or pastors. I again proposed writing letters, using their words and ideas and the summary to compile the letters. I wrote the letters and during the sessions we read through the letters, page by page, and they edited the letters. During this letter writing process, the group got very excited, and they told me: 'It is great to inform others about our experiences.'
The principal had suggested that the Grade 11 teenagers made their letter more visual and they included drawings by one pupil. The Grade 10 teenagers decided to do the same and one of the young woman in the group volunteered to draw the pictures. These pictures are included in the open letters to parents and teachers (see 4.4.2).

With this group, the writing of the letters took about half of the sessions. It was a long process and the letters went from me to the teenagers, back to me and then to my supervisor and back again to the teenagers, to meet their approval. In the end I also asked their consent (see Appendix 4) to include their words and comments in my dissertation.

4.4 OPEN LETTERS TO PARENTS AND TEACHERS

4.4.1 Voices of the teenagers

The teenagers really wanted to inform adults like parents and teachers about their experiences, because they want them to listen to what they have to tell them. By informing adults of their lived experiences, the patriarchal discourse of children being seen but not heard and not exposing the abuse of teenagers, was deconstructed. As White (1992:121) argues, deconstruction has to do with procedures that subvert taken-for-granted realities and practices that subjugate persons' lives. By deconstructing patriarchal discourse as a power discourse, we open up space for alternative understanding and for the 'unsaid' or the 'unexpressed' (Anderson & Goolishian 1988:380) parts of this discourse, to be said and exposed. Thus the teenagers got a chance to tell their side of the story, to share their lived experiences, to expose abuse done to them and the discrepancy between what adults do and what they are telling teenagers to do (for example, alcohol abuse).

We discussed some possibilities of how these teenagers could inform adults of their lived experiences and their preferred realities. The teenagers decided to use letter writing to inform adults. Epston (1994:31) writes: 'The words of a letter don't fade and disappear the way conversation does, they endure through time and space, bearing witness to the work of therapy and immortalising it.' In the Dulwich Centre Newsletter no 1 (1997:12) the idea of 'Documenting new stories' is discussed. It emphasizes the
importance of writing up new stories. It is also important that documents of knowledge are often shared with others who may also find them useful and in this way a sense of solidarity and community is built (Dulwich Centre Newsletter no 1 1997:12). By documenting their lived experiences and their preferred realities, the teenagers cannot only inform parents and teachers, but also help other teenagers who may read these letters.

Writing these letters was a very important part of letting teenagers' voices be heard. This whole process of letting teenagers' voices be heard was also important because it intersects with the third research question and aim and therefore the whole research project. The teenagers wanted to speak out for themselves by writing these letters and distributing them to parents and teachers. Furthermore, they also hoped that other teenagers would read these letters and find them interesting, because of the externalising of the problems (White 1988/9; 1992). The teenagers hoped that this would help many others to look at their problems differently.

4.4.2 Letters as text

According to Neuman (1994:74), post-modern reports often have a theatrical, expressive, or dramatic style of presentation. They may be in the form of a work of fiction, a movie, or a play or, as in this case, letters. These letters are therefore included in the main text, because the research was conducted using a post-modern discourse. Denzin (1994:512) writes the following:

Interpretation is an art that cannot be formalized. Scholars are increasingly concerned with the logic of the text, especially the problem involved in presenting lived experiences and the point of view of the other. Many are preoccupied with the biases in the emotional stories they tell and drawn to experimental forms of writing; and reject mainstream realism. It is common for texts now to be grounded in antifoundational systems of discourse (local knowledge, local emotions). These texts tell emancipatory stories grounded in race, class, gender...

These letters contain the local knowledge and emotions of the teenagers and tell their stories. Their stories and lived experiences must be included in the main text, because the interpretation of these letters by the researcher can definitely not present the same local knowledge, local emotions and lived experiences.
Denzin (1994:510) uses Lather’s ideas when he argues that the text becomes a stage or site where power and knowledge are presented and we must explore alternative ways of presenting and authorizing our texts. The goal of the research was to let the teenagers’ voices be heard. The letters are not only the result of the research project, but they are also the voices of the teenagers that participated in the research project. Putting these letters in an appendix or only using certain parts of the letters would marginalise their voices yet again and their power and knowledge are still not presented.

What is the message to the teenagers if their words and experiences are in the appendices? The message may be that they are not important enough, or that the adults have the knowledge and the power to know what to include in the main text and what must be put in an appendix. Using only certain parts of the letters can also be confusing. How can I as an adult, decide which parts of the letters must be put in the main text and which parts must be in an appendix? What is the message then if I include certain parts of the letter and exclude the others? The teenagers might feel that I did not really mean what I told them about power and knowledge being shared, or that I was there to listen to their voices and lived experiences.

Reinharz (1992:212) writes:

Feminist researchers who write about research in a ‘journey’ format, as a process of discovery of which the product is a part, demystify discoveries. As projects proceed, new experiences are interwoven and new voices heard. The work process of the research becomes an integral component of the issues studied. The process becomes part of the product.

The letters are lived experiences and voices of the teenagers that were not only part of the process, but also became part of the product. These three letters are included in the main text, because the teenagers’ voices are important for the deconstruction of patriarchal discourse and power abuse.

4.4.3 Three letters to parents and teachers

An A5 sized booklet, consisting of 20 pages, was compiled from the three letters and the drawings. On the front page of the booklet, an information sheet was included explaining the purpose of the letters to the parents and teachers. Next, 260 copies of
this booklet were distributed among the Grade 10 and 11 teenagers, as well as teachers.

This very interesting document with three letters from the teenagers is included in the next 20 pages. I hope you as the reader enjoy reading it and that you might experience how the teenagers speak out for themselves and how they have a voice through these letters. They also included many questions and challenges for adults who do read these letters. I hope you as the reader will take the letters seriously and strive to answer these questions and accept their challenges. Enjoy reading the letters!

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ATTENTION

ALL PARENTS AND TEACHERS

This document includes three letters, specially for your attention. Please read it and support us!

We are two groups of teenagers and we have ‘interviewed’ three major problems in our lives. The Grade 11 group interviewed Depression and the Grade 10 group first interviewed Drugs and Alcohol and then the Biggest Secret in school.

We personified these three problems and we interviewed them as if they were people, interfering in our lives. We decided that the information that we have gathered should not be kept secret. Therefore we want to share this important information with you. Maybe you can help us to find ways to outsmart them.

It will take a bit of your time to read this, but we can assure you that it is very important information. Please read it! We would appreciate it if you would react to these letters by calling Yolandé Giliomee, at (012) 803 5762.

Become involved in our lives - read these letters!

Kind regards
The Grade 10 and 11 teenagers
OPEN LETTERS TO PARENTS AND TEACHERS

WARNING:

You may be disturbed by what you are going to read, but please support us!

This may come as a surprise to you, but we have had open discussions on the effects of Drugs and Alcohol abuse on our lives. We know that Drugs and Alcohol hate us for exposing them in public, because they thrive on secrecy, blame, guilt, lies and low self-confidence.

We are a group of Grade 10 teenagers. We have interviewed Drugs and Alcohol, because they are among our biggest enemies. Even though Drugs and Alcohol have not blinded most of us, we can identify with others who are still struggling or those who have struggled with Drugs and Alcohol. We thought it would be helpful to inform parents and teachers about how we experience the effects of Drugs and Alcohol in our lives and the lives of our friends.

We discussed the following questions in sessions with Yolande Giliomee in order to be prepared for the messages we receive from Drugs and Alcohol. We interviewed Drugs and Alcohol and they, reluctantly, over some time, exposed who they are and what tactics they use. These tactics of theirs may be the same as the ones used for adults, we are not sure. So, if you would like to inform us whether they use the same strategies for adults, it would help us greatly in putting together our ‘exposé’.

What do you, Drugs and Alcohol, want for teenagers’ lives?

We confronted Drugs and Alcohol with a question: ‘What do you, Drugs and Alcohol, want for teenagers’ lives?’ Needless to say, they were at first unwilling to reveal their ‘life plan’ and only told us about how they intended to brighten our lives.

Drugs and Alcohol tell us that they have wonderful ambitions for all of us. However, when they introduce themselves, they are very modest about their plans. They come across as very helpful, as friends wanting to assist and support us through life with all its problems. They even try to make us believe that we can trust them completely and that they will give meaning to our lives and provide solutions to all the problems that we battle with.

Some of us have heard from parents and teachers that Drugs and Alcohol can have negative consequences. Drugs and Alcohol do not want us to know about these consequences. Instead they keep on telling us how good they are for us. They hide their intentions very cunningly, especially when we first meet them. Nor do they give anything away at the second or third meeting or during later intimate contact with them. Only when we start to see them as a solution to various problems do we realise that they have caught us in their web. They keep us interested with their promises that they are the solutions to all our problems and their invitations to have fun. And you know how many problems we teenagers have. Only when we apply
these ‘solutions’ do they show their real colours. So, as you can see, they are good con artists, chameleons, cheats and liars.

Drugs and Alcohol are very deceitful. They keep convincing us that we need them, because they are ‘very good stuff’. They promise us a great adult world with power and control, and as you know, we are big on trying to control our world.

Drugs and Alcohol tell us that it is a great experience to ‘try them’ and then they repeat their invitations in ways that make them difficult to resist. It is partly true that we sometimes feel good after using them, but what Drugs and Alcohol do not tell us is that not all of us can close the door on them, once they are in. Drugs and Alcohol enjoy staying on in a home and in a person’s life even though they may be told they are unwanted guests. Once they have made themselves at home, they invite their friends, ‘guilt feelings’, ‘hang over’, ‘shame’ and ‘powerlessness’ into our lives.

As you can see, the wonderful dreams that Drugs and Alcohol spelled out for us are not true at all, but their promises keep us very interested and constantly in a dialogue with Drugs and Alcohol.

It seems to us that their plans are well organised. We are sure that they use everything in their power to get control over our lives. They even use our friends to persuade us to give in. This is a real betrayal, because we need our friends and care about them. Obviously it is unfair that they use our friends to put this kind of pressure on us. We know that adults like to call this peer pressure, but we see our relationship with our friends as a matter of caring for one another, fitting in and being accepted by our friends. We do not want to lose our friends, but some of them cannot withstand the seductive attraction of these deceitful and jealous lovers.

If you thought that Drugs and Alcohol are afraid of the restrictions that adults put on them, ‘not to be sold to persons under the age of 18 years’, think again! They have cleverly turned all of this against us, and guess what they are telling us? They try to convince us that adults just do not want us to enjoy the same privileges and that parents, the law, teachers and churches just want to take charge of our lives and make decisions for us. Drugs and Alcohol know very well that at this stage of our lives such an adult strategy would create many questions and much rebellion in us. They know we live in an era that tells us that ‘Rules are made to be broken’. They also know that if this is the case, we will want to know more about Drugs and Alcohol and listen to their voices more carefully than any voice coming from so-called ‘caring adults’. Drugs and Alcohol sneer behind adults’ backs about these ‘laws’ being forced on us. They use laws and rules to create an aura of mystery and power around themselves that fascinates and intrigues us.

Do not be fooled by them, dear parents and teachers. You tell us that we cannot be friends with Drugs and Alcohol, because our lives are in danger, but they just tell us that you do not know what you are talking about; you are old-fashioned and spoiling our fun. Drugs and Alcohol let all your warnings such as ‘you can be in a car crash’, ‘you can be raped or get pregnant’, ‘you damage your body’, ‘you can get AIDS’ or ‘you hurt yourself and your family’ sound like stories and warnings too far-fetched to believe. The truth is that some of us believe their lies, because Drugs and Alcohol, especially Alcohol, have taken over many adults’ lives. We have seen many adults
who do not stand up to Drugs and Alcohol. Drugs and Alcohol love these situations, because they contribute to their power.

Drugs and Alcohol are not worried about where we get the money to buy the ‘real stuff’. They even make it easier for us by telling us to use spirits, glue or medicine, if we cannot afford the ‘real stuff’. At parties, it is easy, because many teenagers bring ‘booze’ to parties. Drugs tell us that they even lure teenagers into prostitution to get money, because these teenagers are convinced they need the ‘real stuff’. Drugs and Alcohol say they use withdrawal symptoms and treatment centres as threats to keep their grip on teenagers.

And, as if all this is not enough, Drugs and Alcohol also misuse and misguide communities, without society’s knowing it. Although communities hate the presence of Drugs and Alcohol, society also falls into a trap, because Drugs and Alcohol tell society to push us away and label us as ‘crims’ (criminals). Without even realising it, this is precisely what the community does. Instead of loving and caring for us, the community blames and rejects us. Thus the community plays straight into the hands of Drugs and Alcohol, because we feel betrayed. That leaves us with no other option but to turn to Drugs and Alcohol, who appear to love us and to want to help us.

In the end, Drugs and Alcohol gave in to our persistent questions and told us precisely what their goals are. They admitted that their most wonderful ambition is to ruin and destroy people’s lives, to have everybody in their power. They want to rule every teenager’s life.

**WE can stand up against Drugs and Alcohol!**

Please bear in mind that Drugs and Alcohol do not like this part of the letter!

Dear parents and teachers, WE want to assure you that WE can stand up against Drugs and Alcohol. Although WE know that it is very difficult to get out of the grip of Drugs and Alcohol, WE can state that it is possible. WE have seen it work and it can be done!

While WE talked to Drugs and Alcohol, WE could see them shaking, because WE know that they do not want us to talk about all their lies and tricks. The last thing that they want is that WE should find out about their plans. But it was too late for them, because WE had outsmarted them by telling them straight away how WE can stand up against their lies, tricks, plans and ambitions.

WE want to thank you as parents and teachers for your caring and appropriate warnings against Drugs and Alcohol. You play an important part in helping us to stand up against Drugs and Alcohol. Thank you for informing us about how Drugs and Alcohol destroy our lives.

As you know, WE like to watch television. Well, not everything on television is bad. There are many shows, like *Oprah, Touched by an Angel, Dawsons Creek* and *Special Assignment* warning us in appropriate, caring and touching ways against Drugs and Alcohol.
WE want to tell you that people visiting our school or churches to inform us about Drugs and Alcohol also give us the confidence we need to take control of our lives, especially those people who were once in the clutches of Drugs and Alcohol and could take control of their lives again. WE think they make the biggest impression, because they know how easy it is to fall in love with Drugs and Alcohol, but they also know how to end the relationship with Drugs and Alcohol. On the other hand, WE also feel that WE should warn you not to get people to talk to us and just give us moral speeches about Drugs and Alcohol. WE hate that and Drugs and Alcohol enjoy every minute of it, because they know it makes no impression on us.

WE want to assure you that WE have many special friends who care about us and are willing to stand with us against Drugs and Alcohol. WE also can be caring friends for our friends, especially at parties, when our friends are overwhelmed by Drugs and Alcohol. WE are sure that Drugs and Alcohol are not prepared for this, if WE help our friends when they overwhelm them. WE can help our friends get home safe, or help them when they feel sick, or phone their parents if necessary; or sit with them to protect them; or take the drinks away. WE think these are ways of caring for our friends and WE think they will do the same for us another time. Seeing our friends struggling with Drugs and Alcohol makes us even more determined to stand up against Drugs and Alcohol.

