

The Development of Psychotherapeutic Interventions for Female Rape Trauma Clients:

An African Perspective

by

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DECLARATION

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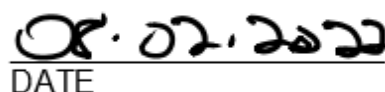
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I further declare that I submitted the thesis to originality checking software and that it falls within the accepted requirements for originality.

I further declare that I have not previously submitted this work, or part of it, for examination at UNISA for another qualification or at any other higher education institution.

I declare that, in terms of study ethics, I have sought informed consent from research respondents, and I have respected their confidentiality and anonymity. Respondents have participated voluntarily in this study and I have avoided any potential harm to them. Respondents have been ensured that this study is independent and impartial. This study was conducted in accordance with the ethical principles as stipulated by the University of South Africa (UNISA).


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ABSTRACT

Rape is a physical, emotional and spiritual violation of an individual by another. This study focuses particularly on the rape of African females within the South African context. In the African perspective, the rape abuse that is inflicted on African female survivors is not limited to their physical being, but rather transcends to other multiple dimensions of their being; including the spiritual, emotional, cultural and social levels of their beingness. The violation extends to their past and current relations, as well as on their future ancestral lineages. Many African female rape survivors undergo Western-based post-rape therapeutic interventions. However, there is a high pervasive morbidity rate of 'unhealed' human dimensions that are beyond the scope and competence of Western psychology and medical interventions. This study aims to develop Afrocentric treatment modalities to provide culturally and spiritually effective interventions for African female survivors of rape in South Africa. A qualitative approach was adopted, and Kovach's (2010) conversational method was used to source knowledge and experiences of *Bakoma*, *Baporofeta* and *Mahlatsipa*.

The results of this study indicated that: Firstly, there was a lack of an appropriate African conceived methodology for this culturally and spiritually orientated research. The researcher conceptualised and adopted the People's Involvement Research (PIR) methodology, which is consistent with the African epistemology, to facilitate access to custodians of spiritually and culturally classified knowledge. Secondly, it was found that repeated rape can be prevented through wholistic cultural rituals that are conducted by *Bakoma* and *Baporofeta* to treat African female rape survivors. Thirdly, the recidivism rate of rapists could be significantly reduced through the collaboration between healthcare workers such as psychologists and rehabilitation centers on one hand, and *Bakoma* on the other. Lastly, the conceptualization and discovery of the *Phekolo: Mahlatsipa a Peto* Model, was found to be effective in facilitating a transition into spiritual healing for 'untreated' spiritual dimension in African female rape survivors.

This study recommends that Indigenous Knowledge Systems (IKS) be incorporated into the psychology training curricula in institutions of higher learning. The training should include exposure for psychology students in healing contexts where *Bakoma* and *Baporofeta* work with *Mahlatsipa* to create awareness and sensitivity on various alternative indigenous treatment modalities.

KEY TERMS

Rape trauma, African perspective, Cultural intervention, *Mahlatsipa a peto* (rape victims/survivors), *Ubuntu*, People Involvement Research (PIR)

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DEDICATION

This thesis is dedicated to two sets of special people in my life; my late parents, Nosizo and Mphanama Makhale, as well as my husband, Themba and our four children, Sizo, Nosizo, Nikelani and Lunga.

TABLE OF CONTENTS

| | |
|--|-----|
| DECLARATION | ii |
| ABSTRACT | iii |
| KEY TERMS | iv |
| ACKNOWLEDGEMENTS | v |
| DEDICATION | vi |
| LIST OF ANNEXURES | xi |
| LIST OF ABBREVIATIONS | xi |
| LIST OF FIGURES | xii |
| LIST OF TABLES | xii |
| Chapter 1 | 1 |
| Introduction | 1 |
| 1.1 Background of the Study | 1 |
| 1.1.1 Current rape and sexual crimes in South Africa | 2 |
| 1.2 Problem Statement | 6 |
| 1.3 Aim of the Study | 7 |
| 1.4 Objectives of the study | 7 |
| 1.5 Research Questions | 8 |
| 1.6. Definitions of Key Concepts | 8 |
| 1.6.1. Rape Trauma | 8 |
| 1.6.2. Psychotherapeutic Intervention | 9 |
| 1.6.3 African Perspective | 9 |
| 1.6.4 Ubuntu | 9 |
| 1.6.5 People Involvement Research (PIR) | 9 |
| 1.6.6 'Phekolo: Mahlatsipa a Peto' (Healing: Rape Survivors) Model | 10 |
| 1.7 Significance and Contribution of the Study | 10 |
| 1.8 The Structure of the Study | 10 |
| 1.9 Conclusion | 11 |
| Chapter 2 | 13 |
| An Exploration of Concepts and Theories on Rape | 13 |
| 2.1 Introduction | 14 |
| 2.2 Rape Defined | 14 |
| 2.3 The History of Rape | 17 |
| 2.3.1 Post Biblical Period – Modern Era | 19 |
| 2.3.2 Social History of Rape | 19 |
| 2.3.3 Dimensions of Rape Defined in a South African Context | 21 |
| 2.3.4 Rape as a Socially Constructed Reality | 23 |
| 2.3.5 The South African Rape Narrative | 26 |

| | |
|---|-----|
| 2.4 History of Rape Myths | 29 |
| 2.5 The Nature of the Rapist | 33 |
| 2.5.1 Types of Rapists | 35 |
| 2.6 Traditional Western Theories of Rape | 36 |
| 2.6.1 Freudian Theory | 36 |
| 2.6.2 Post-Freudianism | 39 |
| 2.6.3 The Feminist and Womanist Perspectives | 40 |
| 2.7 Summary | 48 |
| Chapter 3..... | 49 |
| The African Worldview and Theoretical Framework..... | 49 |
| 3.0. Introduction..... | 49 |
| 3.1. Historical Background | 50 |
| 3.2. African Philosophical Worldview..... | 52 |
| 3.2.1 African Epistemology..... | 54 |
| 3.2.2. The African Ontology..... | 58 |
| 3.2.3. African Axiology | 61 |
| 3.2.4. African Cosmology | 64 |
| 3.3. Womanism from an African Perspective | 67 |
| 3.4. Espousing an African Psychology | 71 |
| 3.4.1. The Relevance of African Languages | 74 |
| 3.5 Summary | 75 |
| Chapter 4..... | 77 |
| Methodology Using an African-Centered Approach..... | 77 |
| 4.1 Introduction..... | 77 |
| 4.2 Research Design | 77 |
| 4.3 African-Centered Research Philosophy | 79 |
| 4.4 The African Indigenous Knowledge and Research Methodologies | 81 |
| 4.5 Afrocentric Research and Design..... | 83 |
| 4.6 The <i>Ubuntu</i> Philosophy in African Research..... | 83 |
| 4.7. People’s Involvement Research (PIR) Methodology..... | 85 |
| 4.7.1 Principles of PIR..... | 87 |
| 4.7.2 People’s Involvement Research (PIR) - Practice Principles | 90 |
| 4.8 Integrated Research Design | 107 |
| 4.8.1 Aim | 108 |
| 4.8.2 Setting | 109 |
| 4.8.3 Participants..... | 110 |
| 4.8.4 Sampling | 111 |
| 4.9 Data Management of Indigenous Knowledge..... | 112 |
| 4.9.1 Process: Data Management of Indigenous Knowledge..... | 114 |

| | |
|--|-----|
| 4.10 Step-by-Step Data Management of Indigenous Knowledge | 116 |
| 4.11 Data Collection | 118 |
| 4.11.1 Sources of Indigenous Knowledge | 122 |
| 4.11.2 Pokello ea mohloli (Data Collection Process)..... | 123 |
| 4.11.3 Lipuisano (Research Conversations)..... | 124 |
| 4.11.4 Mohloli oa pokello le mekhoha (Data Collection Tools and Practices) | 125 |
| 4.12 Ho fetolela mohloli mokhoeng oa ho ngola (Data Transcription Process)..... | 126 |
| 4.12.1 Qhaqhollo ea mohloli (Data Analysis) | 127 |
| 4.12.2 Further thoughts on Content Analysis regarding this study..... | 128 |
| 4.13 Trustworthiness and Rigour | 129 |
| 4.14 Ethical Considerations..... | 133 |
| 4.15 Summary | 134 |
| Chapter 5..... | 135 |
| Presentation and Description of Research Findings | 135 |
| 5.1 Introduction..... | 135 |
| 5.2 Themes: Rape Survivors..... | 135 |
| 5.2.1 <i>Ho tlontlolloa le ho theosoa seriti</i> (humiliation and stripping of human dignity)..... | 136 |
| 5.2.2 <i>Ho tlosa sesila 'meleng</i> (washing off the filth from the body)..... | 136 |
| 5.2.3 <i>Ho ipona molato</i> (Self-blame)..... | 138 |
| 5.2.4. <i>Motlamuoa</i> (Hostage)..... | 139 |
| 5.2.5 Survivor Theme 4: <i>Matsoao a bakoang ke peto</i> (Rape Trauma Symptoms)..... | 141 |
| 5.3 Themes- <i>Bakoma</i> and <i>Baporofeta</i> | 145 |
| 5.3.1 Theme 1: <i>Bohalaleli ba tsebo ea semoea</i> (Sanctity of Spiritual Knowledge)..... | 145 |
| 5.3.2: Theme 2: <i>Molomo oa balimo</i> (Spiritual Conduits) | 148 |
| 5.3.3 Theme 3: <i>Kalafo e akaretsang</i> (Integrated Wholistic care practice) | 149 |
| 5.3.4 Theme 4: <i>Peto</i> (Rape)..... | 156 |
| 5.3.5 Theme 5: <i>Thibelo ya Bokweta</i> (Prevention of Rape)..... | 159 |
| 5.3.6 Theme 6: <i>Mekhoa ea Kalafo</i> (Treatment Methods)..... | 162 |
| 5.4 Summary..... | 164 |
| Chapter 6..... | 165 |
| Discussion | 165 |
| 6.1 Introduction..... | 165 |
| 6.2 Dimensions of an African Person | 166 |
| 6.2.1 Taxonomy of a limited scope in conventional rape interventions..... | 168 |
| 6.3 Bio-psychosocial-cultural-spiritual Model of African Healing | 173 |
| 6.4 'Phekolo: Mahlatsipa a Peto' Model..... | 175 |
| 6.4.1 Vulnerability to Re-victimisation..... | 179 |
| 6.4.2 Spiritual Prevention from Re-victimisation | 181 |
| 6.5 Reflections | 183 |

| | |
|---|-----|
| 6.6 Implications | 185 |
| 6.6.1 The overlap between Western and African interventions in post-rape service provision | 185 |
| 6.6.2 Implications for African traditional and spiritual healers' regulations | 186 |
| 6.6.3 Adaption & Application of <i>Phekolo: Mahlatsipa a Peto</i> Model in other healing contexts | 188 |
| 6.6.4 Implications on methodology | 189 |
| 6.6.5 Level of Practice..... | 190 |
| 6.6.6 Policy..... | 190 |
| 6.6.7 Training | 190 |
| 6.7 Limitations of the Study | 191 |
| 6.8 Recommendations | 192 |
| 6.9 Summary..... | 194 |
| Reference List | 196 |
| ANNEXURES | 236 |
| ANNEXURE A: Conversational guide for <i>Puisano</i> (dialogue) with Traditional Healers..... | 236 |
| ANNEXURE B: Conversational guide for <i>Seboka</i> (Survivor group) | 238 |
| ANNEXURE C: Participant Consent Form..... | 239 |
| ANNEXURE D: Turn-It-In Report..... | 241 |

LIST OF ANNEXURES

Annexure A: Conversational guide for *Puisano* (Dialogue) with Traditional healer

Annexure B: Conversational guide for Seboka (Survivor group)

Annexure C: Participant Consent Form

Annexure D: Turn-It-In Report

LIST OF ABBREVIATIONS

| | | |
|--------|---|---|
| ATM | - | African Traditional Medicine |
| ADAPT | - | Agisanang Domestic Abuse Prevention and Training |
| APA | - | American Psychology Association |
| BCE | - | Before the Common Era |
| CBT | - | Cognitive Behavioural Therapy |
| CPD | - | Continued Professional Development |
| IPADTR | - | Intimation, Probe, Analyze, Diagnose, Treat and Refer |
| IKS | - | Indigenous Knowledge Systems |
| NGO | - | Non-Governmental Organisation |
| OCD | - | Obsessive-Compulsive Disorder |
| PAR | - | Participatory Action Research |
| PIR | - | People's Involvement Research |
| POWA | - | People Opposing Women Abuse |
| SAPS | - | South African Police Services |
| THO | - | (South African) Traditional Healers Organisation |
| THP | - | Traditional Health Practices |
| UNODC | - | United States Office on Drugs and Crime |
| UN | - | United Nations |
| WHO | - | World Health Organisation |
| WMA | - | World Medical Association |

LIST OF FIGURES

Figure 2.1: Leda and the Swan – Da Vinci

Figure 2.2: Leda and the Swan- Michelangelo

Figure 4.1: *Ukucelisa/Ho kopisa le ho khantshetsa* (Revering and acknowledging ancestors)

Figure 4.2: *Moaparo oa Bakoma* (b) *Ho hlompha meetlo*

Figure 4.3: *Ho khantshetsa* (a gift token, prayer and sprinkling of snuff)

Figure 4.4: *Engoe ea kobo tsa baporofeta* (Spiritual healer's consultation dress code)

Figure 4.5: Map of Alexandra and Soweto

Figure 6.1: Major psychology treatment options used for victims of rape

Figure 6.2: *Phekolo: Mahlatsipa a Peto* Model and Treatment Process

LIST OF TABLES

Table 2.1: South African Rape Rates: 2008/2009 to 2018/2019 (Reported to SAPS)

Table 2.2: Typology of Rapists

Table 6.1: African Human dimensions treated by Western therapies

Chapter 1

Introduction

1.1 Background of the Study

Women throughout the world are unduly exposed to a disproportionate risk of violence and other forms of human rights violations due specifically to their gender (UN, 2019; UNFPA, 2017; WHO, 2017). Historically, Western colonisers established a human classificatory grid wherein the white female ranked slightly higher than Africans, who were regarded as subjects that were available to white male oppression (Osha, 2006). Hayes (1996) supports this fact by reiterating Frantz Fanon who perceived colonisation as organised systematic brutality, violence and racism that targeted Africans. This, it would seem, was the conceptualisation and formalisation of African oppression in which African women fared worse at the bottom of the order. Colonial violence in general and more specially, gender-based violence against African women in South Africa was reinforced by Apartheid and its tenet of structural patriarchy that some African men also adopted (Maitse, 1998; Oparinde, & Matsha, 2021).