As teenagers, WE often speculate about moral values. Although Drugs and Alcohol have told us that moral values are among their greatest enemies, WE know that it is exactly these values that Drugs and Alcohol use against us. WE know that people need values to function in the community – you are not supposed to murder, steal or lie, you must show respect for other people, et cetera. WE learn these values from our parents, at school, from our dearest friends, the church and from society. Moral values are dangerous to Drugs and Alcohol when WE and our parents live these values, or make them part of our lifestyle, but they mean nothing if they are only preached by parents, congregations, teachers and other adults who do not live these values themselves. WE need to see values function in adults’ lives, because then WE know how it is done. Parents and teachers, we beg you to live up to what you preach, because WE know that this will scare Drugs and Alcohol and it will definitely help and strengthen us.
One of the important things in some of our lives is our relationship with God. WE know that a relationship with God gives meaning to our lives. Although WE experience God in different ways, WE need to know God loves us and supports us. Some of us can testify that it is easier to say ‘NO’ to Drugs and Alcohol, when you use the strength God gives you. In the Bible we find many examples of people that could stand up against problems with the strength God gave them and we would like to follow in their footsteps. WE also talked about the other side of being religious, which WE distinguish from our personal relationship with God. Although many congregations stress the personal relationship with God, they often fall into the trap of blaming and rejecting people who cannot live up to the standards of being a Christian. WE feel that our churches and school are supposed to care and support us, especially in times when WE need them, but instead WE experience blame and rejection. When this happens, it is definitely going to help Drugs and Alcohol. What makes it even worse is that Drugs and Alcohol are on the look-out for those of us who have a personal relationship with God, because if they can get us into their power, they can make people believe that God does not exist or does not care.

We discussed our fitness and health – two things that Drugs and Alcohol try to undermine. These days WE know the consequences of Alcohol, Smoking and Drugs. WE know that Smoking can cause lung cancer; Alcohol is bad for your whole body; and that Drugs can kill you. This is where the media can be on our side, because advertisements warn us that ‘smoking kills’ and no alcohol is for sale to ‘persons under 18 years’. There are also articles in magazines that inform us about the consequences and show us pictures of what happens to people who have lung cancer, or people who are HIV positive because of sharing needles, et cetera. Drugs and Alcohol do not like such reports and therefore they use clever marketers, lots of money and people in powerful positions to show us the most exotic places, exciting sports and very ‘cool’ and sexy men and women participating in smoking and drinking. Drugs and Alcohol know we want a good image, excitement, challenges and beautiful people around us. They use these aspirations in such a clever way and blind us with these images. They adore the big cigarette and alcohol companies sponsoring sport events. They like to see the spectators drunk, forgetting where they have parked their cars, unable to go home. This is when they lick their lips and laugh behind people’s backs, because they know that there is a difference between advertisements and real life.

Drugs and Alcohol hate it when WE stand up together in groups. Positive youth groups are actually a threat to Drugs and Alcohol’s powerful image. WE want to assure you that peer pressure can be positive, and that WE like to use positive peer pressure against Drugs and Alcohol. Christian youth groups, the AA and NA (Narcotics Anonymous) are bad news for Drugs and Alcohol.

When WE say ‘NO’ to Drugs and Alcohol, they are furious. Drugs and Alcohol admitted that a ‘NO’ from us means that they have to try harder. Our ‘NO’s’ do not mean that Drugs and Alcohol give in. They do not stop trying, but they know that WE can frustrate their ambitions, by having our own dreams for our lives.

Drugs and Alcohol said that WE ‘can kick their butts’ by visiting a clinic, seeing a therapist, using determination to stick to our own preferred dreams for our lives, using church groups and friends to support us and talking to them about problems and possible solutions, turning to positive and loving parents, developing strong
personalities and the self-confidence to say ‘NO’ and experiencing success in the things we do. The determination of teenagers to be successful frustrates Drugs and Alcohol, because it complicates their plans.

Drugs and Alcohol are adamant that they can make a successful comeback once they have been outsmarted. They use anything in their power, such as a difficult relationship between children and parents, or if someone ‘is dumped by boyfriend or girlfriend’, any kind of disappointment or setback, and fear of failure.

Drugs and Alcohol know they have lost when WE take control of our own lives. WE can show Drugs and Alcohol that WE do not need them in our lives!

**Last, but not least, WE would like to give you the following information.**

Sometimes it might seem as if WE do not need your help, but WE do, especially when it comes to outsmarting Drugs and Alcohol.

Please try to understand us and make time to listen carefully to what WE are telling you. Parents, WE are asking you to open your eyes to what is happening at parties. Start asking questions that will invite discussions, open up options and assist us to accept greater **responsibility**. Do not blame and reject us, because if you do, we have nowhere to turn to when WE need help and then WE turn to Drugs and Alcohol to solve our problem. WE really need adults (parents and teachers) who love us for who WE are and can see past the problem that has taken over our lives. Please STOP labelling us. WE need love and support, not labels and blame. WE would like to follow the good examples set by responsible adults, because it is easier to see how it is done than to follow empty words. WE really like it when adults share with us how they stand up against the attacks of Drugs and Alcohol. Maybe you could share more with us about your difficulties handling Drugs and Alcohol, the mistakes you have made and your struggle.

WE would like you to inform us of safe ways to experiment with Drugs and Alcohol. Some of our parents allow us to drink alcohol, like wine, with meals. Would you say that is a safe way of experimenting with alcohol? How do you feel about safe ways of experimenting with Drugs?

Don’t you think it is time that we, adults and teenagers, start working together against Drugs and Alcohol, to make our society Drug and Alcohol safe?

How do you think we can accomplish such a challenging task?

Are you prepared and willing to stand with us against Drugs and Alcohol?

**As we warned you, this letter could be disturbing to you, the reader, and Drugs and Alcohol won’t like it at all! We need parents’ and teachers’ support!!**

Kind regards

The Grade 10 teenagers.
DEPRESSION GOES TO HIGH SCHOOL

‘Depression goes to High School’ tells you about the way we experience Depression in our lives. Have you ever wondered how Depression managed to get into high school? We also wondered, so we decided to have a little chat with Depression. We are Grade 11 teenagers and we discussed some questions in sessions with Yolande Giliomee to prepare us for this interview with Depression. We decided that we would not let Depression just walk in, and keep on destroying our lives.

Depression, how did you get permission to come to our high school and into our lives?

We confronted Depression with a question: ‘How did you get permission to come to our high school and into our lives?’ Depression told us that it hangs around and does not ask anyone for permission. After Depression has checked everybody out, it strikes at us with its tricks and deceptive schemes.

Depression also told us that, for many years, adults did not believe that Depression frequently visits teenagers in high schools. They did not bother to warn teenagers against Depression’s tricks and lies, because there was apparently no threat. This is when Depression saw a gap and slipped into schools.

One technique Depression uses to get into our lives is to capitalise on our fluctuating hormones. Parents know that we have mood swings, because we can feel happy one moment and extremely sad the next. Sometimes it is difficult for us to control our emotions during these mood swings. Depression is constantly on the lookout for these sad moments, because they create opportunities for Depression to infiltrate our lives.

Depression shared one of its most important secrets with us. It aims to get us to confuse a ‘depressed feeling’ or ‘feeling down’ with the real thing. We start off by feeling just a little down in the dumps, and everyone thinks it has to do with our hormones and growing up, and before long we are in the clutches of Depression. Depression really likes getting more power than it deserves.

According to Depression, it is very easy to come into our high school and our lives when we have other problems to deal with. Depression cites the following ‘assistants’ as favourites: sexual abuse, physical abuse, verbal abuse, bad relationships with friends, a death in the family (especially the death of a parent), the death of a friend, under-achievement, blame, rejection by parents or friends, guilt, bitterness and fear.

Depression, who or what is helping you to get into our lives?

Depression told us that it has a lot of friends who are very willing to deceive us. Depression relies very much on the help of friends and is almost powerless without them. Some of Depression’s favourite friends include Lies, ‘Looks’ or Appearance, Relationships, Drugs, Alcohol, Rebellion, the Generation Gap, Peer Pressure and, as you may have guessed, Lack of Self-confidence, Low Self-esteem and Lack of Self
Power. You may have wondered what sort of relationship they have with Depression. We want to inform you how Depression is misusing each of them to harm us.

Depression relies very much on the help of Lies, especially where ‘looks’ are concerned. ‘Looks’ are very important to us and Depression knows it. It takes advantage of the fact that we are often obsessed with our appearance and then tells us lies about ourselves. Two classic lies for guys are ‘I do not have enough muscles’ and ‘I do not have the looks’. These lies are reinforced by advertisements and films featuring guys who seem sexy and well-built. We know better, but subconsciously some of these criteria for being accepted and being a ‘real man’ stick.

Depression, however, has a stronger hold on girls, because for us girls ‘looks’ are even more important. The Lies that Depression uses to get us in its web are ‘I am not sexy enough’, ‘I am too fat’, ‘I have pimples’. The media is definitely on the side of Depression. Magazines, film stars, television and the modelling world dictate the physique of young women around the world. Without the attributes acclaimed in the media it is impossible to get a boyfriend or to be accepted by the group, or, at least, so Lies tell us.

Lies in relationships are powerful allies for Depression. Depression knows that acceptance is one of the most important things in our lives. That is why it tries to ruin our relationships. Depression convinces us that our family and friends do not love us.

Or that we are loved by people that do not love us at all – which usually leads to disappointment, creating an opportunity for Depression to take charge. Depression uses incentives such as jealousy, competition, differences in opinion and academic or sporting achievements to rock steady relationships. Thoughts such as ‘I am not good enough’, ‘I will never be as clever’, ‘I am a failure’ or ‘I do not fit in’ encourage Depression to kick us while we are down.

Generation Gap, another of Depression’s friends, considers it to be its task to make it seem like a cultural necessity to separate teenagers from their parents. Generation Gap
is on a roll when children become teenagers. Generation Gap fills our heads with ideas of how we are supposed to rebel, to be rude to our parents, and to start hanging out with ‘cool’ friends our parents do not approve of. We know Generation Gap also tells you, as parents, all kinds of stuff. Although we do not know exactly what you are told, we do not like the outcome. Generation Gap is sneaky and tries to create a distance between parents and teenagers. Generation Gap convinces society that it is okay for parents and teenagers not to get along with each other. This allows anger and hate and bitterness to come into our families’ lives. Generation Gap ensures that we seldom try to really love and care for one another. Depression takes this opportunity to tell us that it understands us. Depression says it is okay to feel down in the dumps, to stop eating, to cry a lot, to sleep a lot or not to sleep at all. Depression promises that behaving like this will make us feel better or become better people.

Depression deceives us by telling us that there is no hope for us in South Africa. So, why bother to go on if there is nothing to achieve? If Depression can get us so far as to give in to this hopelessness, we can become very negative and depressed about everything. This is when Depression calls in Rebellion for support. Depression likes us
to revolt against our parents, school, church and state, leaving everyone unhappy, including us. Depression likes this a lot, because if it tries hard enough it could even get a hold on our parents and friends, who then reinforce our fear.

Depression told us about two of its dearest and most supportive friends, Drugs and Alcohol. Depression has made it clear that Drugs and Alcohol will always be on its side. Depression likes to tell us that Drugs and Alcohol are a solution to our problems. However, Depression is laughing at us, because it knows that Alcohol (no matter what mix, colour or flavour) will not help us. It just makes us feel better temporarily and then more miserable. Depression wants misery for its clients. Drugs give Depression more power, because if we try Drugs, Depression makes a double comeback afterwards, because Drugs are just a temporary solution with extra consequences. Alcohol and Drugs bring with them ‘Guilt’, ‘Shame’, ‘Powerlessness’ and ‘Hangovers’, who invite Depression in even more.

Depression tells us that it enjoys the bad eating habits that teenagers have these days. These eating habits help Depression because we feel tired and irritable. Depression really likes an unhealthy body, because Depression benefits. It absolutely despises exercise and a healthy body.

We were surprised to hear Depression say that Religion can sometimes work as its ally. Sometimes Religion is experienced as a lot of rules and regulations that we must obey, and, if we do not obey, we are bad or not good enough for society. This is disspiriting to teenagers, because it seems they are never doing the right thing. If teenagers believe in God and they commit a sin, they feel guilty and lost, and then they can fall even further into the clutches of Depression. Depression combines doubt with feeling guilty, because then teenagers ask: ‘Is there really a God?’ Sometimes people tell others to convert to God and then Depression will go away. This seldom works, as Depression admits, smiling. People shift their responsibility onto God, thinking that God has to do the healing without them. We have to realise that God wants us to take responsibility and make choices. God gives us the strength to stand up against Depression, but we have to make the choice if we want to use this strength of God, and this is a very important decision, according to Depression.

Depression says it really likes adults who do not practice what they preach. According to Depression, teenagers need good examples from adults, because real examples make an impression, but words and sermons do not. We, as teenagers, are disappointed with some of the examples set by adults at home, at school, in church, on the roads and in public places. Depression uses these examples against us, and it enjoys doing so very much.

**Depression, what are your ambitions with regard to teenagers?**

We confronted Depression with this question: ‘What are your ambitions with regard to teenagers?’ Depression smiled and said nervously that it would like to be part of our lives. We asked the question again, because we know that it is just partly true, and this time we asked it more insistently. Then Depression told us that it wants to take over
our lives and destroy our lives before we even know it. Depression wants to destroy love and care between parents and their children, between friends, and between teachers and teenagers. Depression wants us to think that life is a disaster or that it is not worth living, maybe even driving us to suicide.

We decided to check with Depression what the things are that we do that undermine its power.

Depression said that there are many teenagers who have stood up against it, and we asked how it can be done. It is clear that Depression is afraid that it will lose clients and a lot of friends if it exposes all this information.

We gave Depression a minute to think about the question and then we insisted Depression tell us exactly how so many teenagers could get out of its power. Depression told us that it does not like teenagers to talk about it or to ask for more information, as we were doing. Depression does not want people to know all its plans and tricks, because if they know, they can stand up against it. Depression hates psychologists and therapists, because teenagers can talk to them and feel much better, most of the time. Professionals may prescribe medication, which helps us control our emotions. Depression is afraid of medication which could help us gain control of our lives. Depression does, however, know that medication is not always effective, if prescribed incorrectly or taken in the wrong doses. This assists Depression to get a stronger grip on teenagers’ lives.

Depression told us that it hates loving, caring and positive parents. If parents are willing to help teenagers to make a stand against Depression, Depression tries harder and thinks of new tricks. Depression stated that its greatest enemies are love, care and acceptance and these three really scare Depression. Depression said it can make a comeback if there is a lack of one of these three at home.

Faith in God is another thing that Depression declares to be an enemy. Depression hates firm religious conviction in the lives of teenagers, because it gives teenagers a reason for living and the certainty that God loves them just the way they are. So Depression has to try harder to tell them life is actually bad and God does not exist. Furthermore, faith brings relief for many teenagers, because we deal with a living God. It is also a better solution than Alcohol, Drugs or Suicide. Faith gives teenagers peace within themselves but also allows them to accept other people. This strengthens the desire to live, which is very important for teenagers. If teenagers have peace within themselves, they accept themselves, especially their bodies. This makes it very difficult for Depression to come into their lives or make a comeback.

Depression does not want to admit it, but churches have a big responsibility to support teenagers and other people who are in the power of Depression. Depression is very happy with the situation at churches at the moment, because they do not support people enough. The support is not always the kind that we want to have. We as teenagers know some people in church support us, by praying or helping us to get out of Depression’s power.
Depression, do you ever give up and go away?

We asked Depression if it ever gave up and went away. Depression answered that it does not give up, it is always on the lookout for something to use to make a comeback. Depression makes use of ‘déjà vu’, when a bad experience from the past is repeated or somebody cannot forget such an experience. Depression assures us that it never stops trying until it sees it is time to throw in the towel. It is over when a teenager takes control over his or her own life, and is prepared to make his or her own decision to live and face challenges, to ask for help and assistance.

How can you help us?

We cannot stand against Depression alone, we need your support. Therefore, we would like to ask you a few favours.*

- Help us to recognise the difference between Depression and a depressed feeling. Do not blame us when we have mood swings; please show us how to control them, in an appropriate way.
- We would like it if parents spent more time listening to us, and did not keep on preaching and teaching. Please respect our experiences and respect us.
- We want to warn adults, such as teachers, pastors and youth workers, to be careful when they try to help us. It so happens that a lot of our friends end up more depressed after speaking to you. We think it is because some of you do not know how to handle us and our problems, and then you ask other adults, telling them our story without our permission. This means you do not respect our privacy and we do not like that. If this happens, we do not know whom we can trust.
- When Depression comes into our lives, we must visit a doctor. We must undergo blood tests to check our serotonin levels, because Depression likes to attack these.
- Anti-depressants can work against Depression if they are correctly prescribed.
- Encourage us to visit a therapist or a psychologist.
- We know it is difficult to be patient with a person whose life has been taken over by Depression, but patience is very important!
- Love and support are essential. Please walk the road with us, so that you can help us to stand up against Depression.
- We think it would really help us if churches could support us by praying for us and if church members practise what they preach.
- We would appreciate it if you can assist us to reduce the devastating effects of Depression. Therefore we are interested in your ideas about how to do this.

We really depend on your love, care, support and respect.

Kind regards

The Grade 11 teenagers.

* The teenagers opted to use bullets here to summarise the main points, to signal to the reader that these are essentials and to capture readers who are lazy (King 2000:200). The bullets are retained here, as the letters are quoted verbatim.
We are Grade 10 teenagers and we have decided to challenge one of the biggest secrets in high school. We wondered how many adults know this secret! Maybe some of you know it very well, because you might have run across it in your own lives. Maybe some of you know it, because you initiated it. We are sure there are also many adults who think that it does not exist in our community, because everybody seems so loving and caring.

ARE YOU READY TO TAKE RESPONSIBILITY FOR WHAT YOU ARE GOING TO READ?

The only way to expose the biggest secret in high school was to have a little chat with it. However, it was difficult to get its co-operation. It was difficult, because a secret is something nobody talks about. So we decided to use some clever tricks to get to it.

Can you specify who you are, please?

We confronted the biggest secret with this question: ‘Can you specify who you are, please?’ because we were not sure what its plans were. It slowly opened its mouth and said that there is nothing to specify. We decided to use another trick question: ‘Tell us, do you know why so many of our friends are sad, depressed and do not want to talk about it?’ Secret thought about the question and said ‘yes’. Our next question was straightforward: ‘Does it have something to do with the thing you call Abuse?’ Secret said that we were correct and then it walked away. We decided to speak to Abuse. Abuse was overwhelmed with horror, because it did not think that Secret was going to tell us. We asked Abuse the same question: ‘Can you specify who you are?’ Abuse was caught on the wrong foot and so it started telling us about itself. Unlike other problems, Abuse has different tactics, and it likes to misuse, mislead or instill fear in family members; then Abuse can go on thriving on secrecy.

The Effects of Abuse said they like Verbal Abuse more than Sexual Abuse and Physical Abuse, because until recently it did not have a name, and thus did not exist and was invisible. Verbal Abuse tempts especially parents, teachers and people with power and authority. It wants them to intimidate and bully teenagers. They use harsh voices to tell teenagers that they are bad, that they are underachievers, that they will never be a success, that they are drop-outs and that they will not make it in the world. It uses any abusive or hurtful language to achieve these goals. These voices become like knives and blades to cut the caring string between adults and teenagers and this is a painful process. Verbal Abuse becomes very self-assured when parents are in its web, because then the Effects of Verbal Abuse can enter our lives and wreak havoc in our lives.

Verbal Abuse declares itself to be very effective, because it leaves no physical evidence, like scars and bruises. With Verbal Abuse we do not have any proof and our word does not count.
Perpetrators can use different schemes or words to their advantage. In the past, Abuse was only sometimes exposed under the names of ‘physical abuse’ or ‘sexual related abuse’. Because there is no proof of Verbal Abuse, perpetrators can often get away with it. Verbal Abuse may try to convince adults that they have the right to discipline us in an abusive way. It may convince them to act against their own better judgement. Abuse does not reveal the impact of their behaviour to adults.

Verbal Abuse says it also uses our friends to be successful in its plans. The most effective ways to use our friends are teasing and bullying from our friends. Some of us have experienced this in primary school, and Yolandé confirms that it happens. She sees the effects of bullying and teasing in her consultation rooms. She is currently working at a primary school, and the friends of more than 50% of the children talking to her are verbally abusing these children. Thus, you can see that Verbal Abuse is thriving in our schools. Verbal Abuse says its success in primary school can continue and even increase in high school. This means that we are sometimes left without friends, feeling lonely and miserable. Verbal Abuse then calls in the help of Aggression, to turn us against our friends. To verbally abuse other teenagers and adults seems like ‘an eye for an eye’ policy and if we think about it, it seems like an option that Abuse would like us to choose. However, the consequences are that we become unpopular everywhere. This leads to feelings of being unwanted, becoming a bully, being unpopular and this can then lead us to think of suicide as a solution.

Abuse also surfaces in the form of Racism and Sexism. Verbal Abuse forced adults to teach us to distance ourselves from our black brothers and sisters in the old South Africa and the Effects of Abuse are still visible in the New South Africa. We, however, are sure that we are outsmarting Verbal Abuse a little now that we (Black and White teenagers) are in the same schools. We have started to like one another and can thus show Abuse a thing or two. We know that this may come to you as a surprise, because you may have been convinced differently by Abuse in the old South Africa. However, we actually see how we can work together to outsmart Abuse and overcome the distances being created. Verbal Abuse does not like being outsmarted, and thus keeps on trying to destroy these relationships. Verbal Abuse tries to tell guys and men not to accept changes. Verbal Abuse forces itself especially onto boys and men to destroy relationships between Black and White brothers and sisters.

Verbal abuse also wants us to discriminate between genders, between guys and girls. Therefore Sexism is also one of Abuse’s friends. Verbal Abuse states that it wants to take girls’ power away from them, by using guys to shout all sorts of disgusting and sex-related stuff at them, like ‘hey sexy’, ‘hey beautiful’, ‘you are a girl, you cannot do that’ or ‘you are a girl, you are not supposed to know that’. Sexism gives guys, especially a group of guys, more power to whistle and laugh at girls and shout all this stuff at them, and to denigrate them as sexual objects. It really puzzled us that even boys from primary school have enough power to shout at girls in high school. Sexism gives guys permission to take advantage of girls’ bodies. Sexism convinces guys that it is their right to ‘touch and feel’ girls’ bodies whenever they want to, even in the classroom, because they are ‘men’ and they are in charge. Guys regard and treat girls as inferior to all men, because society opened this door for Sexism. Sexism tells guys they are in charge, and that they’ll have to make the decisions. Girls are not up to standard, they are too dumb and too stupid to be in charge of their lives. Verbal Abuse knows it intimidates girls this way. Abuse hates girls who control their own lives and tries to convince girls they are not
allowed to react in these situations. Verbal Abuse wants girls to have no power, no self-value and to think they are 'not good enough' or 'cannot keep up with the guys'.

Abuse, how do you disguise yourself?

We confronted Abuse with this question: ‘How do you disguise yourself?’ because it did not tell us about the Effects of Sexual Abuse or Physical Abuse. We are sure that Sexual Abuse has much to do with some of our friends’ sadness and depression. Sexual Abuse misleads people to keep it a secret for years. Sexual Abuse uses fear and embarrassment to be kept a secret. Nowadays things are more open, so it is a little easier to talk about Sexual Abuse’s tricks and schemes. Sexual Abuse hates this and keeps on telling teenagers that they are not supposed to talk about it and to keep quiet about it. We know better these days, however.

Many teenagers were subjected to Sexual Abuse while they were younger, and still experience the effects in their lives. Sexual Abuse says it likes to use family members (especially fathers, grandfathers and uncles) and family friends to get to children and teenagers and to destroy their lives. This is a real betrayal. Sexual Abuse uses Lies to convince the perpetrators that it is OK while it is not. Some Lies that Sexual Abuse uses to convince the perpetrators are ‘she asked for it’, ‘I was teaching her about sex’, ‘I loved her too much and wanted to show her how much’. Maybe you as parents and teachers have heard these excuses from adults who do not have the guts to take responsibility for their actions. The Effects of Sexual Abuse kick in when adults cannot take responsibility for their actions and the whole system becomes a vicious cycle. Sexual Abuse also uses our friends to turn against us. Date rape and rape at parties, by friends, happens, although some adults do not want to believe us. Sexual Abuse sometimes makes use of its friends Drugs and Alcohol to accomplish these tasks, but not always.

Sexual Abuse leaves our friends and us with a fear of everybody, especially of men. We trust nobody. If this happens to us, we think Abuse is a punishment for something we did wrong. We experience humiliation and ask questions like: ‘Why did it happen to ME?’ We ask God questions like: ‘Why did God allow it?’ We sometimes lose faith in God, because how can a God of love let this happen to our friends or to us? Losing our faith in God, it seems more difficult to face the Effects of Sexual Abuse. Sexual Abuse really enjoys it when we do not have God on our side. The Effects of Abuse want us to withdraw from our friends and to wear masks to say everything is OK while it is not. Some of us become angry and depressed, feeling that nobody cares, that nobody tried to help us while it happened and that we are left alone. Relationships with friends, parents and teachers are affected, because we do not know how to handle the situation, or whom to trust.

Sexual Abuse says it wants us to keep searching for real love, care and respect, but it does not want us to find it. Sexual Abuse is determined to fill our days with hate and aggression and then our days turn into stressful ones, keeping up with all the Effects of Sexual Abuse and hiding from them. The Effects of Sexual Abuse do not want to tell us so, but we are sure that they also leave our friends who have been sexually abused with heavy burdens to carry and to lose their desire to live.

Physical Abuse is another form in which Abuse appears. Physical Abuse likes to come into homes where fathers think that they are supposed to rule with aggression and power. Physical
Abuse hates parents who love their children and discipline them with love and respect. Some parents think they should discipline their children by hitting them all over their bodies, or punching them in the face, or by beating them really hard for a long time. Yolande tells us that she has talked to primary school pupils who have been beaten by their parents, she saw the marks on their bodies. Some of her colleagues talk to high school pupils, especially girls who have been beaten by their fathers in such a harsh way that their friends could see marks on their bodies and reported it to therapists. Physical Abuse thrives on the notion that it does not exist in our school or in our community. Physical Abuse likes to use the support of Lies, by telling people that we walked into a door, or fell on a rock or fell in the bath or something like that. We, however, are smarter than that, we can see when our friends have been beaten by somebody. The Effects of Physical Abuse make us afraid of the perpetrator. Physical Abuse wants us to live in fear, always trying to do everything perfectly. We think that persons who have been subjected to Physical Abuse become perfectionists, because they are always afraid of being punished for things they do wrong. Guilt feelings are also one of Physical Abuse’s friends – we feel guilty because we can never please our parents enough if they abuse us. Abuse wants to humiliate us and leaves us powerless. Abuse knows that we cannot stand up against the perpetrator and against Abuse, if we are powerless.

Abuse, can you identify a few friends, please?

As you know, the plans that Abuse has for teenagers’ lives are very destructive. Therefore it needs the help of its friends. Alcohol is a real buddy of Abuse. Alcohol can be either on the side of the perpetrators of Abuse, or can tell teenagers that it can be a solution to the Effects of Abuse. Secrecy, Shame, Guilt, Lies, Pain, Depression and a Lack of Self-confidence are Abuse’s biggest friends.
Abuse also has society on its side, because people talk about it, but do not do a thing to help, because nobody wants to get involved in this kind of thing. Or people think the victims can help themselves.

**We wondered out loud: Why are people abusing others?**

We wondered out loud: Why are people abusing other people? And we came up with the following explanations, because Abuse did not want to react to this question. Maybe perpetrators think that they have the right to misuse their power. Maybe their abusive actions make them feel powerful, strong and in control.

We also wondered about the following:

- Has something happened in the perpetrator's life and does he/she want to take revenge?
- Is the perpetrator under pressure at work or home?
- Is this the way he/she grew up? Abusing and using people?
- Do parents who were verbally abused by their parents, verbally abuse their children because they think that's how things are done?
- How do we stop this cycle of abuse, so that we do not abuse our children one day?
- What influence does Alcohol have on the actions of the perpetrator? We wondered about this because we have heard from Yolandé that Alcohol and Abuse are partners in crime, they go together. Many children who have been abused by their fathers also told her that their fathers were under the influence of alcohol while abusing them and their mothers.

**We can challenge the biggest secret in high school! Can you, parents and teachers, do the same?**

We know that Abuse has taken over many teenagers' lives and that it is very difficult to face the Effects of Abuse. We are sure that there are ways to outsmart the Effects of Abuse and to challenge the biggest secret in high school.

We know that Abuse does not like coming out into the open. We must therefore be on the lookout for adults that we can trust and talk to if Abuse wants to destroy our lives. If we can talk to therapists or counsellors, Abuse does not stand a chance. In counselling we have an opportunity to take steps against Abuse and the Effects of Abuse, to restore our Self-confidence and to put away Guilt, Pain and Shame. Counselling puts Abuse in deep trouble, because all its secrets come out in the open, which means all its power is taken away.

We must stand up against Abuse and say 'NO'. We must inform other teenagers about the tricks and lies of Abuse and that Abuse has various forms. We must warn our friends against Verbal and Physical Abuse, because some parents do not know that their actions are abusive to their children. We really need to keep on talking about Abuse and its Effects, to try and flush it out of its hiding place of secrecy and silence. We have to face the real Effects of Abuse, otherwise they will keep on intimidating and destroying our lives.