The United Nations (UN) (1993) defines the targeted abuse of women globally as “any act of Gender Based Violence (GBV) that results in, or is likely to result in, physical, sexual, mental harm or suffering to women, including threats of such acts as coercion or arbitrary deprivation of liberty, whether occurring in public or in private life” (Nations, 1993, p.3). Influential multilateral institutions such as the World Health Organisation (WHO), World Bank, UN and others which represent most countries recognise and regard GBV as a common and shared global pandemic that affects 1 in 3 or 35% of women and girls throughout the course of their lifetime (The World Bank, 2019; UN, 2019; WHO, 2017). Although GBV takes many different forms in various countries, certain abuses seem to be common globally.

Plan International (2019) observed that women in most countries tend to experience similar gender-based abuses which include sexual assault, rape, emotional or

psychological torture, grievous bodily harm, harassment, exploitation and deprivation. However, the risks, nature and impact of GBV appear to be varied and they reflect historical backgrounds, political dispensations, socio-economic and cultural values of individual societies (Rico, 1997). It is arguable whether the degree of GBV is greater in some countries than others. In addition to common adverse experiences that women face in all countries, the nature of further GBV in individual societies is shaped by the unique prevailing context on which gender relations are premised (SADC, 2018). GBV is likely to thrive in societies where archaic concepts of gender stereotypes are entrenched or socio-political instability has prevailed overtime (El Feki, et al, 2017).

In Sub-Saharan Africa (SSA) most countries have a history of violent revolutions against colonial powers which have adversely dislocated and impacted their cultural institutions, socioeconomic status and compromised their education levels, resulting in more prominent GBV levels (Abrahams et al., 2006).

1.1.1 Current rape and sexual crimes in South Africa

The levels of rape and sexual crimes in the South Africa are currently unacceptably high and unremitting. The South African Police Service (SAPS) reports depict a bleak image of the rape scourge and sexual crimes in South Africa. It is worth noting that the SAPS integrates rape within the definition of sexual offences which also include sexual assault, attempted sexual offence and contact sexual offences (SAPS Crime Statistics, 2020). General sexual offences increased from 52 420 in 2018/19 to 53 293 in 2019/20, accounting for 873 additional cases or an increase rate of 1,7%. More specifically, there were 41 583 rapes in 2018/19 and cases increased to 42 289 in 2019/20, an increase of 706 rapes or 1,7% rise within a year. This is a South African problem that the local and international media refers to as 'the second pandemic' (Capelle, 2020; Ellis, 2020). Indeed, rape and other sexual crimes have an adverse impact on the nation, communities, families and more so on survivors.

The high prevalence of rape in South Africa has precipitated a high morbidity rate of unmet multi-dimensional healing needs in African rape survivors that remain undiagnosed and untreated. The inference is that there is an intervention gap that needs to be explored.

Therefore, the assumption of this study is that many other anti-rape and post-rape interventions have failed to identify the unmet multi-dimensional needs, particularly the spiritual healing needs of African rape survivors. Therefore, it is the hypothesis of this study that, in order to curb the current scourge of unmet deep-seated morbidity in African survivors, indigenous knowledge, methodology and therapeutic interventions need to be investigated and applied.

Opportunely, this current study was underpinned by a groundswell of studies by African theorists and researchers who have observed the inadequacy of Western paradigms and highlighted a need for Afrocentric psychological and culturally appropriate diagnoses and treatment modalities (Baloyi, 2020; Cakata, 2020; Gobodo, 1990; Mkhize, 2004; Nobles, 1996; Nwoye, 2015; Simango & Segalo, 2020; Wilson, 2020). Essentially, the Afrocentric therapeutic methodology that this current study is exploring aims to go beyond the perceptible needs of African rape survivors. Its intention is to diagnose, access and wholistically heal spiritual co-occurring, higher level needs that are embedded in the spiritual and intergenerational dimensions that are concurrently “raped” with the physical and psychological African personhood when African women are raped.

Therefore, this study sought to investigate the psychotherapeutic interventions applied by psychologists when dealing with rape survivors. Experience as well as literature, show that psychology taught at South African Universities, is based on Western theories and has not culturally suited to African rape survivors. This is despite the advent of democracy in 1994 which many thought would recognise and affirm African worldviews and cultural practices (Baloyi, 2016, Baloyi, 2020, Makhubela, 2016; Nwoye, 2015). Despite prevalent anecdotal evidence, which indicate that African female rape survivors have sought supplementary therapy from African traditional healers and spiritual healers, not enough research has been done to fill this knowledge gap. Therefore, the challenge is to create an understanding of how culturally and spiritually relevant practices that seek the voices of *bakoma* (traditional healers) and *baporofeta* (spiritual healers) can be explored and harnessed to provide culturally appropriate interventions against rape. The new political dispensation in South Africa has taken progressive legislative steps to recognise and respect African healing philosophies, modalities and practices (Moagi, 2009).

Due to the influence of the Eurocentric worldview, most South Africans, especially Africans, no longer have a purely Afrocentric worldview (Thabede, 2008). The argument is that some elements within the African value systems may have been severely eroded. The Western philosophical paradigm has gradually crept into many facets of African life, including in religion, education, health, and it appears that Africans have assimilated into Western lifestyles (Wiredu, 1998). Although some aspects of the African cultural value system are, to an extent, demolished, these elements are however not totally extinct, for example an African ritual such as *ukuhlambulula*, (cleansing) is still practiced in many African communities (Nyawuza, 2015). The African cultural value system is deeply and innately embedded in the African persona. Akbar (2005) refers to this as African Personality, which according to Asante (1999), is a human being's personal consciousness and that of their ancestors whose lived experiences and life struggles, were never left behind, but most often have a deep impact on their thinking and behaviour.

To combat internalization of the Eurocentric thought and practice, Asante advocates for centeredness and agency as two central categories of the Afrocentric idea. Agency entails the African's self-conscious action, while centeredness highlights the African self-assertiveness, which demands their long denied human dignity (Encyclopaedia of Black Studies, 2012).

Akbar (2005) has defined this personality as having a cosmogenetic origin. Essentially this means cosmogenetic origin is spiritual in nature. Akbar goes further to argue that human personality is better understood within the communal context in which it evolves, as opposed to the individual context, which the Eurocentric worldview subscribes to. In support of this view, Ramose (2005), locates the 'being' within the concept of *Ubuntu*. It means that the identity of the African character is derived and based in *Ubuntu* in all its expression.

Ramose (1999) suggests that the African "being" that is deeply embedded in *Ubuntu*, is the basis of the African epistemology. This indeed, agrees with what Senghor had delineated from the totality of the prototype that he referred to as Negritude (Valliant,

1990). Negritude refers to a primary concern with African identity and ontology (Sage, 2004). Based on this assertion, it is therefore understandable that Eurocentric modalities of treatment of human behaviour and coping with violence such as Rape trauma can never be fully relevant to a society whose reality is that of orchestrated dispossession, deprivation, poverty, exploitation and violence.

Baloyi and Ramose (2016) and Okere (2005a) state that Africans have their different cultural rights, unique ways of being, knowing and doing things that were shaped by their contextual knowledge and reality. Akbar (2005) supports this view by stating that, inquiry into the behavioural, mental and spiritual life of Africans should be based on their cultural reality and perspective. Based on this assertion, it is hypothesised that African rape trauma survivors would also interpret and discern the meaning of rape from a particular reality which is premised on an African epistemological paradigm, which is influenced by their historical and cultural context.

The argument advanced in this study is that, the healing modalities of rape survivors should be culture and context specific. Indigenous epistemologies, the African paradigm included, embody both the physical and the metaphysical ontologies. Treatment modalities of African rape survivors would therefore have to locate spirituality as the basis of the being of an African personhood, and they must be rooted in African knowledge systems. It was on this basis that this study sought to research culturally appropriate therapeutic modalities to benefit African rape survivors who consult psychologists in the private and public health care facilities. According to Oshodi (1999), African based modalities have existed for centuries, long before the custom of psychotherapeutic medicine became known to the ancient Euro-American psychotherapy practices. Oshodi (1999) states that, first among ancient psychotherapeutic healers and physicians was Imhotep from Egypt. Long before Western therapies were established, Imhotep practiced healing before Hippocrates, who is regarded by the Euro-Western worlds as the father of modern medicine.

1.2 Problem Statement

The legacy of state-sponsored political violence in South Africa forms the basis of the current prevailing rape culture (Jewkes & Abrahams, 2002). The Department of Education (2001) concurs with this study's claim by stating that the past political violence in South Africa has had an adverse consequence of reinforcing irrational aggressive manhood resulting in the current rape culture. It is crucial to note that according to the World Health Organization (WHO)'s report on violence and health globally, there is an indication that sexual violence is one of the most widespread crimes across many nations (WHO, 2002). South Africa's GBV prevalence rate is comparatively high, for a country that is not at war (Moffet, 2006). In most instances, such high GBV rates are often associated with war situations. Current rape statistics support preceding claims. For instance, the Minister of Police released statistics which showed that 10 006 women were raped in the months between April and June of 2021, which accounts for a 72.4% increase, compared to a previous reporting cycle (South African Police Service, 2021). This is the phenomenon, which Vogelmann (1990b) alludes to as the 'War Culture' that dominates contemporary South Africa. A 2020 Tears NGO report indicates that 66, 7% of women who were raped were African as compared to 19.5% of Coloured women, 11.4% who were White and 2.3% were Indian women. This is clear evidence that African women bear the brunt of rape in South Africa and as an ethnic population group. Their unique post rape spiritual healing needs have not been catered for.

The challenge with Western conceived psychotherapies is that they assume all rape survivors are responsive to generic therapies that treat only the mind and body. However, literature shows that culture and spirituality are crucial determining factors in the achievement of wholistic therapeutic healing in psychological interventions (Makhubela, 2016; Moleiro, 2018; Yeh et al, 2004). The thesis posited in this study is that African rape survivors continue to live with unmet spiritual healing needs even after attending Western-based psychological interventions.

In the researcher's clinical experience, most African rape survivors tend to be pre-occupied with the habit of 'cleansing', even after undergoing professional trauma counselling as well as desensitisation process. Most African rape survivors that have interacted with the researcher in clinical context, seek tangible treatment modalities that can help them feel completely restored from the stigma with which rape is often associated. Psychological practices must, therefore, be based on forms of knowledge that arise out of the social and cultural realities of the people concerned and should not be imposed from outside. Mkhize (2004), states that, according to the World Health Organization (WHO), about 80% to 90% of people in developing societies rely on traditional healers for healthcare. In this regard, Utas (2009) argues that in African rape survivors tend to augment their health-seeking needs with those of traditional and spiritual healers.

1.3 Aim of the Study

The main aim of the current study is to develop a psychotherapeutic intervention that is appropriate and relevant for female rape survivors, through the Afrocentric lens. A secondary aim is to design a methodology that is best suited for collecting and analysing indigenous African spiritual knowledge consistent with the principles and practices of the ontology of the spiritual world and beliefs.

1.4 Objectives of the study

The following are objectives of the study:

- 1.4.1 To sensitise the psychology profession and therapists
by creating awareness about other multiple human dimensions that African rape survivors require.
- 1.4.2 To equip non-spiritual therapists with African cultural competency and spiritual acumen to diagnose and discern unmet spiritual needs of rape survivors.
- 1.4.3 To design a new stepwise approach in therapy to facilitate a spiritual healing process for rape survivors.

1.4.4 To develop a set of fundamental Afrocentric principles of collecting data from custodians of indigenous African knowledge bearers.

1.4.5 To create a framework of essential culturally relevant protocol and etiquette that is recommended in co-creating indigenous African spiritual knowledge.

1.5 Research Questions

1.5.1 What is required to create awareness and sensitise the South African psychology profession about the human character dimensions of African rape survivors?

1.5.2 What skills and competencies do psychologists need to work effectively with unmet healing/treatment needs of African female rape survivors?

1.5.3 How can psychologists address African female rape survivors' spiritual healing needs beyond their scope of competency?

1.5.4 What are the fundamental African principles of data collection employed by bearers of African knowledge in knowledge production?

1.5.5 What is the process of creating culturally relevant protocols when conducting spiritually oriented research in indigenous contexts and African spiritual knowledge in the research process?

1.6. Definitions of Key Concepts

This section defines several concepts that were used throughout this study. Each concept was discussed in much greater detail in later chapters.

1.6.1. Rape Trauma

The term, Rape Trauma Syndrome (RTS) was coined by Burgess and Holstrom (1974) while observing and studying rape and its effects on victims. RTS is defined by Dworkin et al, (2021) as a specific form of Post-Traumatic Stress Disorder that occurs after sexual assault. Often, the subsequent rape Trauma Syndrome manifests somatically, cognitively, emotionally and behaviorally.

1.6.2. Psychotherapeutic Intervention

The American Psychiatric Association (APA) (2019) defines Psychotherapeutic intervention as a conversational therapy wherein clients with a range of mental illnesses, emotional difficulties, and psychological imbalances are guided therapists back to their personal coping status. Psychotherapeutic intervention is designed to facilitate the elimination of distressing symptoms to restore a client's ability to function and to reinstate well-being and healing.

1.6.3 African Perspective

An African perspective is defined and regarded as an analysis lens through which one views almost all life events and course such as fortunes, adverse events, the past and future through a set of Afrocentric values, beliefs and philosophies (Juma, 2011; Meyer, 2003).

1.6.4 Ubuntu

Ubuntu is a Nguni word that is used widely in Southern Africa and, even in other African countries, albeit in different dialects, to denote 'being'. Ramose (1999) defines *Ubuntu* as an ongoing activity in which an African human continues in an enquiry about their experience and truth about their personhood. It is the humane, respectful and polite attitude towards others. According to Mkhize (2004), *Ubuntu* is made up of a prefix 'Ubu-' which denotes 'being' and a stem '-ntu', which refers to a 'human'. This implies the act of becoming human. Mkhize (in Hook 2004) emphasises that *Ubuntu* is a process of constantly becoming an African personhood.

1.6.5 People Involvement Research (PIR)

The researcher in this study conceptualises and defines PIR as a methodology in which both the researcher and the participants are respectfully co-creators of knowledge in indigenous contexts. PIR is a research methodology that reflects an African approach to

data collection process in which both the researcher and the knowledge bearers participate in co-creating knowledge. The development of PIR was necessary when it became apparent that there is an absence of a wholly contextual Afrocentric research methodology, which could epistemologically align with the aim of the current study.

1.6.6 'Phekolo: Mahlatsipa a Peto' (Healing: Rape Survivors) Model

The *Phekolo: Mahlatsipa a Peto* Model is a new stepwise therapeutic intervention that has been designed in the process of this study, to facilitate a transition from a conventional counselling session to a wholistic African spiritual healing process for rape survivors. It is a therapeutic phase in an intervention, which enables therapists to acquire cultural acumen to discern intimation, probe, analyse, diagnose, treat and refer (IPADTR) survivors for unresolved spiritual rape trauma.

1.7 Significance and Contribution of the Study

Two significant developments emanating from this study are: An African-centred treatment model called *Phekolo: Mahlatsipa a Peto* Model and Treatment Process, and an Afrocentric data collection methodology and protocol that is culturally respectful of African knowledge bearers. The researcher termed this methodology *Liphuputso tse Akaretsang Batho* (People's Involvement Research - PIR).

Therefore, broad insights that have been gained from this study will be of assistance to upskill Western trained therapists and professionals with African-based cultural competencies to help provide wholistic healing to African rape survivors.

1.8 The Structure of the Study

This study consists of six chapters that are coherently and sequentially structured to provide a background context, a current situational analysis of conflicting Western psychological treatment methods, and an exploration of African healing modalities.

Chapter one provides an introduction of the study and the contextual background of Western and African therapeutic modalities in rape survivors. It also outlines the research problem, historical context, research question, objectives and significance of the study. Chapter 2 introduces the prevalent Western psychology notions and perspectives of rape. It discusses concepts of rape from a European and biblical perspective, in addition to a socially- constructed idea of rape and gender power relations from Feminist and Womanist perspectives.

Chapter three focuses on the theoretical and philosophical framework located in an African worldview and how it informs an indigenous healing methodologies and treatment modalities. It explores African Ethos, epistemology, axiology, ontology and cosmology. Chapter four discusses an African indigenous research methodology and design. It outlines Indigenous Knowledge Systems and *Ubuntu* philosophy in research design, while highlighting the study population, sample size, sampling techniques, data collection methods and analysis processes. Chapter five presents the results and outlines findings in the themes, as well as to summarise them into an emerging set of discussion points. Chapter 6 synthesises the literature, the theoretical framework and the primary data to formulate a new wholistic healing modality called *Phekolo: Mahlatsipa a peto* and the new People's Involvement Research (PIR) methodology. Finally, the chapter explores implications for future practice, provides recommendations, outlines the limitations and a personal reflection on the study.

1.9 Conclusion

It is important to note that the integration of IKS and qualitative research methods, particularly in the African psychology context, is a relatively new scholarly phenomenon, and still under development in the last few decades. It has been a critical missing piece in academic and professional settings to advance the development of Afrocentric modalities of therapy in indigenous contexts and in South Africa in particular. This research was conducted incidentally at a time when the African academic community is

asserting the importance of the decolonisation of research methodologies and implementation of indigenous approaches to resolve African challenges.

It is also crucial to point out that the integration of IKS in qualitative research methods stages namely, designing the research project, data collection, analysis, interpretation and reporting, is still unfolding. Secondly, there is a plurality of IKS perspectives on the African continent which need to be consolidated and integrated into qualitative research approaches and treatment modalities, to formulate an inclusive and adaptable methodology. Therefore, this study has integrated qualitative research, IKS and developed PIR to extract the best of all three in pursuit of African modalities of psychological therapy for survivors of rape on the African context.

Chapter 2

An Exploration of Concepts and Theories on Rape

Leda and the Swan

by W B Yeats, 1928.

A sudden blow: the great wings beating still
Above the staggering girl, her thighs caressed
By the dark webs, her nape caught in his bill,
He holds her helpless breast upon his breast.
How those can terrify vague fingers push
The feathered glory from her loosening thighs?
And how can body, laid in that white rush,
But feel the strange heart beating where it lies?

A shudder in the lions engenders there
The broken wall, the burning roof and tower
And Agamemnon dead.
Being so caught up,
So mastered by the brute blood of the air,
Did she put on his knowledge with his power?
Before the indifferent beak could let her drop.

2.1 Introduction

This chapter explores concepts and traditional western psychological theories on rape. Firstly, the concept of rape will be defined then its genesis will be discussed focusing on post-biblical history. Other concepts which are deemed relevant for this chapter will also be examined in detail. These include 'rape myths', 'sexual scripts' as well as 'the nature and characteristics of 'rapists'. It is worth noting that even though some of the literature used in this chapter is old, it is, however, considered relevant and classical in the area of rape. This literature is of paramount importance to this study because it will establish the foundation on which the recent literature is based. In some instances, where necessary, indigenous terms which relate to the concept of rape will be used to emphasise and capture the essence and actual meaning of these terms.

A secondary objective of this chapter is to sketch out existing theories that inform universal post-rape therapies and interventions. More specifically, discussions will highlight the shortcomings of generic interventions in addressing African-specific effects and symptoms of rape, thereby advocating for the development of culturally appropriate modalities and training of culturally competent practitioners. This chapter also mainstreams a dimension of spirituality in post-rape therapy, which is a new addition to a body of knowledge in Psychology.

2.2 Rape Defined

According to Hoad (2003), the word 'rape' originates from the Latin word *rapere* which means a violent physical seizure, a robbery of one's body or a forceful dispossession. According to Brown (2003), this word can also be traced to ancient Greek which means 'to steal'. Brown (2003) argues that the etymology of this word underscores Greek cultural assumptions which regarded a woman as property. Rape was perceived as property crime and for that reason, only a woman's 'owner' was the rightful victim. This conception of rape is reductionist and outdated. Today, rape is conceptualised from a physical violation, human rights and psychological viewpoint of a woman.

In South Africa, the legal definition of rape in the early 1900s was based on the age of the victim and her relationship with the rapist (Volgeman, 1990). According to the same legal definition, if a rape victim of an alleged rapist is his wife, there would be no legal case against him. However, that legal definition was repealed in favour of the *Prevention of Family Violence Act 133, Section 5 of 1993*, which holds a husband criminally liable for raping his wife.

Further amendments in South Africa were enacted with the introduction of the *Criminal Law (Sexual Offences and Related Matters) Amendment Act 32 of 2007*. This amendment specifically set rape on a gender-neutral basis, declaring that men or women can be regarded as rape victims. It is also aimed at expanding the range of offences, services for rape victims and a national register of sex offenders. It also protects mentally disabled women who are legally incompetent to consent to sexual acts.

Other unscheduled rape and sexual offences such as fondling, human trafficking and related acts, were then included with the enactment of two new Acts, namely: the *Sexual Offences and Related Matters Amendment Act 6 of 2012* and the *Prevention and Combating of trafficking in Persons Act 7 of 2013*. These amendments have had a profound effect on the consolidation of the rape, as it is conceptualised. Due to a series of legal reviews, the definition of rape in South Africa finally brought in and encompassed spousal and same gender rapes as legal offences. Essentially, legislative amendments took on a social statement on rape.

Research shows that in recent discussions on the definition of rape, three different views have been expressed (Archard, 2007; Francis, 2012; Krog et al; 2002 and McGregor, 2005). Firstly, Francis (2012) views rape as a violent crime and argues that this perception excludes non-violent but non-consensual encounter as rape, thus failing to acknowledge that, in every sense, rape constitutes a psychological and physical assault on the victim. Secondly, Francis (2012) regards rape as a violation of one's autonomy. He argues that any non-consensual sexual act should be considered as rape.

However, Francis (2012) points out that the challenge in upholding non-consensual view of rape comes in situations where consent is difficult to discern or might have been assumed. A case in point is an instance of a close intimate relationship. For example, it is difficult to determine consent in a marriage.

The third view is proposed by McGregor (2005), in which he characterises rape as a special kind of personal defilement. It is still rape even if, in an intimate relationship, a woman goes ahead with the sexual act, even though she has not necessarily consented. In this regard, McGregor (2005) states that rape does not accord respect, integrity and moral value. In support of this view, Archard (2007, p.375) states that: “sex minus consent” is very different to “sex without consent”. He explains this notion by suggesting that the former remains sex, while the latter constitutes a direct violation of a person’s integrity.

The World Health Organization (WHO, 2002) Report on Violence and Health was one of the earliest comprehensive reviews of the problem of sexual violence on a global scale. It gives a concise definition of rape as “any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances or acts of traffic, or otherwise directed against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting including but not limited to home and work” (Krug et al, 2002, p.4). This study adopts the WHO (2002) definition of rape as it eliminates any conditions for non-liability around rape. The study also takes into cognizance the fact that rape can be committed by both men and women. However, due to the disproportionate prevalence of rape cases against women, this study limits itself to male sexual offences. The preceding premise limits the focus of this study to African treatment modalities of African women survivors, who form an overwhelming majority of victims. The next section traces the history of rape from pre-to-post Biblical times.

2.3 The History of Rape

There is no documentary evidence of humans who precede biblical accounts from which the account of rape can be referenced. While it is not clear precisely when the first rape incident was recorded, the Bible alludes that it occurred during the Old Testament period. In the Old Testament, people forced others into sexual intercourse. The following are rape examples in the Bible: Genesis Chapter 34 explains how Dinah, Jacob's daughter, was raped by Shechem while she was visiting some women in the region (Klopper, 2010).

After the rape, Shechem then proposes to marry Dinah to fulfil the prevalent legal requirement. What is evident about this proposal after the rape is that Dinah becomes both a primary and secondary victim to her perpetrator. Klopper (2009) points out that the Biblical text is not explicit about the word 'rape'. Instead, the narrator chooses to refer to Shechem's sexual abuse of Dinah as "he took her and violated her" (Genesis 34:2). Rugwiji (2012) notes that even though Dinah's brothers avenged their sister's rape by killing all the Hivite men, including Shechem and his father, there is no discernible condemnation of Dinah's rape. Fiorenza (2006) claims that Jacob did nothing to address this evil deed.

The above response gives the impression that Jacob did not care or has downplayed the seriousness of his daughter's ordeal. This silence has the potential of giving Bible critics the impression that the Bible lacks sympathy for the victim of rape or, at worse, justifies sexual violence. Klopper (2010) supports this way of thinking and asserts that this view seems to support the blaming of a victim for the ordeal.

Another example of rape in the Bible is found in the Book of 2 Samuel 13:14 (NIV, 2011) where Amon rapes his sister, Tamar, and thereafter throws her out of her family home. This incident illustrates that rape does not only happen among strangers, but most likely could happen among close relations. Herschkowitz et al (2001), show that 60.8% of rape victims in South Africa were violated by men known to them. Statistics show that between 2015/2016, 15,790 incidents of child rape were reported to the South African Police

Services (SAPS) (Wilkson, 2016). This includes children raped by a family member. The latter attests that incest victims still suffer the same plight as the one Tamar endured. This brings into question the justice for rape victims.

Rugwiji (2012) points that, according to Jewish law and practices of the time, Tamara's crime did not receive the penalty it deserved. This further illustrates that victims of rape suffered secondary victimisation at the hands of the justice system. An example in this regard is the story of David, a prominent character in the Bible. Rugwiji (2012) states that the Biblical text does not describe David's sexual behaviour towards Bathsheba as "rape", but simply say "Then David sent messengers to get Bathsheba, and she came to him and he slept with her" (2 Samuel 11:11). It may have been a case of power relations in this instance.

Not only did David rape Bathsheba, but he also killed her husband Uriah. Again, in this instance, the very Jewish law, whose punishment would have warranted the death penalty for such an offense, was not carried out because David was King of Israel (Abasili, 2011; Davidson, 2006). Abasili (2011) and Davidson (2006), argue that Bathsheba was a victim of 'power rape'. The concept of 'power rape', was discussed under the rubric, 'Types of Rape'.

By citing rape in Biblical illustrations, this study does not intend to create the impression that the Bible condones rape. The book of Deuteronomy 22:28-29 (NIV, 2011) is very clear on what the consequences of rape were. Perpetrators would face a fine of fifty shekels of silver and, if the victim was a virgin, the perpetrator would be obliged to marry the victim and could not divorce her for as long as they both lived (Siwo-Okundi, 2008). This practice is referred to as '*ho hlaola*', in Sesotho. While the latter may have been a means to grant the victim justice, instead of aiding the victim, this attempt exposed her to continuous traumatic stress. A rape victim would be constantly saturated by thoughts, feelings and the re-living of the sexual assault whenever she has to consummate her enforced marriage to her perpetrator. The next section attempts to advance the rape discussion by looking at it in the Post New Testament Biblical era.

2.3.1 Post Biblical Period – Modern Era

In Rugwiji's (2012) study on 'confronted by a God who sanctions the rape of minors', the author points out that it is unfortunate that rape in modern societies is committed by people who read the Bible every day. Clearly, rape is wide-spread and can be committed by people from all walks, creeds and social class. This reality suggests that even the clergyman is not excluded. Russell (2009) argues that the clergy's involvement in scandals around sexual abuse, particularly paedophilia, is widespread. The failure of the church to protect children against sexual predators is an issue of grave concern (Henderson, 2006). In addition, some members of the priesthood within the Catholic Church, in particular, have sexually violated children (Maher, Sever & Pichler, 2006).