It is also important that victims tell their stories of survival, to help and support others that are in the same situations. Stories of survival really empower us to stand up against the Effects of Abuse.
Although it is difficult for some of us to keep our faith in God, we realize that God can be trusted. Believing in God helps us to stand up for ourselves and for our friends, because God gives us strength. God gives us a reason to live and to enjoy life. God can help us to forgive ourselves and get rid of the guilt feelings. We know many teenagers who go on in life by trusting in God. God’s love and acceptance really helped them. We also believe that God can bring healing, if you ask Him.

We also want to make a stand against date rape. We think that girls must be empowered to say ‘NO’. Guys have to realise that our bodies do not belong to them to ‘feel and touch’ whenever they want to.

What do we ask from you, as adults?

Dear parents and teachers, could you support us in challenging the biggest secret in high school?
Abuse is a very sensitive issue if it occurs in our lives. If we tell you about Abuse, it means that we really trust you, and that we are calling out for help. Please do not tell anyone about Abuse without consulting us. Many of our friends’ lives were destroyed because of gossip. Ask yourself: ‘What if it was my daughter who had been raped? Will gossip destroy her life?’ If you gossip, please stop, because you play right into the hands of Abuse.

We would appreciate it if you can teach us how to respect others, by showing us the way. We want to ask you for support – we expect offenders to seek therapy and change their behaviour and we expect the criminal justice system to act to ensure that this happens and intervene strongly if it does not.

Abusive adults (the highest percentage is male perpetrators) have a responsibility to face up to and accept full responsibility for their abuse. This needs to happen in a ‘public’ way so that those who have been harmed by Abuse can be helped to throw off the burdens of Secrecy and Shame being dumped on them.

We know it takes a lot of courage to face up to the fact that one has sexually abused someone. Most perpetrators cannot face it and so they cop out, pretending that nothing happened. They run from their fears and shame and never find the courage to make a stand to try to put things right.

We wondered about the following questions:
- Is it important to you that parents and teachers earn the respect of children and teenagers?
- Do you want us to see you as responsible and trustworthy?
- Do you want this trust or respect to be real or just pretence?
- How would you like us to remember you when we are adults?
- Do you want us to talk to you out of duty and obligation or out of respect and love?
- If you want us to act on our better judgement by respecting you, how would that influence your actions/ behaviour/judgements?
- Do you think you sometimes act against your own better judgement?
- What will it look like if you act using your better judgement?
- Some men believe that assistance and emotional caring for children are mothers'/ women's responsibility. What do you think?
- Do you think it is wrong if men are also loving and caring?
- How would adults like to take responsibility for their actions, if these are abusive?
- How can we work together to make the school and community safer?
- How could we expel Abuse from our school, homes and communities?

Thank you for reading this letter. We would really like it if you adults can come back to us, so that we can hear your side of the story.

Kind regards

The Grade 10 teenagers
4.5 CONCLUSION

Chapter 4 can be described as the heart of this dissertation. In this chapter, the research process and the outcomes of this research project, namely the open letters to parents and teachers, are included. Three major problems in the lives of many teenagers were exposed for what they really are and this very important information was shared with parents and teachers. For me, the open letters were definitely the highlight of the research project.

In the next chapter, the reflection on the interviews by the teenagers themselves is described. The reactions of a few parents and teachers are also included. My own reflection on the whole research process is described. Chapter 5 is called 'Reflections on reflections', because this is exactly what the chapter is all about.
CHAPTER 5

REFLECTIONS ON REFLECTIONS

5.1 INTRODUCTION

In this chapter I reflect on different reflections in the research process. I start with the reflections of the teenagers themselves on the process. Their reflections are very important, because the first research aim was to deconstruct patriarchal discourse and give teenagers a voice, also in the reflection process. For this purpose, each group had one class period to share their reflections on their experiences of the research project.

Secondly, I reflect briefly on the reflections during group sessions and the interview process. Gergen and Gergen (1991:83) state that with 'each pattern the investigators are forced into reflexive elaboration (theoretical explanation) that reveals the unspoken potentials of the theoretical position'. Therefore, the research process and the theoretical background need to be reflected upon by the research participants. Transparency and accountability were two aspects that were very important for this evaluation and reflection. My post-modern and feminist theological background and my narrative pastoral approach influenced my thoughts on these reflections.

In the third part of this chapter, I include reflections after the research process. This also includes reflection on the open letters to parents and teachers. The reflecting process never ends, even after the dissertation is written up. According to Gergen and Gergen (1991:93):

> The present writing is but one iteration of its completion. Yet, more might well be done... A future exposition...is sorely needed so that readers can join writers and friends to become authors within the reflexive circle. In principle the spiral knows no boundaries. With socially reflexive research one need never say 'goodbye'.

Reflections on the research project are therefore an ongoing process and keep the researcher, participants and readers in a reflecting position regarding the research process.
I also include self-reflections on the research process and the influence of the theoretical background of this dissertation, the teenagers' interviews and the outcome of this research process on my work as a therapist and youth pastor. A few recommendations which could help in similar research projects in future are included at the end.

5.2 REFLECTIONS FROM THE GRADE 11 AND 10 TEENAGERS

I requested the principal to host a feedback session with both groups in separate sessions. Requesting the principal to host these feedback sessions could be seen to imply that I promote a patriarchal discourse, because the principal is a man and he ranks highly in a hierarchical system. Many questions may occur around his hierarchical position, his gender and his participation in this research project. However, I thought it could serve the purpose of the research project to let an additional adult join the reflection sessions, to let these teenagers' voices be heard again by someone else, other than myself. I realised the principal was in a hierarchal structure and he was a man, therefore I discussed his participation with the teenagers before asking him to join us and they decided he was the right person for these sessions. I had known the principal for more than a year at that stage, not only through the Bible class periods at school, but also from our church congregation.

Several points had impressed me, suggesting that the principal would be a suitable participant in these sessions. The principal had organised a session early in 1999, when all the pastors, clergymen and youth workers from the different churches involved at the school interviewed four pupils. The purpose of this session was to ask the pupils about the relevance or irrelevance of the Bible class periods and possible topics or issues that they thought are important to teenagers and which could be discussed in these periods. This was only one of the power-sharing practices that he implemented that was in line with the suggestions of Kenny and White (1998:29). He also implemented power-sharing practices such as student representation on the school board, including students on committees by right and inviting them to many professional staff development meetings, such as the meeting on Bible class periods. Similar practices are described by Kenny and White (1998:29).
The four teenagers at the Bible class meeting were one young man and three young women, representing different cultural groups. The principal hosted this session and he gave the teenagers ample opportunity to tell pastors, clergymen and youth workers what they thought the needs of the teenagers in this particular high school are. At the end, the principal thanked the teenagers for sharing important information which had been new to him also. He told them that he realised that he was not too old to learn something from teenagers and that he would definitely bear that in mind as principal of the school. The way he empowered the teenagers that day told me something about how highly he valued teenagers’ views.

Furthermore, I knew him as a principal with a positive interpretation of diversity, welcoming differences and respecting different viewpoints and committed to treating pupils with respect. He believes in the desirability of a devolution of power and cooperative learning. Kenny and White (1998:30) comment at length on such practices. On one occasion the principal wept on the porch with one of the boys about the divorce of the boy’s parents. From the teenagers, I understood that he is very accessible and approachable. They could make appointments to see him and there were always teenagers in his office. I experienced the principal as an open-minded person, curious about what teenagers think and do. Some teenagers told me that they were not used to a principal who is not strict and authoritative. I did not experience him as an autocratic principal whose word rules the school, but as an open-minded person, who listens and respects other people. Therefore, I trusted that he would be able to host the reflection sessions.

The purpose of these group sessions was to reflect on the process of the research project and on interviewing problems. I requested the teenagers to be honest, because this project was a research project, which means new things are tried out, and if something works very well or does not work, it is important that they let their voices be heard (see 1.2; 1.4.4 and 4.4.1).

The particular approach (pastoral narrative) also gave the participants a chance to reflect on the process, because they were co-creators of the research process (see 1.3.1). Furthermore, sharing their experiences with the principal meant their voices were heard again by another adult. Although the principal is in a hierarchal position and there was a power inequality, it was important that I was not the only adult who
was informed first-hand by teenagers about their experiences of the problems and of the research process.

I gave the principal some questions (as guidelines) to ask the teenagers concerning the project. I also requested the principal to listen to the teenagers' suggestions, rather than to make suggestions. In drawing up these questions, I have all three of the research questions and aims (see 1.1.2 and 1.2) in mind. The questions and responses are described below.

5.2.1 First question: How did you experience the process of personifying the problem?

These questions reflect on the second research aim (see 1.2), which was to facilitate teenagers' identification, questioning and interviewing of the problems they experience in their lives. In response to the question, many teenagers said that it was very interesting to personify the problem, giving it a name as if it was a person. A young woman in Grade 11 said: 'I feel it was a positive experience, because I feel that if you see the problem as a person, then you can express your feelings...if the problem is just a problem, then you do not always know how to handle it, but if it is a person you can find solutions and it is easier working with a person, than with nothing.' In narrative pastoral therapy the problem becomes a separate entity and thus external to the person (White 1988/9:5; White 1992:126; White & Epston 1990:38).

The teenagers felt that it was better to talk to the problem as if it is a person, telling it exactly what they thought of it. One young woman said: 'It is easier to talk to a person, or to something, than seeing yourself as the problem.' Another young woman commented: 'It was interesting to talk about problems in this way.' One young man disagreed: 'I did not like it...I found it funny...to personify a problem...it was too personal for me...a problem is an object but not a person...it was funny...it was weird...it was not bad, but it was different.' Many teenagers felt that it helped them to look at the problem from another perspective. Teenagers usually do not get a chance to face their problems (when the problems are internalised), but externalising and personifying a problem, makes it easier to look at it and stand up against it.
Although some Grade 10 teenagers responded positively to this question, it could be deduced from their replies that they found it difficult to answer the principal's question. The first young woman who answered the question said: 'I think it was a positive experience, because it was things that nobody really knows [things that people do not talk about]. It was things that happen in secret [like abuse].' Their reflections indicated that personifying a problem was an innovative and fresh way of conveying their feelings. They felt that it was easier to talk in this way about problems that are usually kept secret. The prospect of sharing some teenager ‘insider information' with adults excited everyone.

5.2.2 Second question: Do you feel your voices have been heard?

This question was very important to me because this question related to my first research question and aim (see 1.1.2 and 1.2) – probably the most important research aim. Although we had spoken about the old maxim ‘children should be seen and not heard', we had not discussed patriarchal discourse in theoretical terms. The deconstruction of patriarchal discourse had taken place during group sessions and by means of the open letters to parents and teachers.

Their answers to the question were a conclusive 'yes'. One young man in Grade 11 said: ‘Yes, we did give our opinions and we shared our personal experiences on the problem and it was listened to and she wrote it down precisely how we informed her.’ Another young woman in Grade 11 said: ‘I feel we have been heard, because now there are other people who have heard what we've been through and how we have experienced it...which can be helpful when working with somebody else with the same problem.’ Both the Grade 11 and 10 teenagers felt that their voices had been heard, because they could share their personal experiences with the group, with me as an adult and with parents and teachers through the letters.

Furthermore, they also regarded it as a positive experience because they could listen to each other. They could hear how their friends experienced these problems and how these problems influence their lives. Narrative therapy is about re-telling stories, and carefully listening to one another's lived experiences (see 2.3.1), in order to try to understand something about one another's stories.
This sharing with each other strengthened them: ‘...it was not only an individual's experience of the problem, but also how youth or teenagers experience problems...not only ourselves but also our friends...it has been heard...the fact that it will be heard is unknown, but it depends on us if our voices will be heard further on.’ Foucault's (Parker 1989:61) ideas of relational power are supported by the above statement, because these teenagers now have the power to let their voices be heard. They are the experts on their lived experiences and the research project gave them the power to start taking a stand. The decision to interview the problem was more than an individual's voice, it was the voices of teenagers' taking a stand.

Feminist theology (see 2.2.1.2) also differs from most theologies in that it makes a conscious decision to make a stand for everybody who suffers from domination and oppression. Thus for these teenagers to take a stand and to let their voices be heard is not only a deconstruction of patriarchal discourse, but also the start of a political critical current (see 2.2.2) where they can bring about a change in their situation. The teenagers include all the things they could do to develop a political critical current in 5.2.4. Teenagers in South Africa have, however, not been used to operate in a political critical current. Therefore, many of the possibilities they mentioned will not materialise, unless someone supports them, as I did with the letters.

The teenagers generally felt that they have been heard. One teenager felt that they had to start sharing the information gathered with their friends, parents and teachers. He said: 'The letters that we send to the teachers and parents will hopefully help us to share this important information and let our voices be heard even more.'

The Grade 10 teenagers said that their voices had definitely been heard, but they still wished that the information would reach other adults. They felt that the letters are one way of accomplishing this task, because they commented: ‘The letters are our own words...it says exactly how we feel.’ They said that the letters would definitely make a difference, because they would let adults know their opinion on Drugs, Alcohol and Abuse. One teenager said: ‘I think it will make a difference, because then people know...People usually just turn their heads away when these problems are discussed, but when it is written in black and white [on paper], they'll have to face it.'
The teenagers were, however, concerned that the letters would not have the impact that they hoped for. The letters might be too long, which might create an idea that they are ‘yet another letter’. They also mentioned that many teenagers would not even give the letters to their parents, if there were problems in the home. On the other hand, they mentioned that maybe a teenager with one of these problems who does not know how to talk to his/her parents about it, might just find the letter a way of starting to discuss the problem. Another teenager pointed out that the parents who will read the letters are actually the parents who are usually informed and have already read much literature on teenagers’ problems, but that those parents who really needed to be informed would not read the letters.

5.2.3 Third question: Would you have liked to do this project in another way?

Both groups reacted with a conclusive ‘No’. One young woman said: ‘No, because we could talk together and that was nice, and I don’t think there is another way.’ Another teenager’s reaction was: ‘I think it was very good, because we have played the role of Abuse. It was good because we had an opportunity to share our own and our friends’ experiences on these problems. It was better to share our experiences, than being informed about it.’ These teenagers' local experiences were important in this research and not my general experiences of these problems. Such an approach follows a suggestion by Andersen (1993:321). Again, this question reflects on the first research aim of deconstructing patriarchal discourse by allowing the teenagers to speak out about their local experiences, instead of informing them of general experiences.

One young woman said that she would have liked it if I had given them more information during these sessions on the research that I had done, and the literature that I had read, because that would have helped them. Instead, I just used their questions and answers and did not give my opinion on what they said. A young man reacted to this: ‘I understood from the beginning that she wanted to do a study on high school pupils and how they experienced Depression,...I do not agree with [the other young woman], because I do not think her purpose was to inform us, but that we are here to inform her [or ourselves] of our experiences.’ These reactions from
the teenagers hinted at the newness of 'role reversal'. I had told the teenagers from the beginning that my aim was to listen to their lived experiences and not to inform them about these problems. Anderson and Goolishian (1992:29) regard the therapeutic conversation as an 'in there together process', and, according to Andersen (1993:321), the client has local experiences and the therapist has general experiences. To me the group sessions were an 'in there together' process, where I had general experience and the teenagers had local experiences. Although I used my general experience to ask critical questions during the group sessions, my main purpose was to listen to their local experiences.