An absurd reason was given by a pastor to justify an incident of rape. In August 2013, a Limpopo pastor reportedly raped a 15-year-old girl for a bizarre purpose of protecting her from rape. Consequently, the daughter has conceived three children by him. She was reportedly 13 years when the abuse started. The perpetrator was convicted in 2008 but the law is unable to jail permanently (Taljaard, 2012). In 2009, another sexual exploitation of young girls occurred at the Central Methodist Church in Kwa-Zulu Natal. Victims were seeking refuge from the Church but, instead, they were expected to perform sexual favours in exchange for toiletries (Cox, 2009).

Rugwiji (2012) concludes by asking what Jesus would do or say about the rape of children. The above evidence suggests that rape has long been part of the human experience, dating as far back as Biblical times. The scourge of rape has penetrated society, including the Church and the secular world. The next section will focus on rape history from a social perspective.

2.3.2 Social History of Rape

In her book, *'Against Our Will: Men, Women and Rape'* Brownmiller (1975) outlined a ground-breaking historical analysis of rape. She advocates that rape should be viewed as a crime of power, rather than a crime of sex. Her account starts with the early recorded

law of Babylon, which regards rape as a crime of property damage (Brownmiller, 1978). This law declared that the victim of rape was either the woman's father or her husband, because she's their property. This shift in focus from the rape of a woman to the father or husband, commodified and dehumanised women as they were deemed lower in status than their male counterparts in society.

Brownmiller (1975) further points out that under both Babylonian and Hebrew Laws, a married woman was considered an accomplice in her own rape. As a result, she was also liable to punishment as a co-accused. Furthermore, being forced to marry a perpetrator for whom she bore children served as a permanent reminder of her violation. Women have been predisposed to rape in multiple levels in society. Francis (2012) indicates that historically, rape has served as a powerful weapon of war. The Rape of the Sabine women, which supposedly led to the founding of Rome, backs Brownmiller's (1975) reference of women used as trophies in war conquests.

Brown (2012) identifies four kinds of rape that occur in conflict situations. They include individual rape, gang rape, rape wherein victims are forced on each other and rape with objects. In most rape cases, torture has also been used (Human Rights Watch, 2015). Women in conflict situations are more vulnerable as they bear the burden of going out to fend for the family. Brown (2012) states that they are exposed in the fields during cultivation, in forests when collecting charcoal, and at markets when trading their goods.

Several other examples of women used as war targets were experienced in the first and second world wars. For instance, in Germany the Nazis molested Jewish women while the slave masters sexually abused them. In addition, countries such as Bosnia, Rwanda, Uganda and Darfur (Abdullahi, 2016; Baaz, 2013; Bourke, 2014; Francis, 2012) used rape, as a weapon of war. In the Democratic Republic of Congo (DRC), Brown (2012) contends that sexual victims' ages range from 4 months to 84 years.

In 2016, the International Criminal Court (ICC) at The Hague convicted the former Congolese vice-president, Jean-Pierre Bemba, in the first trial to focus on the use of

sexual violence as a weapon of war (Mouthaan, 2011). Bemba commanded a militia that committed mass rapes of civilians. In 2017, a trial of Ugandan warlord Dominic Ongwen began in the ICC (Brunger, 2017). This case highlights the prevalent use of rape and sexual violence as a weapon of war which has to be eliminated. These two cases will hopefully eliminate sexual exploitation and rape as weapons of war.

This section was a synopsis of rape in local and international contexts. The next section will focus on the South African construction of rape and related experiences.

2.3.3 Dimensions of Rape Defined in a South African Context

The *Sesotho* word for rape is *peto*. *Peto* is the noun and *ho beta* is the verb. *Go beta* in Setswana means 'to strangle'. Motsei (2007), further explains that rape in Sotho phrases is; "*go betella* or *go kata*", meaning that the spirit is suppressed and buried, making it impossible for it to breathe life into a collective spirit. This implies an act of extracting one's soul from the body. From this word, one can deduce that for the indigenous African people, the act of rape, metaphorically speaking, is an act of killing/destroying one's *moya* (the soul/spirit).

Many African cultures on the continent frown upon the act of rape. Rape is regarded as an affront to women in particular, and African communities in general (Letseka, 2000). Africans express their disapproval of rapists in the strongest terms such as "He is not a person but a dog; He is sick; Oh God, he is an animal" (Letseka, 2000). Such descriptions define rape as an inhuman, unAfrican and animalistic behaviour, which is devoid of a human spirit. Letseka (2000) states that a normal person would not even contemplate rape unless they have been dehumanised.

Two of the foremost African anti-rape male activists, Drs Mukwego and Adebayo (2018) assert that, sexual violence and rape are no different from other weapons of mass destruction because they destroy the social fabric of local communities, inflict humiliation and trauma. It can be inferred, therefore, that rape is perceived as more than a physical assault but rather an attack on *moya* (the soul/spirit) of individual victims and their

communities in the African contexts. *Moya* is a construct that captures the essence of being in the sphere of African philosophy and it exists across various assumptions in the African worldviews such as *Ubuntu* and *Skh Djr* (Nobles, 1997; van Niekerk, 2013).

Baloyi and Ramose (2016) posit that, depending on the context, *moya* has different meanings and connotations. It may imply wind, air, intention or spirit for example, *O tsenwe ke moya* – loosely interpreted as ‘she is possessed by the spirit’ (Baloyi and Ramose, 2016). The extrapolation that can be drawn from the above-mentioned experts is that rape is a form of battering and an attempt to kill the victim’s ‘being’, which is *moya* (spirit). This act is best captured by Motsei (2007, p.157) when she explains the word *ukudlwengula* (isiZulu word for rape), which means ‘to tear apart’.

She elaborates by stating that: “every time a man rapes a woman, he not only rips her body and soul apart, but he also cuts the connection of a person to the spirit”. When *moya* is destroyed, such as during an act of rape, the effects on the victim are deep and traumatic. Due to the dramatic nature of the rape, the interventions must be appropriate to the intensity of the effects on the victim.

These methods would most likely include a cleansing ceremony to purify and restore them into society. The cleansing rituals would entail emersion in water, exfoliation through steaming with natural herbs and oftentimes, an animal (for example, a chicken, goat or sheep) may be slaughtered to supplement therapy.

In “*Sesotho ha moya o tsoa nameng, bophelo ha bo sa leo hobane botho ke boleng ba hao*” meaning that the act of rape takes away one’s humanity (*botho*). Understanding the African conceptualisation of rape, including related cultural aspects and beliefs, can help African Psychologists to fully comprehend the devaluation and stigma that exists among African survivors of rape. Based on this understanding, these clinicians may research and ultimately design culturally sensitive and appropriate therapeutic modalities. Clinical observations show that rape survivors tend to vigorously and repeatedly wash their *bosadi* or *botshehadi* (vaginal area). Eurocentric therapy would diagnose this behaviour as Obsessive-Compulsive Disorder (OCD).

Culturally competent professionals would view this response as a need for a victim to rid oneself of *ditshila* (the filth) that rape misfortune has brought on them. It is important to note that orthodox Africans regard a perpetrator's behaviour as *ga se motho/ga a na botho*, (inhumane). Essentially, at this stage the rapists have degenerated to the level of an animal and, based on the African worldview, animals do not engage sexually with humans. Thus, we regard rape as *bo phofoolo* (savage/animalistic). The preceding narrative was an exploration of how Africans in South Africa define as well as understand rape and its effects on *botho ba rona* (our humanity). In order to understand the causes of rape and how it can be treated, it is imperative that a framework is proposed that explains how the act is perceived and understood.

2.3.4 Rape as a Socially Constructed Reality

Rape is a socially constructed phenomenon and reality whose meaning is located within a socio-cultural context. Social constructionism is essentially a subjective, relativist stance of engaging and making sense of the reality around people (Becvar and Becvar, 2009). Social constructionism offers a macro focus which emphasises that we acquire behaviour that is often accepted by significant others around us. In the case of rape, gang members may have approved of it. Facts are replaced by others' perspectives and in the process, the self is created in relationships (Becvar & Becvar, 2009).

Andrews (2012) states that, in attempting to make sense of the social world, constructionists view knowledge as constructed as opposed to being created. In social constructionism, reality is socially defined as it relates to the subjective experiences of people in social and cultural contexts. It is individuals or groups who define this reality (Andrews, 2012).

Constructionism maintains that human life exists due to social and interpersonal influences. Therefore, to properly understand behaviour (rape, in this case), it has to be located in its socio-cultural context. Social constructionism points to the role and influence of cultural contexts on people's behaviour. Becvar and Becvar (2003) support

the idea of a self that is constructed in social relationships. They argue that a person exists in multiple selves that are socially constructed in varied and constantly-changing relationships. They further believe that a person's mind reflects the social context in which they live. Therefore, inferring from Becvar and Becvar (2003), rapists in South Africa project a specific social milieu that has shaped them.

Social constructionism holds that reality is a process of constructing meaning subjectively. It deals with how people make sense of their experiences (Amineh & Asl, 2015). In constructionism, the observer creates reality by giving meaning to what is observed. This implies that reality is constructed through a person's subjective experience. Van Nierkerk (2005) states that in constructionism, language plays an important role that people use to create concepts and their meanings.

Constructionism does not focus on the individual *per se* but rather on social interaction in which language is generated, sustained and abandoned (Gergen & Gergen, 1991). Van Nierkerk (2005) suggests that people socially construct reality by their use of shared meaning that is often communicated through language. Nobles et al (2016) supports this view by stating that language and the knowledge represented therein, reflects and represents a people's culture.

Nobles et al (2016) conclude, therefore, that Africans need to use indigenous African concepts to describe and give meaning to African phenomenon. In this study, the issue of language is crucial in understanding the effects of rape and its treatment modalities, using African vernacular to locate these experiences in the African worldview. Rape is a manifestation of aggression that is projected from a rapist to the victim (Buntu, 2014; Koss & Leonard, 1984 and Seifert, 1994). Social constructionists recognise that rape involves issues of male power and violence.

Lea & Auburn (2001) state that to understand why men rape, one needs to look beyond the personality traits of individual rapists to the 'practical ideologies' that govern acts of rape. Parker (1992) notes that the behaviour of individuals is not influenced by their

'attitudes or motivation' but by their overall ideological context. In other words, rape results from their subjective socio-cultural context. Subjective experience is a socially constituted product that is inseparable from the context. Therefore, the societal attitude towards rape will, to some extent, determine how the rapist and victim regard the act of rape. To properly understand the social construction of rape, it is imperative that we contextualise it within the discourse of gender power relations, culture and language.

2.3.4.1 Gender and Power Relations

The contextual understanding of rape implies that there is an overarching justification of rape by the perpetrator. Lea and Auburn (2001) state that rape is, therefore, constructed through discourse. Butler (2009) refers to hegemonic discourse that exists within sexual and gender norms as based on power relations. This assertion supports the notion that rape is the perpetuation of male power. Both men and women are positioned according to their practical ideologies. For this reason, rape myths will tend to sustain gendered relations to power.

Understanding rape from a social constructionist viewpoint requires a discursive approach to unveil its wider effects on society and the individual. Lea and Auburn (2001) argue that a discursive approach seeks to understand human actions in terms of language used to account for their actions. They further add that such accounts are entrenched in the social context in which they emanate. Believers in such myths draw on the socially scripted ideologies which are available in their language and community to justify their actions. Rape is thus contained not in the event itself, but in the linguistic description used to account for it. In this way, personal subjectivity and the broader ideological context of the event are interlinked. It is, therefore, critical to examine the prevalent social narrative of rape in South Africa.

2.3.5 The South African Rape Narrative

The struggle for emancipation pre- and post-Apartheid bares scars of rape, which indicate a continued subjugation of the African woman. Dosekun (2013) asserts that rape in post-apartheid South Africa has reached epidemic proportions. The struggle against apartheid prioritised gender rights that were suppressed in that era. Consequently, women's rights became part of the transformation agenda to emancipate women. The resultant mainstreaming of women's rights in the transition to democracy exposed gender issues like rape (Dosekun, 2013). South Africa needed a shared moral-legal standpoint from which to address the scourge of rape. The new constitution serves as a national rallying point that aggregates efforts against rape.

The new constitution, particularly Sections 9 and 11, mainstreamed the issue of violence against women by enshrining Women's Rights in it (Bennett, 2008; Du Toit, 2005, Posel, 2005). Rape has been a contentious issue in the South African social fabric. Posel (2005) states that the South African media first brought the issue of rape to a wider public in 2001. The public's engagement with the notion of rape was heightened again in 2006 when the then South African Vice President and subsequently the president, was accused of rape. Mr. Zuma's supporters who publicly chanted 'burn the bitch' in court (Motsei, 2007, p.27), bore testimony to what Hassim (2009) cites as a fallacy of our countries' laws. It was in this heroic facade of South Africa's constitution where issues of violence, sexism and hatred were hidden.

The anti-women slogans in the Jacob Zuma court case then, should have kindled a very strong reaction from the judiciary as a symbolic protection of women, especially because they were uttered and sung in a court building during a court procedure. Africa Check (2015) quotes a UK newspaper, *The Sun* which carried blustery headlines 'SA NATION OF RAPISTS' (British paper mangles, 2015). The United Nations Office on Drugs and Crime (UNODC) 2013 report indicates that while South African rape statistics were not stipulated, they were higher than the top three countries; Sweden, England and Costa Rica. Africa Check (2015) cautions against such alarmist headings because no tangible

statistics have been provided to support this allegation in comparison to other countries like the DRC. The DRC is infamous for its rape scourge as a weapon of war. The alleged white-dominated press also tends to racialise rape as a black issue (Bonnes, 2011 and Erlank, 2005).