Most of the teenagers felt that the way in which the project had been conducted was interesting and that they would not change anything. It created an opportunity to converse without being 'told'. They liked interviewing the problems and personifying them, because the problems could be discussed without getting too personal or pointing any fingers. According to Freeman et al (1997:xv) externalising language allows a light-hearted approach to what is usually considered serious business. Playfulness entered the group sessions when we narrated the relationship between the teenagers and the problems. This inspired the teenagers to bring their own resources and to make their own unique contributions to the whole process. Using playful approaches directed the focus away from the teenagers as the problem and focused on the teenager-problem relationship in a way that is meaningful for both adults and teenagers, and is not heavy-handed or boring (Freeman et al 1997:xvi).

The young women in Grade 10 felt that it was very enlightening to interview problems in a group consisting of different cultures. Although their cultures differ, they experienced solidarity against problems in their lives. One teenager commented: 'It was also good, because it was not everyone for herself, but we were a group and we worked in a group, that made it easier.' The rest of the group agreed and some added that they liked sharing their experiences and being listened to. Because this was a culturally diverse group, a detailed conversation on gender and racism developed.

Gender and racism played an important role in the Grade 10 reflection session, perhaps because the Grade 10 group was culturally diverse, and all were young women. Because they were all young women, it made it safer to discuss sensitive
topics such as the effects of Abuse, especially Sexual Abuse. This experience confirms the findings of Harne (2000:95) who concludes that young women benefit from single-sex groupings in sexual education programmes. The young women in this research project reacted as follows: 'It was easier [to talk about problems] because we were only girls.' 'It would have been more difficult to talk about some of the problems if there were boys present.' ‘Boys are definitely more afraid to talk about their problem, maybe because of a macho attitude. I hope they will read the letters...Girls talk more easily about their problems.’

These answers confirmed the so-called caveman theory that men were hunters and focused on the hunt in silence, while women were collectors (Neethling 1998:15,16). Men, in pre-historic times, were hunters and never spoke to each other. When problems occurred, they kept silent and focused on the hunt. Women, on the other hand, were collectors of fruit, vegetables, flowers and things that they could use around the home. Women were used to talking to each other about everything, including their problems. These early customs still come up in the 21st century, although in totally different ways. According to the young women in the group, the maxim ‘cowboys don’t cry’ is still very prevalent.

Gilbert and Gilbert (1998:113) also argue as follows:

Masculinity and femininity are not character traits or social roles which are learned during childhood and adolescence, and which are fixed and intransigent in adult life. Instead, they are ongoing social processes dependent upon systematic restatement, a process which is variously referred to as 'performing gender' or 'doing gender work'.

Therefore the role of both men and women depends on the ongoing social process in which they grew up. Deconstructing the roles of men and women in a social context is very important. The principal is a male, yet the young women in the group openly shared their frustration with young men and their macho attitude with him. One young woman said: ‘The boys attitudes spell out: I am the boss and you will do what I tell you to do.’

To this the principal reacted: ‘The society told boys that it is acceptable to be macho and mean towards girls. I for instance lose control, when I overheard that a boy kicked a girl just for a joke, it is totally uncool!’ The young women added to this that not only Physical Abuse, but also Verbal Abuse has a bad influence on their lives.
One said: 'To be called thunderthighs [in Afrikaans 'vetgat'] or something like that...it is these small words that could lead to anorexia...it makes us sad.'

In the Grade 10 group, racism as an issue was discussed. In the Grade 11 group, racism was 'invisible', although they commented on how gender and race functioned in other groups. The young women in Grade 10 reacted as follows: 'I think another thing that would be good for the boys to read...something we put in the letter,...is that the white boys and the black boys usually differ and create tense situations, while the girls get along and accept the differences, like in our group sessions.' 'The girls talk to each other, black girls talk to white girls and white girls talk to black girls, that is just one of those things. The boys...they never get along, while the girls accept one another.' 'I think girls should stay one side and boys should stay on one side, because it is easier for the girls, than the boys...because boys are used to criticising.' In response to this remark, the young women laughed and said: 'Yeah, yeah...verbal abuse.'

Issues of gender and racism are still not adequately addressed in schools. From the young women's comments, it seems that they have started to think about the issues of race and gender. To me it seemed that the negative influences of patriarchal discourse in the lives of men are still more serious than I would like to admit. Although patriarchal discourse has been challenged, it still seems to feature very strongly in our cultures in South Africa.

5.2.4 Fourth question: What can we do with the information, in addition to the letter?

This question was included to reflect on the third research question and aim (see 1.1.2 and 1.2) and to explore more possibilities to inform adults. I want to include all the ideas the teenagers come up with in response to the question.

They thought an information evening for parents and teachers and the teenagers could be organised. They thought it is important to inform teenagers about such an evening with the parents and teachers; thus to understand the problems teenagers struggle with. The teenagers agreed that this was a good idea and one said: 'Parents
will rather listen to professional people. They do not listen to us, because we are children, we are not supposed to know.'

They discussed making a video of the interviews to show to other teenagers in the vocational guidance period. However, many felt that it would expose them too much, because they shared personal stories during the interviews.

They also wanted the information to reach professional people, like pastors, youth workers, psychiatrists, psychologists, counsellors, teachers, because these people need to know how teenagers experience problems. The teenagers informed me that it often happens that teenagers feel worse after visiting a professional person, because even professionals are not adequately or appropriately informed.

The teenagers mentioned the radio as an effective medium to reach both adults and teenagers with the information. However, they did not expand on this idea.

They also mentioned a drama or a play for parents and teenagers, which could be helpful to carry this important information.

The teenagers saw the letters as very important, and they felt they had a responsibility to distribute them. One teenager said: 'We can give the letters to our friends and start with them, get them to read the letters, so they will realise that it is important... and give it to their parents. That is the only way the letter will reach the parents.' The teenagers could not come up with more ideas and the reflection session ended.

The old maxim 'children should be seen and not heard' surfaces and is rejected strongly in the words of the teenager who said: 'Parents will rather listen to professional people. They do not listen to us, because we are children, we are not supposed to know.' Adults, especially professionals, are supposed to know everything and have all the answers (Nosworthy & Lane 1996:26). This suggests that my concerns about patriarchal discourses' influences in our society today are valid. Teenagers still feel that they do not have a voice and nobody bothers to listen to their lived experiences. This challenges everyone involved in teenagers' lives to be more sensitive to power-sharing and to listen to teenagers, because they are the experts on their lived experiences and on the problems they experience.
5.3 REFLECTING ON REFLECTIONS DURING THE GROUP SESSIONS AND INTERVIEW PROCESS

Reflecting on the reflections during the group sessions and interview process is very important for a deconstruction of patriarchal discourse. In Chapter 4, I described these group sessions in detail. Transparency (White 1992:144) and accountability (White 1995b:166) were, from the beginning of the research process, two important discourses in the group sessions to use as tools to deconstruct patriarchal discourse, in other words the power differences (see 2.1.4) between the teenagers and myself as members of the group. The deconstruction of power and power differences in the group sessions was essential and I specifically wanted to reflect on that.

5.3.1 Reflections on accountability and transparency in deconstructing patriarchal discourse

A pastoral narrative approach emphasises transparency and accountability as ways of deconstructing the power/knowledge relation (see 2.3.2.4). According to post-modern social construction discourse, knowledge is socially constructed through language. Therefore as adults, we should accept that teenagers also have knowledge and that knowledge is not something only adults possess. Instead, knowledge is something that people do together (Gergen 1985:270). It was challenging for me to shift to a post-modern discourse, and to listen to the teenagers, without teaching them and informing them about what I know or have experienced.

I include a table (overleaf) setting out some of the steps I have taken to be accountable and transparent.
**Table 5.1: Steps taken to be accountable and transparent**

<table>
<thead>
<tr>
<th>ACCOUNTABILITY</th>
<th>TRANSPARENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I got consent from the Gauteng Education Department, the principal, the</td>
<td>1. I informed the teenagers of the purpose of the research project by explaining the purpose of the research,</td>
</tr>
<tr>
<td>chairperson of the governing body, the parents and the pupils.</td>
<td>by showing them a video and discussing it and by giving them information letters (see Appendix 2).</td>
</tr>
<tr>
<td>2. I created space and opportunities for the teenagers to ask questions and</td>
<td>2. I read through the consent form (see Appendix 3) with the teenagers, explaining everything they did not</td>
</tr>
<tr>
<td>comment on the consent form (see Appendix 3).</td>
<td>understand.</td>
</tr>
<tr>
<td>3. I negotiated the time for the group session, the process and confidentiality</td>
<td>3. I explained what externalising means and how a problem is personified and externalised.</td>
</tr>
<tr>
<td>for the shared stories and lived experiences in groups.</td>
<td></td>
</tr>
<tr>
<td>4. I asked consent to transcribe teenagers' exact words and make notes during</td>
<td>4. I read my notes back to the teenagers during our sessions, verifying their words and giving everyone a summary after each interview. They could comment on it.</td>
</tr>
<tr>
<td>the group sessions. I also verified my notes with them and gave each one a</td>
<td></td>
</tr>
<tr>
<td>summary.</td>
<td></td>
</tr>
<tr>
<td>5. I focused on listening to the teenagers.</td>
<td>5. I gave the teenagers information on the questioning process.</td>
</tr>
<tr>
<td>6. They were given the opportunity to identify the problems they struggle with.</td>
<td>6. I read the letters with them.</td>
</tr>
<tr>
<td>7. The lists (see Appendix 5) were kept confidential and anonymous as we</td>
<td>7. I gave them a copy of the final document with the three open letters and they contributed further to it with drawings.</td>
</tr>
<tr>
<td>agreed.</td>
<td></td>
</tr>
<tr>
<td>8. I asked for consent to give the summaries to my supervisor and to share</td>
<td>8. I shared information from the clinical/academic supervision process.</td>
</tr>
<tr>
<td>her comments with them.</td>
<td></td>
</tr>
<tr>
<td>9. Although I wrote the letters, I had the consent of the teenagers to use</td>
<td>9. I negotiated the participation of the principal regarding the feedback session with them.</td>
</tr>
<tr>
<td>their words. I gave each of them a copy every week and we read through the</td>
<td></td>
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<td>letters together. They commented, changed and added things, so that the letters met their approval.</td>
<td></td>
</tr>
<tr>
<td>10. We agreed that no names would be mentioned, neither those of the</td>
<td></td>
</tr>
<tr>
<td>participants nor that of the school.</td>
<td></td>
</tr>
</tbody>
</table>

This table sets out the steps I took on the basis of my post-modern and feminist theological background (questioning patriarchal discourse), and from a narrative, pastoral approach (deconstructing power/knowledge), to be accountable and transparent. Post-modern theology influenced my thoughts about dogmas and ethics,
and helped me to make a shift from 'being right to doing right' (Rossouw 1993:903). Instead of 'being right' about adult information on problems like Depression, Drugs and Alcohol and Abuse, I shared power and knowledge with the teenagers, and tried 'doing right' for them. Teenagers are the experts on their own lived experiences (see 2.3.2.1) and they have power to speak out about it (see 2.2.1.1). The ethical implications of post-modern theology are that the teenagers are empowered to speak for themselves, instead of adults speaking for them. Foucault's (Parker 1989:61) idea of relational power and the question 'What is spoken and who may speak?' have definitely surfaced in this research process.

Feminist theology also played a formative role in the research process. It assisted me with background information on the influence of patriarchal discourse in our society and helped me to focus on equity while working with these teenagers. This knowledge was passed on in a tacit way to the teenagers. They reflected that they want these open letters to make a statement, because the information is very important. This was a small step towards creating a political-critical current. There was not only an increase in knowledge, but also a challenge to an oppressive situation (see 2.2.2). A pastoral prophetic role in practical theology also emphasises the challenging and questioning of dominant discourses and the need to consider the consequences of such discourses on the community (see 2.2.2).

The teenagers enjoyed informing me as an adult, and each other about their lived experiences (so they said in their reflection session). I reversed the everyday situation that they were subjected to and I had to listen while they spoke. The teenagers kept on asking me questions during the interviews, which I repeated. It was new and interesting and I enjoyed being informed by them. I also participated in the interviewing sessions, asking questions about the influence of these three problems in their lives. This turned out to be a positive lived experienced which will influence my work as youth pastor and therapist.

5.3.2 Reflections in general on the research process

I reflected on showing the video at the first meeting with the large group. The Grade 11 pupils, all white, Afrikaans-speaking teenagers, were very interested in the video and they listened carefully to the interview. The Grade 10 pupils, however, were a
totally different story. The Grade 10 pupils were a racially mixed group, a very large group, who chatted throughout the video show and were not interested in the interview. Some of them stood up and walked around, others were just talking, and the situation was chaotic. I thought that a live interview would have been better for this group. They were a very spontaneous group, but a video just did not interest them.

It was also interesting to see how the problems described by the groups differed. The Grade 11 teenagers regarded Depression to be a serious problem in their lives, while the Grade 10 teenagers regarded Drugs and Alcohol as the most important problem in their lives. The Grade 10 teenagers did not even mention Depression. The Grade 11 teenagers also mentioned Drugs and Alcohol, but they did not regard them as the most important problems. Problems such as Bulimia and Anorexia were not mentioned by either group, which made me wonder about the silence about or the absence of these problems.

Since the beginning of my youth ministry, I have on occasion asked teenagers to write down on a piece of paper things they wondered about, or that they questioned, or a problem they wanted to discuss. I never asked them in a group to respond openly to these types of questions, because they usually avoided them. The responses on anonymous and confidential pieces of paper were very useful, because teenagers felt free to share serious problems without being labelled. These notes have to be kept confidential, because teenagers often know each other's handwriting and this can create many problems. The information I gathered from my youth groups was used to compile my tentative list. I also bore the procedures that I used in my youth groups in mind while the teenagers of the research project identified the problems on the list I gave them. The list of problems (see Appendix 5), to which the Grade 10 and 11 teenagers could add problems, was a good way for me to get information and to be informed by the teenagers about the problems that they regarded as very serious in their lives or in the lives of their friends.

The dynamics of working with Grade 11 pupils were different from those working with the Grade 10 pupils. I experienced the Grade 10 group as more excited and enthusiastic about the project and their participation was livelier and spirited. I found it difficult to reach a similar level of spontaneity with the Grade 11 teenagers. I
wondered how the gender issue influenced the Grade 11 teenagers' participation. The Grade 10 group consisted of a very talkative, all-girl group, and from their reflection it was clear that young women share their problems more easily than young men. The principal also noted this and told me after the reflections sessions that the Grade 10 group was more talkative than the Grade 11 group.

I also wondered about the cultural background of both groups as an inhibiting factor. The Grade 11 group consisted of only white, Afrikaans-speaking teenagers, while the Grade 10 group was culturally mixed. I had a hard time getting everyone in the Grade 11 group involved to share their lived experiences. It seemed to me that Afrikaans-speaking white teenagers are not likely to speak out for themselves, but would rather be informed by others, especially adults. Patriarchal discourse has definitely had a silencing influence on them.

However, the Grade 11 pupils seemed to enjoy personifying the problem, especially the group who personified Depression. The group was determined to stand firm in their beliefs, and they even got angry with the group who interviewed them. Sometimes there were even harsh words between the two groups. We also laughed a lot at all Depression's plans and schemes, tricks and lies. Although many of the Grade 11 group had not experienced Depression in their own lives, they were well informed and knew what they were talking about.

The excitement with which the Grade 10 group participated in the project stimulated conversation which had a profound effect on the outcome of the research project. The interviews always sparked a lively debate, with the participants eager to share their lived experiences. From the questions raised, I could tell that Drugs and Alcohol, and especially Abuse, were a great source of concern to these teenagers.

The Grade 10 teenagers did something very interesting in their second interview. In the first interview, the group divided and the one group personified the problem and the other group interviewed the problem. However, in the second interview, they started out with two groups, one interviewing Abuse and the other personifying Abuse, but ended up in one group where everyone was involved in both questioning or interviewing and personifying the problem. This I enjoyed very much, because
they did not carry on in the suggested way, but created their own preferred way of interviewing the problem.

The last group sessions were just before the final exams. We met with mixed feelings. Some were glad that the sessions had come to an end. Others asked me if they could go on in the following year, because the sessions had meant a lot to them. These responses told me that many teenagers had a need to talk about their problems, not only to their friends, but also to adults who can listen intently.

5.4 REFLECTIONS AFTER THE RESEARCH PROCESS

5.4.1 Reflection on the open letters to parents and teachers

As many as 260 copies of the letters were sent out to parents and teachers, but only 6 adults contacted me. The teachers did not respond to these open letters, although the principal had appealed to them to read and respond to these letters.

Two teenagers said that both their parents had read the document and found it very interesting, but there was no new information, because they had already read many books on these problems and they are informed. Although there are many parents who go out of their way to get information on issues that are important for teenagers, it seems that many do not care. According to the principal, this disinterest is also reflected by parents' involvement at school. Parents do not even attend the parents' evenings to discuss teenagers' schoolwork.

Another teenager said her mother thought this was a very good way of informing parents. One mother, also a counsellor, phoned me and said the document was wonderful and it included information that parents definitely need to hear. However, she suggested that there needed to be more tips for both adults and teenagers on how to support and help others whose lives have been invaded by these problems. She informed me that she experienced a need for coping skills in our day-to-day life; these skills are essential.

There was also other general feedback, on the letters, both from teenagers and parents. The first aspect that I want to mention is the length of the letters. The teenagers in both groups mentioned in the reflection sessions that the letters were
too long and that we used too many words. We live in a time where people do not want to read and rather prefer to watch television or play games on the computers or play stations or watch a movie or surf on the Internet. I experienced this also with teenagers at church. The teenagers do not read the Bible, and we recognised this from their knowledge of the Bible. They do not prepare their catechism homework and they often do not even bother to bring a Bible along to church or to the youth groups. It seems that parents also do not read. They are either too busy and do not have time to read long documents or letters or they are just not interested in the things important to their children. Many people do not read! The stunning pictures that we included in the letters were just not enough to get people to read the letters. People prefer to read letters and documents that read easily and do not take up much of their time, like documents and letters with slogans, comic pictures, and so forth.

Another important aspect was that the letters were sent out to the parents at the end of the year, just before the final exam. This definitely had an impact on the circulation and the reading of the document. Everybody, even the parents, focused on the final exam, and the document was just not important enough.

Another aspect was the communication between teenagers and their parents. I was shocked to discover the lack of communication between parents and teenagers. I asked many teenagers to tell me what their parents said about the document. Some did not know whether their parents had read it, others said their parents had read it, but had not spoken to them about it. Most of the teenagers had never even discussed the letters at home and this troubled me, because I wondered whether they had given the documents to their parents. Although it seemed in their reflection sessions that they want to make a statement with these open letters, it is an open question whether they had given the letters to their parents.

5.4.2 Reflections in general after the research process

In this research project I used a narrative, pastoral approach to deconstruct patriarchal discourse, which is still very real in our society (see 1.1.1; 2.2.1; 3.4.2). I used post-modern and feminist theologies and a prophetic approach in practical theology and post-modern, social construction discourse to do this. The teenagers
CHAPTER 5

had a voice through interviewing problems, as they shared their experiences and preferred realities with me. I explained broadly how the teenagers got a voice and how I used the above-mentioned epistemology to deconstruct patriarchal discourse (see Chapter 4 and 5.2).

According to the first and second research questions and aims, a narrative, pastoral approach did facilitate a situation where we deconstructed patriarchal discourse and gave teenagers a voice; and where teenagers could identify, question and interview the problems in their lives. I discussed the interviewing process in Chapter 4 and I also included their reflections on these interviews and on the whole research process (see 5.2). I have already reflected on how the teenagers came to inform adults of their experiences and preferred realities through letter writing (in 4.4; 5.2.2 and 5.4), which is the outcome of the third research question and aim of this research project.

The qualitative research methodology chosen for the study encouraged me to blur the boundaries between the 'researcher' and the 'researched' (Bishop 1996:228). Power-sharing was very important as I have already argued previously. Although it was difficult in the beginning, because of the focus of my research aims, I tried to be transparent and I shared the research aims with the participants in a practical manner. This improved the situation of power-sharing. They knew that they were the co-creators of knowledge and that my main purpose was to listen to them. From the teenagers' reflection session (as described in 5.2), it was clear that they definitely benefitted from and preferred this way of research.

According to Jones (1990:176-177), post-modern discourses construct an openness in which authors can reveal themselves in their work, and include their explicit subjective presence in their writings. Post-modern discourse influenced me during the research and while writing my report. I positioned myself by sharing my background, by sharing how my epistemology influenced my thoughts, and by using words that are common in my society like 'teenagers' and 'black and white'. I do not, however, want to individualise myself as the subject. Jones (1990:180) writes that we need to remember that our voices are located in and shaped and limited by the historical/gender/economic/ethnic social relations in which we live.
The teenagers informed me that they wanted to be referred to as *teenagers* in the letters and in the dissertation. They told me explicitly that they do not want to be referred to as *young people*, *adolescents* or *youth*. Although they asked to be referred to as *teenagers*, I wondered whether this was not a term that was used in our society and adopted by the teenagers and accepted by them. Patriarchal discourse has influenced our teenagers and children in such a way that they seldom question expressions referring to them. They are not politically-critically active, because in a patriarchal society they do not have a chance or need to speak out. On the other hand, teenagers can be caught up in their own culture, which is created by teenagers themselves as yet another normalising factor (see 1.1.1). Foucault (Ransom 1997:16) argues that disciplinary power normalises people. In this sense, teenagers are also normalised by their peer groups.

I used the expressions *white* and *black* to refer to the two cultural groups in this particular high school. I originally wanted to use the less politically loaded terms *Caucasian* and *Negroid or African* and *European*, but these expressions are not really used in society. In the high school, the terms *white* and *black* pupils are used, and I consulted the teenagers and they agreed on the terminology used.

I have a few personal reflections on the group sessions. I wondered about the participation of the Grade 11 teenagers, because most of them were involved in our youth groups at church and know me very well. I wondered whether they had participated because they knew me or because they were really interested in the project. Although I do not know the answer to this question, I know that they enjoyed personifying the problem.

I also want to reflect on the time we had for the group sessions. The class periods were only 30 minutes, which extended the research process. The research process took longer than we intended it to, because 30 minutes go by in a wink. The school's timetable changed often and I often arrived at school only to have missed the teenagers. The teenagers also had to rearrange the group sessions because of extra classes in some subjects. All this slowed down the research process.

The venue in which we met for the group sessions caused a problem, because only a classroom was available. Sometimes someone else used the classroom and we had
to meet outside on the lawn under a tree. This was a problem for the teenagers, because it exposed the group to the rest of the school, while they wanted to stay anonymous. The classroom also made power-sharing difficult, because it trapped us in a teaching discourse. I requested the teenagers to sit in groups, so they moved the tables and chairs around, which helped challenge a teaching environment. The principal met the teenagers for the reflection sessions in a conference room. The teenagers told him that they would have preferred to meet me in the conference room for all the group sessions, because it was more suitable for good interaction. The principal and I have talked about it afterwards, and he said that he should have offered the conference room to us.

One young man asked me to meet him for individual therapy. He came up to me after the first meeting in the hall, and told me that he did not think it was a good idea to participate in this project, but that he would like to meet me for individual therapy. After our first individual session, he decided he wanted to participate in the group sessions. However, he still wanted to meet me for individual therapy. There were three other teenagers in the groups whom I had met for individual therapy prior to the research project. These individual therapeutic sessions created a relationship of trust between the teenagers and myself, which was good for the research process.

On the basis of the research process, the interviews and the reflection session, I wondered whether a particular group of teenagers found it difficult to express themselves. Both patriarchal and cultural discourses in our society could have had an influence.

5.4.3 The influences of the research process on my youth ministry and pastoral therapy

Although the role of the church and the teenagers' relationship with God (in a Christian context) were not explicitly discussed, they came up in the interviewing process. The church is somehow irrelevant for the teenagers. They felt that the members and the pastors of the church do not understand the situation in which teenagers find themselves, and therefore easily blame and reject teenagers for not living up to the standards of the Bible, instead of being caring and supportive. The teenagers also mentioned that they do not want to go to pastors, youth workers or
other members of the church with personal problems, because it often happened that teenagers’ stories were not treated with confidentiality and that a personal situation was made public. Teenagers do not know whom they can trust because of such situations. This is also the reason why it was so important for the teenagers to share these letters with professional people, because they felt this is information such people must know.

On the other hand, there were many teenagers who shared positive experiences that they had had with pastors, youth workers or other members of the church, who did help them to stand up and overcome Depression, Drugs and Alcohol or Abuse. In the survey conducted, many teenagers mentioned that a pastor or youth pastor had supported and believed in them. Therefore the church still has a responsibility towards teenagers. According to Scott (Bryant 1997:16), the church has the answer, but the church has been fast asleep. Bryant (1997:16) says: ‘We [the church members] must get out of the sanctuary and into the streets.’

The questions that the above statement raised were the following: Does the approachability of a pastor have anything to do with the practical theological approach the pastor uses? Could it be that the confessional approach creates a distance and rejects or estranges teenagers for not living up to standards of the Bible? Could it be that a more contextual or participatory approach opens up more space for teenagers to experience understanding, care and support?

Teenagers may have a particular way of exercising their spirituality. A recent survey that was conducted at our church catechesis showed that teenagers do not read their Bibles, but they do pray. To me this indicates a search for a spiritual relationship with somebody. Many teenagers declare that they have a relationship with the God of the Christian religion. I learned from the interview sessions to explore answers such as the following: ‘God helped me.’ ‘It was not me, but God who gave me strength.’ I could ask: What did God see in you that He supported you, or gave you strength? These kinds of questions are very important to identify teenagers’ commitment and contribution to their relationship with God. It takes courage to trust in God and to accept the strength He gives to overcome and stand up against a problem. From the interviews and the letters, I conclude that some teenagers’ relationships with God are very important to them. The teenagers informed me that God’s love supported them
in times when they needed to say ‘no’ to Drugs, or to stand up against Abuse or Depression. Their relationships with God gives meaning to their lives and forms part of their preferred realities. Therefore, the church still has an important role to fulfil in supporting teenagers to trust in God and to accept His love and support.

The teenagers’ relationship with God brought me to practical theology, which focuses on people’s religious actions (Heyns & Pieterse 1990:6). According to Gerkin (1984:47), there is a fusion of horizons in a therapy process. This fusion includes an understanding process between people, where new narratives with new meanings are created. In the group sessions with these teenagers, we were in a process of fusing horizons. We tried to understand each other’s narratives, but also to create new narratives with new meaning. In this process there was a fusion of the horizons of people’s narratives about their lived experiences, their relationships with God and their understanding of the narrative of others. I feel that teenagers can contribute to theology in general, and to practical theology in particular, because of their way of practising and living their spirituality. The main approaches in practical theology (see 2.2.2) are not normally open to any fusion of horizons, but are restricted to patriarchal, hierarchical structures where people just have to do what they are told to do. I believe that there should be a fusion of horizons between the narratives of theology and the narratives of teenagers' spirituality.

The teenagers’ spiritual narratives definitely influence my youth ministry and my pastoral therapy. In my preaching, I am more sensitive to what I preach from the pulpit. I ask myself what the implications of my words are. Am I sharing power? Am I empowering people or am I disempowering people? I am more aware of the different discourses in our society, especially patriarchal discourse, and the influence of these discourses in people’s lives. Therefore, I try to deconstruct and question dominant discourses in my preaching, in the same way Jesus Christ questioned dominant discourses. In my preaching, I try to avoid blaming people, and I use externalising language to refer to a problem. I also like to challenge people to make a political-critical stand, to do things differently, and to try to be like Jesus, because, according to my understanding of the New Testament, He always made a political-critical stand.

In my youth services, I also try to share power by allowing teenagers to take me up on the things I say, and interrupting me if they do not agree with what I am telling
them. The teenagers and I enjoy this spontaneous two-way communication in the youth service very much. This is also a good way of being informed by teenagers on how they understand some Biblical truths.

The research process also influenced caring and sharing in youth groups. In these groups, teenagers gather according to their ages, which makes the sharing and caring easier. In these groups, we talk about issues that are important for teenagers, like drugs, alcohol, sex, peer pressure, suicide, parents, faith and many other topics. The research process showed me that teenagers need to speak more about their experiences, and that they need to share these experiences not only with an adult, but also with each other. In the youth groups, I let them talk and I let them answer one another’s questions, because they can. For instance, we talked about alcohol a few months ago. I said that I was proud to hear that they are responsible when using alcohol and that they do not get drunk. One teenager said to me: 'Don't let it sound as if it is OK.' Another responded: 'We were just experimenting with alcohol.' To this another reacted: 'We are not experimenting, we are actually drinking.' One young man said: 'We are actually too young to even have alcohol, we're not 18 yet.' In short, they answered and informed one another about the consequences of drinking alcohol. In this particular situation, I did not need to say anything. It was better that the information came from their friends than from me. Teenagers prefer to listen to friends than to adults.

This convinced me of the importance of not taking centre stage and of fusing their horizon of experience with the horizon of the narrative of the Christian story. I only have to create space for them to do it – this I would call a social constructionist approach (Dill & Kotzé 1997) to practical theology in action.

In the youth groups I also try to be transparent and accountable. I value confidentiality. I ask the teenagers to write on a piece of paper what they want to talk about, without giving their names. I always try respect their wishes and try not to talk about things that do not interest them. I also like to share some personal experience concerning a specific issue with them. My purpose in doing so is to let them know I am also human, and that we are all looking for answers. Teenagers appreciate it when adults talk about their own vulnerabilities. In the letters, the teenagers
requested adults to inform them about their experiences of these problems and how they overcome or stand up against these problems.