Literature (Bourke, 2011; Grubb & Turner, 2012; Motsei, 2007 and Raphael, 2013) indicates many myths and misconceptions on the rape discourse. A clear understanding of rape is critical to realise the goals of the Freedom Charter (i.e. non-sexism, dignity and respect for women). It seems that South Africa’s strategies are ineffective as rape cases remain high as shown in the table below:

Table 2.1 South African rape rates: 2008/9 to 2018/19 (Reported to SAPS)

| Year | Reported rape rate per 100 000 population |
|-----------|---|
| 2008/9 | 95 |
| 2009/10 | 96 |
| 2010/2011 | 95 |
| 2011/2012 | 91 |
| 2012/2013 | 92 |
| 2013/2014 | 85 |
| 2014/2015 | 80 |
| 2015/2016 | 77 |
| 2017/2018 | 70.5 |
| 2018/2019 | 72.1 |

Source: www.africacheck.org/factsheets/guide-rape-staitstics-in-south-africa

The statistics above are high and are an indictment to the constitution of a democratic country like South Africa. There is however, a downward trend from 2008 to 2019, albeit at a slow pace. The decreasing number of cases could be attributed to increasing efforts by non-state shareholders like NGOs and the media, who are partnering with government and civil society in fighting the rape scourge, thereby enhancing confidence and trust in society. Improvements in conviction rates may also be responsible for the reported drop

in incident rates indicated in the table above. However, there is a debate in society wherein a distinction is made between the number of rape cases reported and SAPS dockets opened (Artz & Smythe, 2007).

Evidence also shows a widespread closure of the dockets because victims could not be traced, where 9% of victims had withdrawn their cases, 7% of the rape cases were declared unfounded and in some cases, there was apparently no evidence of rape or even more alarming, other cases were dismissed as false accusations (Sigsworth et al., 2009). POWA reports that a substantial number of rape victims have previously not reported cases to the police due to a lack of trust in the South African justice system (SA News Agency, 2010).

Amid all this, Africa Check (2015/2016) reveals that four years ago, 42,596 individual women and girls were raped. Of these staggering rape violations, only between 6% and 8% resulted in successful convictions and rape went down to 4% in some provinces in the last two decades (Africa Check, 2020, Leggett, 2003 and Smythe, 2015).

Locally conceived African-centred interventions would not necessarily protect African women from rape but would put some dignity to their plight instead. A recommendation is that this should happen by using culturally sensitive intervention modalities. Furthermore, a poignant question would be: what are African Psychologists doing to understand, treat and mitigate the effects of rape in society, as well as to specifically alleviate the pain suffered by rape victims? The imperative for seeking African-centred treatment modalities that are relevant in the treatment of African female rape survivors is not only crucial to their wellbeing, but it is also in line with the call from the society in general. The Church, due to its persistent influence in South Africa, must also play a meaningful role in eradicating this scourge. It is vital for all anti-rape stakeholders to understand the sub-meaning underlying the prevalence of rape in South Africa.

This means that the socio-cultural, economic and the spiritual contexts of rape have to be understood in order to inform the necessary intervention strategies. Most rape incidents

are facilitated by socio-cultural myths and deeply entrenched beliefs that need to be debunked. Therefore, the next segment of this study delves into prevailing rape myths in South Africa.

2.4 History of Rape Myths

Myths are social constructions that represent prevalent social issues. Morales (2013) argues that myths appear in very complex and cultural contexts and can be interpreted from multiple and complementary perspectives. Morales (2013) further suggests that from a psychological approach, myths can be considered as elementary ideas, while from a historical-ethnographic viewpoint, they can be 'ethnic ideas' or 'popular ideas'. Morales (2013) defines myths as traditional beliefs that are accepted without being questioned. He further argues that the main reason that myths are accepted at face value is that they either confirm what people want to believe, or they reinforce collective ideas on how they see the world. He also argues that the main function of myths is to stabilise the status quo by encouraging conformity rather than challenging reality. This section will attempt to present and explain some myths that have been associated with rape.



Fig.2.1. *Leda and the Swan – Da Vinci*



Fig. 2.2 Leda and the Swan- Michelangelo

According to Norfolk (2011), myths have always been part of the ancient Greek religion. An example in this regard is the rape of Leda. In his narration, Norfolk (2011) explains that Zeus (one of the Gods in mythology) was attracted to Leda and he disguised himself in shape of a Swan to rape her while she was swimming. Purportedly, the rape occurred on the night that Leda had slept with her husband King Tyndareus. Due to those couplings, Leda gave simultaneous birth to Helen of Troy, Zeus's daughter, as well as to the twins, Castor and Clytemnestra, her husband's children (Norfolk, 2011).

Although the rape of Leda was a well-known rape myth during the Middle Ages, it became more prominent during the Italian Renaissance. It was during this time that artists such as (Fig.2.1) da Vinci and (Fig.2.2) Michelangelo captured the myth in artistic form.

Norfolk (2011) sees that both artists' interpretations tend to depict Leda in a state of erotic compliance, rather than a victim of rape. Norfolk (2011), further observes that the rape of Leda began to be seen in serious light only when William Butler Yeasts published his 1928 Sonnet called 'Leda and the Swan'.

Yeasts describes Leda's face as demonstrating helplessness and fear in the brutal assault after which she was discarded (Norfolk, 2011). Horveth and Brown (2009) state that the concept of rape myths became better recognised in the 1970's, when researchers such as Brownmiller (1975) and Field (1978) began to interrogate this concept closely. Burt (1980) was the first person to develop a definition of rape myths.

Acceptance of certain beliefs that reinforce rape have been demonstrated worldwide (Costlin, 1993; Dorling, 2016, Lonsway & Fitzgerald, 1995; Rohland, 2009). Rholand (2009) regards rape myths as attitudes and general false beliefs that are widely embraced and they serve to deny and justify male sexual aggression. Rholand (2009) agrees with Lonsway and Fitzgerald (1995) that the main function of rape myths is the denial of reality. Some rape myths and beliefs are explained below:

- *"No means Yes"* i.e. women may always protest initially but they never really mean it. This myth implies that women do not give in to sex easily because they do not want to be regarded as having low moral characters. The myth follows that women act as though they are disinterested in sexual activities (Grubb and Turner, 2012).
- *Women love to be swept off their feet and taken by force.* This perception connotes that women have secret rape fantasies. Horvath and Brown (2009) clearly distinguish between dreaming about a commanding, handsome and powerful man whose forcefulness is at the control of the dreamer, than facing a real-life rape experience.
- *Nice girls do not get raped.* This belief holds that certain types of women get raped, for example, "women who dress in skimpy clothes or women who hang out at bars and sleep around are raped" (Grubb & Turner, 2012). This myth serves to blame the

victim by insinuating that she caused the rape and, therefore, she deserves it. This sense of guilt makes the woman reluctant to talk about the incident for fear of stigmatisation and subsequent degradation. This may account for a low number of reported cases in violent crimes on the justice system in South Africa.

- *A typical rape involves a stranger in a dark alley* (Bourke, 2011). This implies that a woman is “asking for rape” by walking in a dark alley. Ironically, many rapes occur in women’s homes and familiar places, not necessarily in dark alleys.
- *Typically, rape is a violent crime*. Walby and Allen (2004), as cited in the Daphne Project (2012), argue that violent rape is the exception, not the rule.
- *It is impossible to rape an unwilling woman*. This myth supports the prejudice that a woman consented to the sexual act/rape unless obvious signs of injury are present (Bourke, 2016).
- Bourke and Whitethorn (cited in Delap and Morgan, 2013), exposed the following myth: “A woman with skirt up can run faster than a man with trousers down”.
- Women lie about rape (Raphael, 2013).
- “Women have an unconscious desire to be raped, women often provoke rape through their appearance or behaviour” (Horwarth & Brown, 2009).
- Men who are HIV positive, rape virgin girls because they believe that virginity cures HIV (Girl Child Network, 2004).

The above-mentioned myths are not only unfounded, but they also affect rape survivors negatively. Clinical experience with rape trauma survivors indicates that these myths often cause survivors to feel responsible for their ordeal. Rholand (2009), quoting Lownsway and Fitzgerald (1994), identifies three functions of rape myths:

(1) the denial of the reality or extent of sexual assault.

(2) the confirmation that the world is an inherently good place, where terrible things happen to only those who deserve them.

(3) they facilitate the oppression and social control of women, shifting of blame to women.

The next section will focus on the nature and characteristics of a person who tends to perpetrate sexual violence.

2.5 The Nature of the Rapist

In order to appreciate the plight of rape victims in its fullness, it is important to understand the profile of a rapist and what it is that prompts rapists to commit the assault. Clinical experiences in rape therapeutic intervention have proven effective when victims are educated on the typology of rapists. Feedback that emanates from psycho-education on rape has helped victims realise that, contrary to rape myths and scripts, rape has nothing to do with their actions or inactions. In fact, it has to do with power.

The general influences on different classifications of rapists will also be discussed. According to Peters (2012), rape emanates from interpersonal aggression which results in sexual victimisation of known or unknown women. It is important to note that rapists do not fit a “typical” demographic profile which distinguishes them outwardly. Most rapists are of average or higher intelligence, have been married at least once and often live above the poverty line (Burgess and Brown, 2010). It is essential to examine and understand factors that may contribute to creating a rapist.

- **External characteristics of the rapist**

Burgess and Brown (2010) have found that rape is less of a mental illness but more of a personality dysfunction. The most notable personality dysfunction is the inability to form and maintain emotionally intimate relations with other human beings. Burgess and Brown (2010) state that rapists tend to display little capacity to trust, sympathise and empathise, or to display warmth towards others. Additionally, their relationships lack reciprocity and mutuality (Burgess & Brown, 2010).

- **Childhood experiences**

There is a common belief that childhood experiences have a profound impact on future behaviour. Specifically, growing up in a violent context where at least one parent was violent or either of the parents physically abused the children, promotes violent behaviour in adulthood (Jenney & Alaggai, 2013). Burgess and Brown (2010) state that most rapists may have been subjected to sexual abuse in childhood or victimised by a known family member, teacher, neighbour or friend.

- **The influence of Alcohol**

Alcohol abuse is a common denominator among rapists. Culp-Ressler (2013) cites alcohol abuse and sexual assault as frequent co-occurrences. The 2012 Casa Palmera Report reveals that rape is far more likely to occur when alcohol is abused. Alcohol is known to reduce a person's inhibitions and causes them to downplay rape. Grubb and Turner (2012) state that alcohol is the most common drug associated with sexual assaults. Turner (1998) suggests that the mutual effects of misconstrued beliefs about sexuality and alcohol are likely to increase a man's misperception of a female's sexual intention, which can lead to rape.

Abbey et al (2001) observe that the frequent co-occurrence of alcohol use and sexual assault does not prove that alcohol use causes sexual assault. Culp-Ressler (2013) also cautions that alcohol use does not necessarily cause sexual assault. However, Grubb & Turner (2012, p. 447) suggest to the contrary that; "In alcohol facilitated rape, the perpetrator deliberately turns to alcohol or other drugs in order to orchestrate the rape". Alcohol consumption by women and associated incidents of rape in South Africa have been documented (Jewkes et al, 2009; Langa-Mlambo and Soma-Pillay, 2014).

Jewkes et al (2009) examined the interface of rape and HIV in South Africa and found that 8.9% of men revealed they had raped a woman who was too drunk to stop them. Langa-Mlambo and Soma-Pillay (2017) reported a positive association between intimate partner violence, rape, sexual assault and alcohol use. The two authors state that although the causal relationship between intimate partner violence and alcohol

consumption is unclear, there is evidence that women with histories of violence consume more alcohol and conversely, women who binge drink and abuse alcohol are more likely to report incidents of rape and violence. The preceding examination of alcohol and its causal relation to rape, might be made stark by investigating the characters that are perpetrators of sexual assaults, i.e. the typology of rapists.

2.5.1 Types of Rapists

Various multi-disciplinary theorists and authors have examined a number of profiles into which rapists fall. The following table outlines four types that this study considers the most common in the context of our intended range of therapeutic services.

Table 2.2 Typology of rapists

| Type of rapist | Motives | Theorist/Author |
|------------------------|--|------------------------|
| Power-assertive type | He wields power by dominating and intimidating victims through weapons, physical force involving minimum injury or threats of harm. Penetration is a "conquest" to him. He has a history of "hyper masculinity" | Sims 2012 |
| Power-reassurance type | This rapist conquers victims by intimidation. He has an underlying sense of weakness, inadequacy and an unclear gender identity. Rapes occur after bouts of blows to his ego. He rapes women to re-assert himself. | Sims, 2012 |
| Anger retaliation type | This type is extremely dangerous because anger and hatred dominate the assault. Quite often, he murders his victims. The predominant motive is revenge for real or imagined events by women. | Pietz & Mattson, 2014 |
| Anger-excitation type | This rapist is classified as a pathological sadist who attacks women to experience erotic | Pietz & Mattson, 2014 |

| | | |
|--|---|--|
| | aggression. He does not derive pleasure from the sexual act but delights in the suffering of victims' emotional and physical anguish. | |
|--|---|--|

Compiled by Palesa Mahlangu, 2018

This typology points to the core of the therapeutic intervention, where there is a need for a good knowledge base and assurance that interventions do not perpetuate secondary victimisation. To further facilitate the comprehension of perceptions and possible intervention strategies when dealing with rape, it is crucial to reflect on different theories that inform this subject.

2.6 Traditional Western Theories of Rape

In this section, Western psychology theories that relate to and address rape are discussed. The Psychoanalysis theory was examined through the lens of Sigmund Freud and Neo-Freudians. Thereafter, the focus of the investigating was framed on the Feminist and Womanist perspectives on rape. Finally, the concept of Sexual Scripts and Objectification Theory will be reviewed in relation to rape.

2.6.1 Freudian Theory

Freud is one of the earliest theorists who studied the subject of rape and its causal factors. Bourke (2011) states that Sigmund Freud instigated the debate about being sexually violated in childhood. Essentially, Freudian theory states that from childhood to adulthood, human personality development is shaped through a series of psychosexual stages. For this reason, he referred to his concept as psychosexual theory of development or Neurotica Theory.

According to Bourke (2011), Freud did believe his patients but later in a letter addressed to his friend, Wilhelm Fliess in 1897, he admitted to having changed his mind. In his letter, he stated that, "I no longer believe in my neurotica (theory of the neuroses)". This theory was also known as the Seduction Theory. In addition, Burke (2011) suggests that

Freud's reason for abandoning his theory was that he had failed to conclude his analysis. However, Masson (2012) attributes Freud's abandonment of his theory to a failure of courage rather than a clinical or theoretical insight. It follows, therefore, that Freud's inconclusive theory does not adequately explain the reality of sexual abuse. His psychosocial stages do not directly link issues of power and rape to present day realities, particularly in the African context.

Freud's negative view of women is illustrated by his belief that women are prone to physical vanity (Freud, 1933); shame (Freud, 1933); jealousy (Freud, 1925); passivity; masochism (Freud, 1924) and possession of a lower sexual drive (Freud, 1933). Freud has created an impression of a male chauvinist, thus critically creating doubt whether his theory on rape and sexual assault were based on empirical evidence or anecdotal prevailing attitude towards women at that time.

Additionally, Freud looked at the issue of masochism in relation to rape (1924; 1925). He argues that females "wanting" to pass through the psychosexual stages successfully should refrain from masturbating with their "masculine" clitoris (substitute penis) and rather stimulate the "feminine" vagina, which is a passive receptive organ. The change from active clitoral sexuality to passive vaginal sexuality can be generalised to include other forms of behaviour, that is, if active or aggressive modes of relating are avoided, then aggression will consequently be turned inward, resulting in masochistic behaviour and self-destructive attitudes.

Another Freudian notion that can influence the understanding of rape is that men have a greater biological propensity for sex. Freud justifies his view by claiming that men are fundamentally responsible for reproduction, since their biologically determined aggression allows them to coerce women into having sex, whether women wish to engage in it or not (Rohrbaugh, 1981). Freud's ideas have been the subject of criticism. Grossman (1986:1) points out that contradictions, inconsistencies, vagueness, blatant errors and prejudices are indicators of unconscious conflict in individuals. The same phenomenon in the theoretical discourse may point to unresolved but fundamental

problems in theory (Grossman, 1986). Scharnberg (2009) indicates two approaches that have been prominent in Freudian criticism. These are historical documentation and textual criticism. Under the historical approach, he states that many unknown documents have been disclosed, including case notes written for the same patient by other doctors (Scharnberg, 2009; Weisweiler, 2006 and Wilcock, 2000).

Such criticisms lend credence to the fact that Freud's theories should not be taken as the yardstick on which to base psychology. While on textual criticism, Macmillan, 1997; Masson, 1984; Scharnberg, 2009, Wilcocks, 2000 point out that Freud's writings consist of very few scientifically sound observations. These observations provide no evidential support of Freud's interpretation or theories. Finally, Scharnberg (2009:2) claims that: "Freud's interest was by and large limited to observations he could use or misuse as grounds for his interpretations."

It has become apparent that Freud's theory of sex differences in behaviour and attitudes appears to retard rather than advance an understanding of rape. Some of his ideas on female sexuality have legitimised the insensitive treatment of rape victims and reinforced prevailing rape myths, by overstating biological pre-disposition while underplaying a person's socio-cultural context. His pessimistic conceptualisation of women and positive assumptions about men invariably swings the interpretation of the rape act in the rapist's favour.

Furthermore, his theory almost rationalises sexual acts between parents and children by regarding their sexual beliefs as natural rather than abusive and places the responsibility on the victim child. Such an approach can result in the normalisation of rape through modelling (Blake, 2009; Scharnberg, 2009, Mosavel et al, 2012). However, a positive spinoff from Freud's theoretical shortcomings is a discussion regarding rape from other theories, as shown in the following analysis.

2.6.2 Post-Freudianism

A whole host of critiques, supplements and alternatives has emerged beyond the Freudian era. Deutsch's (1944) analysis of female masochism was more specific than Freud's. She holds a belief that masochism implied that women unconsciously wish to be raped (Raphael, 2013). This view is evidently archaic as it is a classic rape myth. Deutsch (1944) asserts that masochism "is the most elementary power in a woman's life" and is directly linked to the female's biological pre-disposition (Raphael, 2013). It is worth noting that notions of inherent male dominance and female masochism move the burden of guilt from the rapist to the victim.

Another premise, which devalues women's rape experience, is the belief that their sexual fantasies are closely interwoven with the rape act. In this context, Freud maintained that repressing thoughts about rape changes it into "physical excitement" delusions and "bodily symptoms" (Koehler, 2013). He argued that by repressing the memory of masturbation, one induces fantasies of seduction. Deutsch, (in Critelli and Bivona, 2008) supports this premise by stating that female puberty fantasies are masochistic: "Girlish fantasies relating to rape often remain unconscious but evidence their content in dreams, sometimes in symptoms and often accompany masturbatory actions" (pp.57-70). It is, therefore, not surprising that many men have readily accepted arguments such as Deutsch's, as these absolve them of all responsibility for rape and allow them to claim false rape accusations (Farmer, 2016).

Neo-Freudians from the American school of psychoanalysis, particularly Horn (as cited in Heffer, 2014), believe that for the psychoanalytic doctrine to fully comprehend human sexuality, it should explore the role of social and cultural conditioning. It is strongly argued that an understanding of sexuality can only be achieved through a comprehension of biological sex differences, a sociological analysis of such differences and that, the cause of penis envy does stem from anatomy alone (Horn as cited in Heffner, 2014).

Psychoanalytic Feminists like Horn (as cited in Zakin, 2011) have gone beyond the above criticisms to question the very existence of penis envy. This has important implications for Freud's theory on female sexuality, since the non-existence of penis envy brings into question the female transition from clitoral to vaginal sexuality and the resulting development of masochistic tendencies, including women's 'unconscious' desire to be raped (Horwarth & Brown, 2009).

Freud and Post-Freudians like Deutsch seem to blame the victim by justifying the rapist's action. Such arguments are likely to perpetuate the social control of women. Peacock and Backer (2014) suggest that boys who come from violent backgrounds are most likely to be violent. This makes one wonder whether men are predisposed to violence, including rape (Theories of Crime, 2006).

There is no doubt that Freud has contributed immensely to the field of psychology. However, his theory in relation to rape seems to disregard cultural and contextual variations. Therefore, it is imperative for researchers and scholars to address and rectify the social ills perpetuated, particularly to women. There is need to strive, teach and promote a psychology that is truly empathetic to the victim rather than one which exonerates the perpetrators. They need to seek interventions that are relevant and meaningful to rape victims and survivors. It is befitting to interrogate specifically, women's perspective in this discussion.

2.6.3 The Feminist and Womanist Perspectives

2.6.3.1 Feminist Perspective

The previous section has presented the varied traditional concepts of rape. Therefore, it is critical to contextualise this discussion by premising in women's voice in the rape discourse. It is thus imperative to focus on what both the Feminist and Womanist views are on this subject in relation to Freud's Theory on rape. Feminism is a belief that women are and should be treated as potential intellectual and social equals to men. It proposes

that all people are entitled to equal civil rights and dismisses discrimination based on gender, sexual orientation, skin colour, ethnicity, religion, culture and lifestyle.

Feminist thinking on rape is premised on particular thinking. Firstly, Feminists place an emphasis on breaking the silence around rape and debunking the myth that rape is rare and exceptional (Whisnant, 2007).

Secondly, rape deprives women's sovereignty of their bodies, thereby granting men control over the sexual and reproductive uses of women's bodies. Thirdly, the definition of rape has expanded to encompass more than physical force and violence (Whisnant, 2007)

According to feminists such as Anderson and Doherty (2007), 'Rape Perception' research is well developed beyond South Africa's borders, especially within mainstream psychology. They demonstrate how culturally derived rape myths are orchestrated to blame the victim. These myths are embedded in the epistemological and mythological fibre of research that investigates rape (Anderson & Doherty, 2007). They note that asking participants to assess rape vignettes and identities suggests that some rapes are deserved and, therefore, respondents can make a distinction on this assumption (Anderson & Doherty, 2007).

There is a need to examine an assertion made by Anderson and Doherty (2007), whether the plight of women survivors of rape can be better understood by women. Perhaps more research by women is needed, especially around coping and treatment modalities. This is partly a motivation for the undertaking of this study, which will add to the body of knowledge on the development of Afrocentric modalities of treatment for African female survivors of rape.

Feminists insist that rape is about power rather than sex and they further argue that it should be classified as a hate crime (Bachmeier, 2013). The radical feminist theory premised in the understanding of social relationships as they relate to gender oppression. Feminists believe that liberal reforms are founded on the protection of the rights of both

the victim and accused, as is the case in South Africa. Such even-handed rights expose equality. However, radical critics argue that such a system negates gender domination in a society. Francis (2012) suggests that the law should insist upon the woman's active consent in intimacy matters.

Similarly, Caringella (2009) proposes that sex should be deemed undesired unless a woman affirmatively expresses willingness to participate. This model is termed Communicative Sexuality (Caringella, 2009; Harris, 2010; Miller, 2008 and Pineau, 1996).

Additionally, Humphrey (2016) argues that, just as affirmative consent is required for medical treatment or in the appropriation of property, affirmative consent for sex should be mandatory. Humphrey (2016) notes that before medical surgery is done, an ambiguous response would not suffice for the operation to go ahead. Similarly, in sexual advances, a clear response should be given.

Francis (2012) advocates that liberal reform laws should clearly state that sex is unwanted unless the woman concerned gives explicit consent. Furthermore, Francis (2012) argues that it is wrong, not right, for women to be regarded as complicit in their own rapes for behaviour such as wearing seductive clothing, going into bars or even accepting a ride. This type of judgement, she argues imposes a burden on women and exonerates men.

A 2010 Antioch College Sexual Offence Policy proposed a radical feminist view of consent. This policy prohibits all non-consensual sex and requires that those who participate in sexual activities to acquire an affirmative permission in a deepened engagement. This means the initiator is responsible for obtaining verbal consent from the other, while the other's responsibility is to express willingness or a change in desire. This policy also emphasises that, at the first indication of unwillingness, sexual advances were to stop without pressure or harassment. While Antioch College is lauded for advocating such a law, is it unacceptable that despite the claim of respecting women, a law that is enacted must be enforced. The next section will focus on Womanism.

2.6.3.2 Womanist Perspective

The need for a movement whose core interests are black women emerged due to the failure of Feminism to address encompassing concerns of all women. “The emergence of black feminism in the 1970s, an offshoot of white Feminism, has witnessed the response of many black women who have not readily embraced the concept of feminism for a variety of reasons, in spite of its legitimacy in academia and the desire of many to be a legitimate part of the academic community” (Hudson-Weems as cited in Hornsby Jr, 2008, p.398)

Hudson-Weems further adds that it is obvious that numerous women of African descent have naively adopted feminism simply due to the unavailability of viable alternative frameworks. However, many more are now re-evaluating their past realities to inform their current choices and affiliations. In the process, they are rejecting the premise of Feminism.

Alice Walker (as cited in Hayat, 2014), asserts that: “Although Feminism addresses and fights for gender equality, it rarely addressed equality and justice for black women and clearly excludes the interests of men” (p.2). Also, Womanism is committed to the survival and wholeness of all people, including men (Hayat, 2014). She further points out that Womanism is family-centred, while Feminism is female-centred.

Apart from Alice Walker, Nigerian author Ongenyemi (1996) also conceptualised Womanism and says it is an emerging model of female discourse emphasising motherhood. She talks about female resistance shifting from the idea of trouble, to consensus, compromise, complementarity and cooperation. She regards Womanism as tackling sexism, totalitarianism and ethnic prejudice. Ongenyemi (1985) considers Womanism as seeking to explore an equitable share of the world’s wealth and power between the races and sexes.

It is crucial to note that although the Womanist movement is not yet well established in South Africa, it resonates with the plight of Black Women in Africa and throughout the diaspora. For example, just like African American sisters, Black South African women have been victims of a triple oppression in terms of race, gender and socio-economic factors. Womanism has emerged as a suitable alternative to Feminism and captures the daily struggles of black women. According to Lorde (2015), Womanism focuses on black women or women of colour. This is facilitated by the failure of the Feminist movement to adequately address racially-specific issues and ignoring cultural relativism as some of the issues that affect Black women.

Although Womanism shares some core tenets with Feminism, it specifically considers female perspectives and narratives within the context of African and Diasporic culture, spirituality and literature (Lorde, 2015). The need for an alternative paradigm to address specific issues concerning African women is clearly articulated by Hudson-Weem (2000) who affirms that “women who are calling themselves Black Feminists need another word that describes what their concerns are” (p.15).

Black Feminism is not a concept that describes the plight of Black women. Hudson-Weem (2000:15) reiterates that “The white race has a woman problem because the women were oppressed. Black people have a man and woman problem because Black men are as oppressed as their women” (citing Dr. Julia Hare Quoted in Phillip, Black Issues in Higher Education, March 11, 1993). Such an alternative is Womanism.

Women in South Africa have an entire range of issues that can be addressed by employing a Womanist perspective. Of importance is that the typical South African woman is oppressed not simply because of her gender, but ostensibly because of her race and, for the majority, essentially because of the poverty in which she finds herself. Due to their poverty, black women are likely to be somewhat alienated from the middle-class aspect of the women's movement that perceives Feminism as an attack on men rather than on a system which thrives on inequality. Womanism is clearly a necessary

paradigm in addressing some of the typical problems, such as rape, which South African women face.

It is apparent that rape has reached crisis proportions in South Africa. Statistics provided by Africa Check (2015/2016) reveal that 42,596 rapes were reported to the South African Police Services (SAPS). This culture of rape is deeply embedded in gender norms that are scripted by South Africa's violent and oppressive past (Du Toit, 2005; Gqola, 2007; Moffett, 2006; Nuttall, 2004). Moffett (2006) goes on to argue that in the post-Apartheid context, rape is "fueled by justificatory narratives that are rooted in apartheid practices that legitimised violence by the dominant group against the disempowered" (p.129).