Although I have not yet used externalising language in the youth groups, I would like to use it in the future when addressing problems. I think this playful approach to problems can help teenagers to stand up against problems, and to get valuable coping skills from each other.

The information I gathered from the teenagers during the research process is very valuable. As a pastoral therapist, I meet many children and teenagers who struggle with one of the three problems we interviewed. The interviews gave me a point of reference from which I could work. It also gave me possible questions to use in therapy sessions. I have also learned to earn respect from children and teenagers, to be responsible and trustworthy in my actions and to work together with children and teenagers against problems in their lives.

5.5 RECOMMENDATIONS

5.5.1 Recommendations concerning similar research projects

On the basis of the teenagers' reaction in our last group session, I concluded that a process of interviewing problems needs to be implemented over a long period of time. It takes time to get to know everyone in the group, and to earn respect and trust. Therefore, a project over a longer period would promote the outcome of similar group sessions.

In the Dulwich Centre Journal no 2&3 (1998:7), the Selwyn College reported implementing Team. This means that the members of the Team are part of a group of teenagers who support and counsel colleagues, they have the privilege of seeing people coming in crying and going out smiling. These groups are teenage support groups who help teenagers to interview problems. This research project could also be developed in ongoing teenage support groups at this and other high schools.

The venue in which teenagers gather for group sessions must be carefully chosen. Typical classrooms are not really suitable for group sessions, because the teaching environment puts the group back in a hierarchical structure and in a potential power
abuse situation. The time allocated should be at least 60 minutes. Teenagers have their own culture and therefore their own sense of time. This means they have their own pace for doing things. A mere 30 minutes for a group session mean that in effect there are just 20 minutes to discuss things.

A deconstruction of power is very important in working with teenagers. Transparency and accountability can contribute in this regard. In these group sessions, a therapist must be very sensitive to gender and racist discourses.

Personifying problems opens up fresh ways and playful approaches to talk about problems. Using a video show in a large group does not have the same effect as a live interview, therefore I would recommend doing a live sample interview when informing teenagers on how they could externalise a problem. Videos of people interviewing problems can be helpful to explain externalisation of problems to smaller groups. Plays can also be considered as a method of introducing externalising language.

I also have a recommendation concerning practical theology. I have already argued that teenagers could contribute to practical theology. I want to extend this argument. In patriarchal discourse, women, children and teenagers did not have a voice (see 2.2.1.2). I want to challenge the Dutch Reformed Church to host a seminar together with children and teenagers in which the influence of a dominant patriarchal theology could be explored, and the abuse by previous theologies of our children and teenagers can be declared.

5.5.2 Recommendations for open letters to parents and teachers

Such letters must be reader-friendly. This means that they must be shorter than ours were. There have to be eye-catching slogans and pictures and lots of humour, because people are selective in what they read, and if it is not eye-catching and humorous they will not read the letter.

The time when the letters are sent out is also important. About six months after we sent out the letters to parents and teachers, one of the teenage boys in the school died of an overdose of heroin. If the letter had been sent just after his death, the letter about Drugs and Alcohol would have invited discussion. Obviously, such an extreme
scenario is neither asked for nor essential – a newspaper article on such an event could also be used to spark discussion. Letters can also be handed out at an information evening.

Before distributing the letters, teenagers should discuss in detail their purpose with the letter, the contents and importance of the letter. They should be given opportunities to work on strategies to discuss the letters with their parents.

Since communication between parents and teenagers is not extensive, more emphasis can be placed on the improvement of communication skills and bridging the gap.

5.6 CONCLUSION

According to Cronin-Lampe et al (1998:38) there is unlimited potential for the use of externalising conversational processes within school settings. From the requests of the teenagers to continue the group sessions and their determination to continue to expose problems, the importance of this process is highlighted.

This research project was an inspiration to me. It challenged me to make my youth ministry relevant for teenagers and to verify what is relevant to them, the authors of their own lives. It made me sensitive to the need to share power and to be on the lookout for patriarchal structures that contribute to disempowering women and children.


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Bryant, S M 1997. 'Give up the debate on legalizing drugs'. An international drug conference in Europe highlights the need for prevention and therapy. *Christian Social Action* December, 11-16.


Dill, J 1996. 'n Basisteorie vir pastorale terapie in die lig van postmoderne epistemologie. PhD tesis, Universiteit van die Oranje Vrystaat, Bloemfontein.


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APPENDICES

APPENDIX 1

INFORMATION SHEET FOR THE PRINCIPAL AND THE CHAIRPERSON OF THE GOVERNING BODY

TEENAGERS INTERVIEWING PROBLEMS

INFORMATION SHEET FOR [THE PRINCIPAL, CHAIRPERSON OF THE GOVERNING BODY]

Thank you for your interest in this research project. The research project will be used to fulfil the course requirements for a research paper as part of a Masters degree in Pastoral Therapy. This letter is designed to provide you with information on the nature and purpose of this project.

What is the aim of the project?

The aims of the project are (a) to facilitate teenagers in questioning and deconstructing the patriarchal discourse which told them: 'children should be seen and not heard'; (b) to assist teenagers to identify, question and 'interview' the major problems in their lives; and (c) to assist teenagers to inform adults about their alternative stories.

What type of participants is being sought?

Two or three groups of teenagers between the ages of 16 and 18 years will be included in the research project. Groups will consist of 10 to 15 participants.

What will participants be asked to do?

A number of group sessions or discussions will be contracted with the teenagers. Storytelling will be used, as meaning-creating or co-constructing of meaning and also as method of reporting the issues identified by the teenagers. During the group sessions the teenagers will be assisted in such a way that they will be able to re-author their stories.

The teenagers will be invited to participate in the group sessions, to read a summary of the group sessions and make comments, corrections and/or provide feedback regarding the summary, to make sure it meets with their approval.

The teenagers will be asked to find ways to inform adults (the parents and teachers) of their re-authored stories.

Can participants change their mind and withdraw from the project?

The participants will be informed that they are free to withdraw their participation from this research project. There will be no prejudicial consequences at all for them.

Group sessions will end if necessary and individual therapy will be made available. I will also refer teenagers to the Institute for Therapeutic Development for therapy free of charge if necessary.
What Information will be collected and what use will be made of it?

The information obtained during group sessions will be discussed with my supervisor and used in the project to describe the process and development of the research process. Relevant feedback from the supervisor will be shared with the participants. With the participants’ prior consent, these sessions may be video- or audiotaped. I will take notes if they choose not to have them video- or audiotaped. A summary of the sessions will be made available to the teenagers at the conclusion of the group sessions for their review. Their comments, corrections and/or feedback will be included in the final report.

Results of this project may be published but any data included will in no way be linked to any specific participant. The participant’s stance regarding this matter will be taken into consideration.

The information collected will be securely stored and only my supervisor and myself will have access to it. At the end of the project any personal information will be destroyed immediately.

What if the governing body or participants have any questions?

Should you have any questions or concerns regarding this project, please do not hesitate to contact:

Yolande Giliomee
21 Karatara
216 Catharina Avenue
La Montagne
Phone: (012) 803 5762

or

Dr Elmarie Kotzé
Institute for Therapeutic Development
418 Marais Street
Brooklyn
Phone: (012) 460 6704
Thank you for your interest in this research project. Please read this information sheet carefully before deciding whether or not to participate. If you decide to participate we thank you. If you decide not to take part there will be no disadvantage to you of any kind. Thank you for considering our request.

What is the aim of the project?
This project is being undertaken as part of the requirements for the Masters degree in Pastoral Therapy. The aims of the project are (a) to facilitate teenagers to question and deconstruct the patriarchal discourse which told them: 'children should be seen and not heard'; (b) to assist teenagers to identify, question and 'interview' the major problems in their lives; and (c) to assist teenagers to inform adults about their alternative stories.

What type of participants are being sought?
Two or three groups of teenagers between the ages of 16 and 18 years will be included in the research project. No specific criteria regarding gender, religion or race will be applied.

What will participants be asked to do?
Should you agree to take part in this project, you will be asked to give consent for the information obtained during our group sessions to be used in the research project. If you decide to take part in the project you will be asked to participate in the group sessions, read a summary of the group sessions and make comments, corrections and/or provide feedback regarding the summary.

Storytelling will be used, as meaning-creating or co-constructing of meaning and also as method of reporting the issues identified by you.

You will be asked to find a way to inform adults (the parents and teachers) of your re-authored stories.

Please be aware that you may decide not to take part in the project without any disadvantage to yourself of any kind.

Can participants change their mind and withdraw from the project?
You are free to withdraw from the research project. There will be no prejudicial consequences at all for you.
Group sessions will end if necessary and individual therapy will be made available. I will also refer teenagers to the Institute for Therapeutic Development for therapy free of charge if necessary.

What information will be collected and what use will be made of it?

The information obtained during group sessions will be discussed with my supervisor and used in the project to describe the process and development. With your prior consent, these sessions may be video- or audiotaped. I will take notes during our sessions if you choose not to have them video- or audiotaped. A summary of our sessions will be made available at the conclusion of the group sessions for your review. Your comments, corrections and/or feedback will be included in the final report.

Results of this project may be published but any data included will in no way be linked to any specific participant.

You are most welcome to request a copy of the results of the project should you wish.

The information collected will be securely stored and only my supervisor and myself will have access to it. At the end of the project any personal information will be destroyed immediately.

What if Participants/Parents/Caregivers have any questions?

Should you have any questions or concerns regarding this project, please do not hesitate to contact:

Yolande Giliomee or Dr Elmarie Kotzé
21 Karatara Institute for Therapeutic Development
216 Catharina Avenue 418 Marais Street
La Montagne Brooklyn
Phone: (012) 803 5762 Phone: (012) 460 6704
CONSENT FORM # 1 FOR PARTICIPANTS/PARENTS/CAREGIVERS

TEENAGERS INTERVIEWING PROBLEMS

CONSENT FORM # 1 FOR [PARTICIPANTS/PARENTS/CAREGIVERS ETC]

I have read the Information Sheet concerning the project and understand what it is all about. All my questions have been answered to my satisfaction. I understand that I am free to request further information at any stage.

I know that:

1. my participation in the project is entirely voluntary;
2. I am free to withdraw from the project at any time without any disadvantage;
3. I am aware of what will happen to all my personal information (including video or audiotapes) at the conclusion of the project;
4. I will receive no payment or compensation for participating in the study;
5. I am aware that all personal information supplied by me will remain confidential throughout the project.

I am willing to participate in this research project.

________________________________________  ________________
(Signature of participant)                  (Date)
APPENDIX 4

CONSENT FORM # 2 FOR PARTICIPANTS

TEENAGERS INTERVIEWING PROBLEMS

CONSENT FORM # 2 FOR
[PARTICIPANTS]

1. I have read the summary of the group sessions.

2. I had the opportunity to bring about changes to that information, including suggestions, corrections or comments.

3. I agree that my suggestions, corrections or comments can be included in the research report.

4. I understand that the information obtained during the group sessions may be written in an article format for publication. I understand that should I decide that I do not wish for my information to be published I am able to withdraw my permission for this to occur at any stage of my participation in the project.

I hereby give my permission for information concerning myself to be used in the written report of the project and in the publication. I understand that my confidentiality will be preserved throughout the study, in the written report and in the publication. I also understand that any information that may lead to my identification will not be used or included in the project report or publication.

__________________________________________________________________________
(Signature of participant) (Date)
APPENDIX 5

IDENTIFYING PROBLEMS

TEENAGERS INTERVIEWING PROBLEMS

Choose 5 problems that you want to interview.

- Depression
- Drugs and Alcohol
- Divorce
- Anorexia and Bulimia
- Generation gap between parents and teenagers
- Relationship with friends
- Abuse – Verbal, Sexual and Physical Abuse
- Racism

- Other problems: ________________________________
  ________________________________
  ________________________________
  ________________________________
  ________________________________
  ________________________________
APPENDIX 6

THE QUESTIONNAIRE

Anonymous survey for research purpose ONLY.

- Please complete the following questions.
- This is a survey for research purposes, to assist and help teenagers.
- Your response will be anonymous and confidential, therefore I rely on your honesty.
- You will not be penalised in any way!

- [ ] Male  [ ] Female

1. Have you ever had depression?
   - [ ] YES  [ ] NO  [ ] Uncertain

2. If yes, for how long and did you receive any help? Specify?

3. Have you ever experimented with alcohol?
   - [ ] YES  [ ] NO  [ ] How many times? __________

4. Have you ever misused alcohol?
   - [ ] YES  [ ] NO  [ ] How many times? __________

5. How often do you use alcohol? Specify what you use, how much and alone or in a group.

6. Have you ever experimented with drugs?
   - [ ] YES  [ ] NO  [ ] How many times? __________

7. How often do you use drugs? Specify what you use, how much and alone or in a group.

8. Have you ever been verbally abused (sworn at, called names, etc.)?
   - [ ] YES  [ ] NO  [ ] Don't want to answer

9. Who verbally abused you?
   - [ ] Friends  [ ] Father  [ ] Mother
   - [ ] Brothers/sisters  [ ] Teachers  [ ] Other: __________________________

10. Have you ever been physically abused (kicked, punched, burnt, thrown with objects etc.)?
    - [ ] YES  [ ] NO  [ ] Don't want to answer
11. Who physically abused you?
   - Friends
   - Father
   - Mother
   - Brothers/sisters
   - Teachers
   - Other: ____________

12. Have you ever been sexually harassed?
   - YES
   - NO
   - Don't want to answer

13. Who sexually harassed you?
   - Friends
   - Father
   - Mother
   - Brothers/sisters
   - Teachers
   - Other: ____________

14. Have you ever been molested?
   - YES
   - NO
   - Don't want to answer

15. Who molested you?
   - Friends
   - Father
   - Mother
   - Brothers/sisters
   - Teachers
   - Other: ____________

16. Have you ever been sexually abused or raped?
   - YES
   - NO
   - Don't want to answer

17. Who sexually abused you or raped you?
   - Friends
   - Father
   - Mother
   - Brothers/sisters
   - Teachers
   - Other: ____________

Thank you for your co-operation!
APPENDIX 7

BACKGROUND INFORMATION ON DEPRESSION – DRUG AND ALCOHOL ABUSE – VERBAL, PHYSICAL AND SEXUAL ABUSE

Appendix 7.1

Marais (1997:195) used the empirically validated instrument a 'Children's Depression Inventory', a revised version of the Beck Depression Inventory, to identify what she calls 'possible depressed pupils'. The Beck Depression Inventory and the Multiscore Depression Inventory are the instruments most widely used to identify Depression (Allen-Meares 1987:512).