Rape in South Africa needs to be understood in the context of the historical colonial apartheid dispensation and the current socio-cultural context. Embedded in South Africa's violent culture is also the hegemonic masculinities which are patriarchal and transcend colour lines. These masculinities tend to normalise violence, particularly against women (Bennett, 2005; Gqola, 2007; Jewkes & Abrahams, 2002). The control of women and notions of male sexual entitlement features prominently in the male social fibre of South Africa (Jewkes & Abrahams, 2002).

Furthermore, Gqola (2007) terms it "a cult of masculinity" which continues to subject women into inferior roles, especially in their private lives (p.111). What seems to exacerbate this situation is the poverty and social inequality which most South African black women continue to endure (Jewkes & Abrahams, 2002). Feminists have also questioned the ways in which rape permeates social discourse from the law to the media. Numerous social institutions have not done much to dispel and dismantle a widely held notion of women as sexual objects. This mental script has to be challenged.

2.6.4 Sexual Script and Objectification Theory

The objectification of females in society is informed by sexual scripts that are deeply entrenched in many men's mindsets. For this reason, it is important to examine sexual

scripts in relation to the objectification phenomenon. On “Rape Stereotypes and Labelling”, Sarmiento (2011) suggests that most people have scripts about rape which claim that rape is a sudden violent attack by a stranger in a deserted place. The victim is expected to prove the attack and her attempts to actively resist it, effectively attributing blame on her.

Littleton & Axson (2003) observe that if a legal case lacks the above elements, it is less likely to succeed as a rape attack, even by the victims themselves. Koos & Oros (1982) differentiate between “acquaintance rapes” and “date rapes” concepts which mean sexual assault wherein the assailant is acquainted to the victim. They found that victims respond with silence, hence the phenomenon remains unrecognized for a long time. Subsequently, research studies attribute the silence to the women’s failure of perceiving the experience as rape (Koss, 2011).

Regarding victim blaming, Bieneck (2011) suggests that blame of the perpetrator tends to be lowest when victim-blaming is highest in rape scenarios that involve an acquaintance. Fritz (2009) notes that the construct of sexual violence in heterosexual partners is attributed to a problem of communication. She argues that consent or non-consent is inaccurately understood in sexual negotiations. Central to this debate is the issue of “No meaning No,” as opposed to myths such as “Women say ‘No’ when they mean ‘Yes’” (Grubb & Turner, 2012).

It is important to note that research focusing on external sexual-objectification experiences and negative outcomes is relatively limited (Kotze et al, (2007) and Moradi & Huang 2008). The exploration of this theory highlights the impact of rape on victims and flags up Burgess and Holstrom’s (1984) observations about the Rape Trauma Syndrome (RTS). Objectification Theory (Garcia, Earnshaw & Quinn, 2016) postulates that men sexually objectify women for their use. Sexual objectification occurs when a woman’s body parts are separated from her and viewed primarily as physical objects of male sexual desire (Bartky, 1990).

The Objectification Theory postulates that sexual objectification of females is likely to contribute to their mental health problems. Garcia, Earnshaw & Quinn (2016) state that self-objectification increases women's anxiety about physical appearance, reduces opportunities for peak motivational states, diminishes awareness of internal bodily sensations, heightens women's body shame and increases women's anxiety about their physical safety resulting in disordered eating, depression and sexual dysfunction. In supporting this tenet, Moradi and Huang (2008) also suggest that self-objectification is related to lower internal bodily awareness. It may lead to difficulties in task performance, increased body shame, appearance anxiety and both eating disorder and depressive symptoms. Additionally, the objectification theory provides an important framework for understanding and improving women's lives in a socio-cultural context that sexually objectifies and equates a women's worth to bodily appearance and sexual functions. Lustig (2012) adds that sexual objectification affects women's sexual health. She talks about sexual subjectivity as opposed to sexual objectivity. She asserts that women should be regarded as rightful subjects rather than objects in their sexuality. She believes this notion would help improve women's perceptions about their bodies and sexuality. Horne and Zimmer-Gembeck (2006) attest that this notion would give women the entitlement and self-efficacy in attaining sexual desire, pleasure and sexual self-preference.

According to Aubrey and Frisby (2011), interpersonal objectification is a type of sexual objectification wherein women experience sexually objectifying gazes and unwanted sexual advances from men. In the South African context, vernacular phrases such as; '*dodlo inkomo engadliwa ngabafazi*', essentially meaning; 'fat woman, a cow that is not eaten by women.' *Ukudliwa* (to be eaten), connotes sexual tones. Rightfully, Moradi and Subich (2003) link these experiences and utterances to psychological distress among women. Therefore, self-objectification invariably overlaps with self-awareness or self-consciousness (Lustig, 2012).

Secondly, self-objectification involves understanding and treating one's body as primarily existing for the use and pleasure by others (Garcia, Earnshaw & Quinn, 2016). For this study, it is crucial that we utilise this theory because it places emphasis on women's personality and acculturation. I believe it follows, therefore, that rape trauma may lead a

victim to develop a distorted image of self, thus leading to problems of self-objectification. For this reason, this study sought to contribute to the body of knowledge by identifying ways that African female survivors of rape can be aided in healing from the devastating effects of rape based on an African episteme.

2.7 Summary

Chapter 2 has dealt with an exploration of concepts and theories surrounding rape. In the exploration rape was firstly defined, thereafter, rape myths and sexual scripts as well as the nature of the rapist were explored. Different theories of rape, including the Feminist as well as the Womanist views were explored. In addition, the theory of Sexual Objectification was also discussed. The need for an African-centred paradigm that espouses African knowledge systems and worldview has been posited. Alternative paradigms, including *Ubuntu* and *Skh Djr* have been suggested. In addition, a need for African psychologists to be exposed or schooled in indigenous methodologies of treatment has been expressed. The next chapter is the theoretical framework and will discuss the epistemological and ontological aspects of this study.

Chapter 3

The African Worldview and Theoretical Framework

3.0. Introduction

This chapter presents the theoretical and philosophical framework which informs this study. The focus and argument that will be advanced in this chapter is the African worldview and an understanding of how Indigenous Knowledge Systems (IKS) can help define an African-centred Psychology. Adapting the African worldview means recognising and taking into consideration the local socio-cultural and spiritual dimensions that explain the African way of being, knowing and doing. The culture, values, practices, beliefs and ceremonies are thus embodied within this worldview.

In this study, the concept of Indigenous Knowledge Systems (IKS) refers to wholeness of knowledge, skills, attitudes, constructed meanings, lived experiences that were fashioned, consolidated and assimilated by Africans over centuries and passed to current generations. Dondolo (2005) states that a sum of these knowledge systems is possessed, practiced and protected by an indigenous people of the continent which distinguishes them from other cultural groupings in the world.

This chapter is divided into eight sections. The first section focuses on the historical background of the African Ethos and worldview and it will be followed by sections on the African epistemology, African value systems (axiology), African spirituality (ontology) and the African understanding of the cosmos (cosmology). Furthermore, an examination of the tenets of African philosophy, specifically *Ubuntu* and *Skh Djr* will be explored. In addition, Womanism will also be examined from an African perspective because of its central role in the African family and society. Finally, an emphasis on espousing African-centred counselling and healing including advocacy for African languages in both the learning and application of the discipline of psychology will be discussed. African languages carry abundant symbolism and representation of an African ethos on the sacred respect of one's life, others' rights and communal identity. The concepts stated

above, will be demonstrated in this chapter's discussion, to contribute to the ways in which Africans make sense of their lived reality (Carroll, 2010)

3.1. Historical Background

This study sought to develop African modalities of treatment for African rape survivors. It is therefore crucial that we use an African worldview in the development of these treatment modalities. According to Bakari (1997), evidence of African epistemology dates as far back as 4000 BCE (Before the Common Era). He goes on to suggest that, even though much of African history has been orally passed down to different generations, there have been scripts that bear testimony regarding clues of ancient African epistemology (Baraki, 1997).

These include three scripts of ancient Egypt known as hieroglyphic, hieratic and demotic. The second set of scripts that are called Meroitic and 3 Coptic scripts are from Nubia. The third set of scripts is known as Sobeian and Cieez from Ethiopia. The fourth set is from Liberia and are known as the Toma and Vai scripts and the fifth set comes from Cameroon, they are known as the Mum scripts. According to Baraki (1997), the Egyptians had established a spiritual system of law, order, truth and righteousness, dating as far back as 4000 BCE. This way of knowing placed great emphasis on ethics and morality, spirituality, symbolic imagery, self-awareness and tradition (African Epistemology, 2013). The presence of these scripts is evidence that Africans have always had their own inherent knowledge and value systems embedded within its civilizations (Adora – Hoppers, 2001). However, overtime these systems became subsumed by dominant Western philosophies which were deemed superior to IKS for long. Essentially, there was a deliberate subversion of the rich African knowledge base over centuries in favour of western theories which currently dominate psychology, even on this continent.

Although Afrocentric thinking is centuries old, it re-emerged in the 1960's through a pioneering effort by continental thinkers and African American philosophers. Some of the prominent African thinkers from throughout the diaspora include; Kwame Nkrumah, W. E.

B. Du Bois, Julius Nyerere, Steve Biko, Kwame Gyekye, Nana Asma'u, Kwasi Wiredu, Frantz Fanon, Achille Mbembe, Paulin J. Hountondji, to name but a few. Their quest was to devise a way of analysing information which was consistent with the African worldview. They wanted to understand whatever information was at their disposal from a 'black perspective' rather than from a 'white perspective'.

The re-emerging African worldview was prompted by the failure of western centred philosophy to fully explain African values and belief systems. In the 1970's philosophers like Asante started to advocate for an Afrocentric orientation to data (Monteiro-Ferreira, 2014). However, it was only around the 1980's that Afrocentrism as a philosophical and theoretical concept was finally embraced. This acceptance came after Asante had published his major works namely 'The Afrocentric Idea (1987), Afrocentricity (1988), and Kemet, Afrocentricity and Knowledge (1990).

Asante (2001) defines Afrocentricity as a method of thought and action wherein the centrality of African interests, values and perspectives predominate, and it is an exercise in knowledge and perspective. Following Asante's (2001) assertion, Afrocentric thinking can be regarded as critical thinking by Africans based on their experiences of reality. Peters (1959) cites Anyanwu who defines Afrocentric thinking as an exercise in which Africans of the past and present make of the world in which they live. Afrocentrism places African thought at the centre of knowledge for African people. Mkabela (2005) and Asante (2006) argue that, as a theory of change, Afrocentricity is opposed to theories and ideologies that tend to place Africans at the periphery of human thought and experience. They assert that Afrocentricity strives to restore Africans back to who they were as a people. Essentially, these authors are advocating for a formulation of evidence based psychological therapy that is undergirded by African knowledge systems.

It is important to note that their argument raises the question of African identity from an African centred orientation, the focus of which is collective and communal existence (Asante, 2009). Afrocentrism places emphasis on spiritual interconnectedness and a communal way of life (Adibo, 2017). For indigenous African people, spirituality forms an

integral part of ethnicity, African ancestry, the centrality of the community, harmony with nature, sociality of selfhood and interconnectedness (Baldwin, 1986; Baloyi, 2008; Bojuwoye, 2013; Mkhize, 2005 & Onyango, 2011). Bojuwoye (2013), Mukuka (2013) and Nkosi (2012) support this view by indicating that African societies view life in an interdependent and coexistent manner. It is interesting to note that even though the concept of being for Africans is embedded on morality, spirituality and communalism, some Africans' actions contradict the very essence of who they are.

This reality relates to the pandemic of rape in society. It is un-African to rape as it violates, not only the individual, but the very essence of Africanism. An act of sexual violation of an individual woman is an attack on her parents, family and her community hence it is regarded as a community offence in the African social structure. Therefore, a conscious move towards honouring the African axiology would bring about what the former South African President, Thabo Mbeki was advocating for during his tenure which is the moral regeneration of African people. The African culture has its own worldview. Mkhize (2004) defines a worldview as assumptions that diverse groups of people formulate to explain who they are in the world. He goes on to suggest that, these assumptions tend to provide a premise to follow in addressing life challenges collectively.

3.2. African Philosophical Worldview

Etuk (2002) asserts that a philosophy of life embodies what people think of themselves, their universe and how they organise their lives to ensure their survival. Ani (1980) defines a worldview as: "the way in which people make sense of life, their surrounding and of the universe" (p.4). In practical terms, "people have a worldview that is a product of their lived experience and that constitutes the lens through which the world of sense and perceptions is reduced to describe fact" (Jones 2014, p. 48)

In his Two Cradle Theory, Wobogo (1976) identifies respect for the ancestors, social collectivity and reference to spirituality as a basis of existence, in the African worldview. In the same vein, Grills (2006) states that in Africa, ancestors are viewed as part of daily living in so much that they are venerated. However, she suggests that this does not mean

that they are worshipped, but that they are rather honoured and respected. The latter statement is critical because the opponents of the African worldview, the Evangelical Churches often confuse or rather misguide people by suggesting that the African practice of venerating *balimo* (ancestors) is ancestral worship. It is crucial to note that respect and reverence to *moya* (spirit) takes precedence.

Grills (2006) supports this view by stating that to have spirit is to be embodied with life, a mind and soul. Grills (2006) further argues that human beings do not only possess spirit but in fact they are spirit. Nobles (1998) supports this assertion by stating that within the African view, the spirit represents the divine element which gives human beings their “beingness; the essence of which, becoming is an ongoing expression” (p.6). The preceding narrative from various authors provides evidence of deeply-rooted African indigenous knowledge that forms the basis of a unique continental philosophical worldview. It is this foundation which this study is harnessing as a unique African epistemology to advocate for, and to inform a structured and contextualised counselling modality.