Appendix 7.2

Depression and related mood disorders are classified in the DSM-IV (1994:317) as follows:

- mood episodes (major depressive episode, manic episode, mixed episode and hypomaniac episode), which serve as building blocks for the diagnoses of such disorders;
- depressive disorders (major depressive disorder, dysthymic disorder and depressive disorder not otherwise specified);
- bipolar disorders (bipolar I disorder, bipolar II disorder, cyclothymic disorder and bipolar disorder not otherwise specified);
- other mood disorders (mood disorder due to a general medical condition and substance-induced mood disorder);
- and specifiers describing the most recent mood episode and course of recurrent episodes.

Appendix 7.3

According to an article in the Taalgenoot (1998:18), there are 13 000 teenagers below the age of 17 years in the Flemish Centre for Mental Health (in Belgium), who had, at one stage or another, received treatment for depression. They also estimate that one out of three teenagers in Belgium has depression at some stage (Taalgenoot 1998:18).

In the United States, the suicide rates are as follows:

More people die from suicide than from homicide in the United States. Overall, suicide is the ninth leading cause of death for all Americans, and is the third leading cause of death for young people aged 15-24. Suicide rates have increased among persons between the ages of 10 and 19 during the period between 1980 and 1992.

(Centers for Disease Control and Prevention 2000)
Appendix 7.4

The DSM-IV (1994:195) names categories for alcohol-induced disorders, namely:

- alcohol intoxication;
- alcohol withdrawal;
- alcohol intoxication delirium;
- alcohol withdrawal delirium;
- alcohol-induced psychotic disorder; with delusions or with hallucinations,
- alcohol-induced mood disorder;
- alcohol-induced anxiety disorder;
- alcohol-induced sexual dysfunction; and
- alcohol-induced sleep disorder.

Appendix 7.5

Hindmarsh (1993:15) cites surveys on alcohol usage that were conducted in Canada where results were appalling. The Canadian survey defined heavy use of alcohol – Hindmarsh (1993:15) writes the following:

Drinking alcohol one to seven times a week is considered heavy use. In other words, it is not just the occasional drink! The results were high: 30% of grade 12 students reported heavy use of beer; 20% reported heavy use of liquor; 10% of the grade 9 students reported heavy use of beer; 7.5% reported heavy liquor use. It may be argued that drinking once a week is hardly considered heavy use but keep in mind that young people generally drink to get a ‘buzz’. Each drinking episode is more than just one bottle or can of the foaming liquid.

Hindmarsh (1993:24) also affirms that it takes between 7 and 15 years for an adult male to become an alcoholic and between 5 and 12 years for an adult female. Teenagers can become alcoholics in a period of between 2 and 5 years and some teenagers have become alcoholics in just a few months (Hindmarsh 1993:24).

Appendix 7.6

A 1989 national survey in South Africa among historically advantaged pupils in Grades 10 and 12 found a male:female ratio of 64:45 among pupils who drank at the time of the survey (Department of Education and Culture 1990:42). The male:female ratio in a 1990 survey among pupils in government high schools (Grades 8 to 12) in the Cape Peninsula was on average 32:23 among those who admitted that they had used alcohol in the 7 days preceding the survey (Fisher et al 1993:481).

Appendix 7.7

In South Africa, for the lower age/educational group, namely high school pupils, the 1990 (Fisher et al 1993) and the 1989 (Department of Education and Culture 1990) surveys suggested a lifetime preference for cannabis below 10% (between 4% and 8%), which suggests that the use of cannabis was related positively to age. The 1990
survey (Fisher et al. 1993) also found that the use of cannabis was more common among historically disadvantaged youngsters than among advantaged youngsters. The 1994 national survey (Rocha-Silva et al. 1996:50) among historically disadvantaged youngsters found a lifetime preference of 4% for cannabis use.

Appendix 7.8

Fisher et al. (1993), the Department of Education and Culture (1990), and Rocha-Silva et al. (1996) found that solvent use in South Africa was between 5% and 10%. Agents concerned with the prevention of drug-related problems have also pointed out that the use of solvents was most common among homeless children living on the street. The review further suggested that the use of drugs in the tranquillo-sedative group, stimulants such as amphetamines and, to a lesser extent, LSD, were also fairly prevalent among South African youngsters. In a 1981 study (Van der Burgh 1984:14), 4% admitted to the use of barbiturates/sedatives, 3% to the use of stimulants (amphetamines), 2% to the use of LSD and 1% to the use of heroin and/or opium and/or pethidine. In the 1985 survey (Du Toit 1991:139-140), between 2% and 8% (particularly youngsters from an historically advantaged background) used stimulants (amphetamines) and between 1% and 2% used LSD at the time of the study. The 1989 survey (Department of Education and Culture 1990:43-46) found that 2% had used barbiturates/sedatives at some time in their life. Common injection drugs were pain relievers, like opium, pethidine and particularly wellconal and, to a lesser extent, cocaine and heroin (Rocha-Silva 1998:18).

Appendix 7.9 Overview on different kinds of drugs

In the book Drugs. What your kid should know? Hindmarsh (1993) gives detailed information on each drug, what it is, how it is used, its distribution in the body and the negative effects on the body.

The most available drug is cannabis / marijuana / dagga. Many teenagers had tried this drug. It has other names like pot, joint or cigarette. Marijuana, hash and hash oil are all derived from the Cannabis plant. On smoking a marijuana joint, chemical reactions take place. There are an estimated total of 2000 compounds, the most important of which is THC (tetrahydrocannabinol). Marijuana is most often smoked as a joint (cigarette). The joint contains ground-up plant material, leaves and seeds. Hash is also smoked using a pipe or a bong. Hash oil can be injected, but the method poses serious health risks. Therefore hash oil may be added to cigarettes or joints. The effects on cell function are that the THC damages the nervous system cells irreversibly and the cell can actually die or turn into a potential cancer cell. Marijuana impairs the functioning of the 'T-cells' and the 'B-cells', which are important for normal functioning of the immune system. Marijuana causes an increased heart rate. Furthermore, the bronchial injury caused by just four joints per week is reported to be equivalent to smoking sixteen tobacco cigarettes per day. Marijuana constituents accumulate in a communication junction between nerve cells, which slows down the flow of information. This effect appears to be permanent.

Cocaine has been described as the 'King and Queen' of all drugs and it is one of the most addictive drugs, literally taking over a person's life. Cocaine as a street drug is
referred to as 'coke', 'snow', 'C', 'lady', 'gold', 'girl toot', 'nose candy', 'white girl' or 'white lady'. Cocaine is an alkaloid obtained from the leaves of plants such as *Erythroxylum coca*. Cocaine is used in a number of ways. The drug is often sniffed or inhaled through the mucous membranes of the nose. The cocaine high occurs within one minute when the drug is taken in this manner. Cocaine may also be injected. Disposable syringes are used for injection of the drug, often using toilet bowl water as a solvent, because abusers have to 'do' drugs privately in order to avoid being caught. Free-basing cocaine involves the inhalation of cocaine vapours. The health effects of cocaine abuse are numerous. The effects on the brain include the relaying of false information (making a person feel he/she is not hungry, tired, etc), chemical balance upsets, decreased dopamine levels, leading to parkinsonism-like effects, depression, hallucinations, paranoia and a feeling of foreign bodies (worm-like) crawling under the skin. The effects to the nose are constriction of the blood vessels, inadequate nourishment of the tissues, ulcer formation and eventual perforation of the nasal septum. The effects on the heart are more severe. There is an increased heartbeat, chest pains can develop, possible heart attack, arrhythmias (changes in heart rate), strokes, elevation in blood pressure and also sudden death. Problems that can be associated with unhygienic injections are AIDS, Hepatitis, skin infections, inflammation of the heart, damage to blood vessels and organs and weight loss.

*LSD* (Lysergic acid diethylamide) belongs to a group of drugs classified as psychedelics. As a street drug, LSD has been referred to as 'Acid', 'John Lennon', 'Northern Lights', 'Blotter', 'Windowpane', 'White Lightning', 'Twenty-five', 'Squirrels', 'Purple Barrels', etc. LSD is related to a group of compounds known as ergot alkaloids which are isolated from a fungus growth on the plant *Claviceps purpurea*. After LSD is synthesized, it is usually available in the form of a clear, colourless liquid. This liquid is then added to capsules, tablets, powder, other solutions such as coffee, paper (blotter acid, stamps), medications such as aspirin (blue dots) or to gelatin squares (windowpanes). The health effects of LSD abuse are impaired memory, problems with thought processes and mood alterations. Alterations in distance perception, distortions in time perception, dreamlike states and judgement errors also occur. Furthermore, there are dilated pupils, changes in vision regarding shapes, colour and blurred vision, hearing alterations and dizziness, nausea and vomiting. There is also some stimulation of the nervous system and muscle tremors and twitching. Anxiety, tension, panic reactions, fears of going insane, detachment from reality and flashback symptoms are common.

**Designer Drugs** are substances intended for recreational use and are derivatives of approved drugs. The drugs represent the most recent development in the evolution of mind-altering chemicals. They are marketed under exotic names such as Eve or Ecstasy. These drugs are related to amphetamines, fentanyl and meperidine. Designer drugs result in difficulty in speaking, drooling, nerve cell destruction, parkinsonism, a stooped, shuffling gait, muscular rigidity and death. Designer drugs are chemically related to narcotics.

**Heroin and other narcotics** are obtained from a latex-like substance derived from the opium poppy, *Papaver somniferum*. Heroin is a derivative of morphine prepared in a laboratory by reacting the plant chemicals with other chemicals. A narcotic is defined as a drug that in small doses dulls the senses, relieves pain and induces profound sleep, but in excessive doses causes stupor, coma or convulsions. Heroin usage usually begins after other drugs have been tried. Users generally start by
smoking, drinking and using marijuana and psychedelics. Heroin is almost always administered by intravenous injection so that its effects begin almost immediately, with an orgasmic-like rush, followed by euphoria and a feeling of tranquility. Low dosages cause stimulation of the brain, while high dosages depress the function of the brain. Other effects are a constriction of the pupils, nausea and vomiting, a decreased heart rate, and thus a decrease in blood circulation, the possibility of a heart attack, a decrease in body temperature and depression of respiration. Furthermore, it could lead to hepatitis, particularly from dirty needles, convulsions, cold clammy skin, a decreased urine output, poor health that could lead to infections, pneumonia, tuberculosis and constipation.

These are the favourite drugs of teenagers. Although they give these drugs different names, these drugs are the more available and usable ones. Other drugs used, according to Hindmarsh (1993) are:

- PCP – Phencyclidine or ‘an angel in black wings’ (a dangerous drug; in fact, one of the most dangerous drugs ever to be sold on the streets);
- other psychedelics such as ‘Magic Mushrooms’, ‘Mescaline’ or ‘Peyote’;
- amphetamines such as ‘Speed’, ‘ICE’ and ‘CRACK’;
- quaalude (described as a ‘love drug’, known in the trade as ‘Mandrax’); and
- Steroids (used in sport to increase muscle strength, mass and definition).

Appendix 7.10

Alternative services listed by Moss and Butterworth (1999a:16,17):

[The] Assisting Drug users INC is a drop-in Centre in Canberra. They have tried to find ways to create a sense of community around the services they offer...There are meeting groups and counselling... Resuscitation courses...At Christmas time the regulars of the service made safe-using Christmas packs for their friends with clean gear – spoons, swabs, fits, water, etc., and groovy packets to carry them in. [The] NSW Users and Aids Association – the TRIBES project is run by users, ex-users, friends and those active in the drug user movement in Sydney. It is organised into the following areas - education, community resources, information/library, and a needle exchange...Perhaps the most significant reason that the TRIBES program is fantastic in that it gets information out to groups of young people who would otherwise not be accessing information from drug and alcohol services...RaveSafe is a service that takes the information to where the young people are. It is an organisation who goes to various raves and techno parties to provide first aid and safe-using information.

Appendix 7.11

The Act against violence against women (1998) gives the following description of emotional abuse:

Criticism and verbal abuse are name calling, mocking, accusing, blaming, yelling, swearing, making humiliating remarks or gestures. Pressure tactics
are rushing you to make decisions through ‘guilt-tripping’ and other forms of intimidation, sulking, manipulating the children, telling you what to do. Abusing power is always claiming to be right (insisting statements are ‘the truth’), telling you what to do, making big decisions without you. Denying and blaming are making fun of your behaviour, not taking your concerns seriously, saying the abuse didn’t happen, shifting responsibility for abusive behaviour by saying you caused it. Disrespect is interrupting, changing topics, not listening or responding, twisting your words, putting you down in front of other people, saying bad things about your friends and family.

Appendix 7.12

The Act against violence against women (1998) describes physical abuse as destruction, intimidation, sexual violence, physical violence and the use of weapons.

Destruction is destroying your possessions, punching walls, throwing and/or breaking things. Intimidation is making angry or threatening gestures, use of physical size to intimidate, standing in the doorway during arguments, driving recklessly. Physical violence is being violent to you, your children, household pets or others, slapping, punching, grabbing, kicking, choking, pushing, biting, burning, stabbing and shooting. Using weapons to frighten you, threatening you or attempting to kill you or those you love.

Appendix 7.13

Thorpe (1996:112) writes the following about women and their children:

In relation to sexual abuse, for example, a mother is portrayed as sometimes actually causing a male partner to turn to a child for sexual gratification through being ‘unwifely’ (that is, not satisfying his so-called conjugal ‘rights’) or being not readily available on account of ill health, exhaustion or competing demands on her time, including employment, community care responsibilities, or more rarely, leisure pursuits for self-fulfilment (seemingly, in the literature, an unacceptable indulgence for a wife and mother).

Thorpe (1996:117) adds:

In an important Australian study of the effect of domestic violence on children, Blanchard found that mothers are the most important source of help for a child disturbed by domestic violence but are themselves in tremendous need of support, since frequently they are unable to provide the necessary help because of their own depressed state of physical and psychological health as a result of the violence.
Appendix 7.14

South African statistics obtained from the Crime Information Analyses Centre, with regard to assault with the intent to inflict grievous bodily harm are as follows:

- in 1996: 214 318 adults and 16 107 children;
- in 1997: 219 517 adults and 15 037 children;
- in 1998: 219 570 adults and 14 486 children;
- and from January to June 1999: 110 914 adults and 7 124 children were the victims of this kind of assault.

Common assault cases were as follows:

- in 1996: 187 962 adults and 17 371 children;
- in 1997: 184 554 adults and 17 309 children;
- in 1998: 182 572 adults and 16 741 children;
- and from January to June 1999: 96 515 adults and 8713 children were victimised.

The figures on indecent assault and incest are lower and can be described as follows:

- in 1996: 1 997 adults and 3 504 children;
- in 1997: 1 986 adults and 3 322 children;
- in 1998: 1 857 adults and 3 173 children;
- and from January to June 1999: 1 017 adults and 1 900 children were victimised.

Rape and attempted rape figures are shocking and can be described as follows:

- in 1996: 30 555 adults and 19 926 children;
- in 1997: 30 709 adults and 21 450 children;
- in 1998: 29 399 adults and 19 881 children;
- and from January to June 1999: 14 327 adults and 9 692 children were rape or experience an attempted rape.