More so, Afrocentric Philosophical framework is rooted in spirituality, communalism, cooperation, ethics and morality. According to Udefi (2014), African epistemology encompasses several components such as generational experiential knowledge, truth and rationality. These can be properly understood through African concepts as provided by African cultural experiences, folklores, proverbs and folk wisdom. These notions are constituent parts of an African worldview that will be presented here. They are not restricted to a specific African ethno-cultural group, but they reflect a basic historical consciousness and cultural unity of the Africans (Baloyi & Makobe-Rabothata, 2014). For that reason, the nature of an emerging epistemology is intended to underpin a universal African therapeutic methodology that can be contextualised for specific cultural groups on the continent.

Dixon (1971) argues that epistemology, axiology and logic are central tenets of any worldview. He states that the value orientation of continental Africans and those in the diaspora is based on the following; being, communalism and harmony with nature (Carroll, 2012). He further states that the fundamental difference between the African worldview

and the Euro-American worldview is that the African worldview is embedded on the relationship between the self and the other. This way of thinking is better captured in the Bantu Proverb – *umuntu ngu muntu ngabanye abantu. Motho ke motho ka batho ba bang* (Edwards Makunga, Thwala, & Nzima, 2006).

Thus far, several spiritual and cultural concepts and notions that constitute a pan-African worldview have been discussed. However, these component parts of the African worldview have not been hitherto, systematically harnessed as means in the production of a unique epistemology that seeks to develop authentic African therapeutic modalities for rape victims, hence this study.

3.2.1 African Epistemology

African epistemology has existed from time immemorial. Dixon (1976), describes epistemology as “the way in which one knows reality or phenomena; that is grounds or method of knowledge” (p.55), whilst Nichols (1976) points out that the African knowledge, which is the basis of African epistemology, is derived from symbolic imagery, rhythm and logic. Therefore, the inference from Nichols (1976) is that African epistemology relates to how a person organizes what they know. Several knowledge concepts which include *Ubuntu* and *Skh Djr* are recommended as they capture the essence of African knowledge and humanity at their core. These concepts can be adopted by psychologists in Africa and the diaspora. It is essential to explore these two concepts further to outline their nature and latent epistemological value in the development of African psychology.

3.2.1.1 Ubuntu

Ubuntu is an African philosophy and way of life that has gained recognition over the decades as an alternative to Western dominated ideologies (Ndubuisi, 2016; Munyadrazi, 2011; Maserumule, 2014; Van Dyk & Matoane, 2010; Wilson & Williams, 2013). Baloyi and Makobe- Rabothata (2014) assert that every culture is premised on a certain worldview.

Ulvestad (2012) regards *ubuntu* as a life guide and a worldview that is premised on African people's reality. Baloyi and Makobe-Rabothata (2014) suggest that orthodox Africans understand that their being in the world is a notion of interrelated systems which deal with life issues collectively and collaboratively. Khomba (2011) states that the *Ubuntu* philosophy is prevalent in almost all parts of the African continent and is also ingrained into all aspects of everyday life. *Ubuntu* as a philosophy is emphatic on group solidarity, holding as paramount brotherly and sisterly concern, cooperation and sharing.

Being uniquely African, *ubuntu* then should be considered as the main philosophy that guides the African way of life and needs to be applied in all facets of life. *Ubuntu*, as a way of being, should be adopted and adapted for its appeal and applicability in the world not just for Africans but for humanity. Ulvestad (2012) argues that *ubuntu* is the promotion of harmony, shared identity and well-being in the community. In addition, *Ubuntu* is evident through community structures that are intended to promote and restore harmony and well-being. Msengana (2006) states that *ubuntu* emphasises people's cultural heritage and explains how members of society relate to each other and the world in general. Consequently, *ubuntu* draws its inspiration from a cultural heritage.

The cultural background of *ubuntu* from an African indigenous perspective, therefore, provides the philosophy with a universal relevance and application. The *Ubuntu* philosophy does not promote individual existence. Instead, Ulvestad (2012) believes that it is imperative to consider interconnectedness under *ubuntu* as captured by the following statements; 'I am, because we are; and since we are, therefore I am' 'I am human because I belong,' 'People are people through other people'. Bishop Tutu describes *ubuntu* as; "the roof of the African worldview" (Tutu, 2010). *Ubuntu* is found in many African communities and in South Africa we have an idiom for it in all different vernacular languages. It espouses the essence of *ubuntu*. This idiom goes like this:

"umuntu ngu muntu ngabanye abantu" (isiZulu),

"Motho ke motho ka batho ba bangoe" (Sesotho).

Also, the Kikuyu in Kenya have a similar idiom:

“*Mundu ni Mundu ni undu wa andu*” (meaning; a human being is a person because of the other people).

Caring for others and expressing compassion are traits in all African cultures. Khomba (2011) observes that the main tenets of *Ubuntu* are an expression of compassion, reciprocity, dignity, humanity and mutuality in the interests of building and maintaining communities with justice and natural caring. As an alternative philosophy it is important that *ubuntu* gains recognition among all African people including intellectuals. This is because the African way of managing situations is embodied in togetherness and belonging in a community context. This means that issues are often sorted out with the assistance of others in the community. *Ubuntu* then becomes useful in the daily lives of people.

Gathogo (2008) views *ubuntu* as a best description of an African homogeneity. He argues that *ubuntu* represents religious and cultural diversities. This understanding explains that the concept of *ubuntu* developed over centuries from pre-literate, pre – scientific and pre – industrial African culture. Gathogo’s (2008) view is supported by Adibo (2017), who states that *ubuntu* is not a historical concept, meaning that it is not an invention as scholars such as Binsbergen (2001), argue. His flawed viewpoint is that *ubuntu* was intended to address the South African discourse on democracy and human rights.

However, Ramose (2003) connects *ubuntu* intrinsically with “African tree of knowledge”, which means that it has its roots in ancient Africa. He further suggests that “If ontology and epistemology are the basis of philosophy, then *ubuntu* makes African philosophy a long existing practice. Ulvestad (2012) emphasises that it is vital that African people continue observing important collective (*ubuntu*) ancient rites like healing and divination , to name a few, as these continue to be helpful to many people given present day challenges on the continent. These *ubuntu* based practices should be revived, mainstreamed and incorporated in modern therapies. As Msengana (2006) notes, *ubuntu* plays a creative role in rebuilding social relationships by fostering a spirit of harmony and reconciliation.

3.2.1.2. Skh Djr

The concept of *Skh Djr*, as an African philosophy, was first developed by Naim Akbar and further advanced by Nobles (2006). It refers to illumination, awakening or reinvigoration of a whole people. *Skh Djr* needs to be understood within the construct of 'pan-African humanness' where African humanity and its intellectual and cultural development have greater commonality and are a 'particular' state of being (Nobles, 2006). *Skh Djr* can be viewed as an entry point to the emerging African centred psychology that reflects indigenous knowledge systems and can be considered as an alternative to the western dominated knowledge philosophy that is advocated to the detriment of local knowledge systems.

Nobles et al (2016) defines *Skh Djr* as the process of understanding, examining and exploring the meanings, nature or functioning of being human for African people. *Skh Djr* can be achieved through conducting insightful searches, studying and mastering of the process of gaining knowledge of the human spirit. In addition, it also involves gaining in-depth knowledge of human experiences and phenomena (Nobles et al, 2016).

Nobles (2013); Piper-Mandy & Rowe (2010) suggest that like *ubuntu*, to fully know and understand *Skh Djr*, one must explore the African antecedent and comprehension of what it means to be human. *Skh Djr* then requires that one thinks deeply about African meanings and understandings about being human from an African perspective. Nobles, Baloyi & Sodi (2016) believe that this can be achieved through interrogating for example, the languages of African people which in turn allows an insight into the functioning of African people.

To fully appreciate *Skh Djr*, one needs to understand how meanings are constructed. Nobles et al (2016) suggest that an African reality is composed of three interrelated hierarchical worlds made up of the micro cosmos (the immediate perceptible world); the meso cosmos (the intermediate world and spirits) and the macro cosmos (the world beyond the senses – the realm of the divine, ancestors and spirits). Fu-Kiau (1993, 2001) describes the human spirit as a trifold, i.e. unfolding radiant spirit, which can be understood as referring to the before -life, the earth-life and the afterlife.

Piper-Mandy and Rowe (2010) further adds that “the human spirit thus passes from the before-life, through the cycles of belonging, being and becoming that constitute earth-life, into after-life” (p.14). Just like *ubuntu*, *Skh Djr* is a potential alternative knowledge system that can inform the practice of psychology from a purely African perspective. Nobles et al (2016) suggest that psychologists in Africa and the diaspora (USA, Brazil, Cuba, Haiti, England, Canada) need collaboration to critically examine assumptions and paradigms concerning an understanding and development of a culturally grounded discipline and practice of African/Black Psychology. Consequent to that, they should endorse the utilization of Black/African Psychology for analyses, treatment, and restoration of Black/African spirit wellness worldwide.

The thrust for a multi-cultural understanding and diversity in psychology must allow for and support the present multi-cultural world (Nobles et al, 2016; Byrd, 2017). In this way, Black psychology, Asian psychology, Hispanic psychology and other psychologies of the world must stand and evolve within their own integrity (Nobles, 2016).

3.2.2. The African Ontology

The central tenet to African Ontology is spirituality and since *Ubuntu* is a spiritual philosophy, the two are intrinsically linked. Mbiti (1969) argues that African epistemology emanates from African ontology and ultimately suggests that Africans had an idea of the Supreme Being long before missionaries arrived in Africa. According to Magesa (2014), several factors that still continue to give the impression that Africans had no belief system prior to colonization, are the following;

- African Religion has no written scripture. Judaism, Hinduism and Islam, in comparison, have their own written sources. Conversely, the African Religion is solely dependent on oral tradition, deeming it unequal to world religions. The lack of recognition of African Religion and the resistance to accepting African Religions is based on the refusal to scrutinize history. Judaism and Christianity also started as orally based religions. He laments that orality alone cannot disqualify a religious

system from qualitative greatness but rather existence of written scripture must be a criterion among many.

- Many African Independent Churches that emerged in contemporary times do not claim possession of a 'sacred book' as a tool to verify the authenticity of their faith. They regard their faith as "revealed", that is, they place greater emphasis on revelation through dreams, trances, prophecy and divination. They regard revelation as a continuing and ever-present aspect of religion. This means that their religion is much more heavily based on morals or ethics as opposed to doctrine. This view, further attests to the fact that the African Religion is deeply rooted in *taelo ea moya (spirit lead)*, which was outlined further in Chapter 2.
- African religion is not interested in aggressive proselytizing, a practice that religions have embarked on to convert recruits. These include violence and wars in some instances to convert non-believers, influence politics and cultures.

Magesa (2014) and Kung (1993) argue that the important criterion in verifying the authenticity of a religion is the understanding of the meaning of religion itself. Kung (1993) describes religion as: "a believing view of life, approach to life, way of life, and therefore a fundamental pattern embracing the individual and society, man and the world, through which a person sees and experiences, thinks and feels, acts and suffers, everything. It is a transcendently grounded and immanently operative system of coordinates by which man orients himself intellectually, emotionally and existentially" (p. 106-7). Magesa (2014), points out that African Religion fulfils these requirements and, therefore, the recognition of its status as a world religion should not be a concession but rather a reversal of a long-standing prejudice. Mbiti (1975), sums up the question on what religion is by stating that for Africans, religion is quite literally life and life is religion. Tempels (1959) attests to this view by arguing that true wisdom lies in ontological knowledge.

Equally, Udefi (2014) points out that Mbiti's (1970) assertion that Africans are reputedly religious has been highly discredited. Mbiti may have generalised his thinking but he was not far from the truth. Abounding anecdotal evidence shows that most African people

globally do reference their lived experience to the higher Being, namely *Molimo* (God) and some even refer to *balimo* (the living dead). If we look at amaZulu for instance, central to healing is *Umvelinqangi / Molimo* (Superior Being/ God), *amadlozi/ balimo* (the living dead, cited in Baloyi & Makobe, Rabothata, 2014 & Senokoane,2013), *imvelo/ tsa hlaho* (nature) and a connection to *ezomoya/ selimo* (spirit world) Ngubane, (1977). The same understanding is found in all African groupings in South Africa. The Basotho, also understand spirituality as composing of *Molimo* (God), *balimo* (the living dead), *tsa hlaho* (nature) and *tsa selimo* (the spirit world) (Mutwa, 1998). Reference to these stated assertions, is evident in this prayer:

THAPELO YA BASOTHO (Basotho Prayer)

Molimo hako nkutloe kea rapela, Molimo o mocha rapela oa khale, o re rapelle ho o moholo Jere, mojari oa li ts'ito tsa rona, se rapele 'na rapela Molimo, ke molingoana oang oa tumeloa masaona haese hao rapele oa saooa? Keha re etsa weli-welele Molimo o ukutloe kea rapela, Tlatlamachola senesa pula, tlatla metsi a etse keleli hoba ka metsi o ntlafatsa sechaba, tlatla metsi matlopotlopo keleli Thababoliba

Kokoana mats'a e chachametse maliba, bo Nketjoane ba phoole pina tsa mats'a bo Nketu ba hoeo. Hlabang tse ts'ou le nehe Balimo etle le bone ha Molimo o thaba, o thabela tsentla likhalapa. Molimo o atla li maroba, atla li robakiloe keng li robakiloe ke hore shoela, atla li ts'oeu ke hobopa bana ba masea ba batle limomothoana. Keha reetswa weli – welele MOLIMO o nkutloe kea rapela; matlane, joooo ekaba huoe kae? Hu uoe koana ha koti hase tlale, li tsohatsana bo nkhono tsa llela matlala, lia bona kang li shoela? Liabona ka paka tsa majoe a mabitla. Keha re etsa weli – welele Molimo o nkutloe kea rapela; heeeeeeee Lisema eeeeeeee! Mopheha khang le Molimo ke mang?

Central to the African ontology is *moya* (spirit). The following section will focus attention on African-based values (African axiology).

3.2.3. African Axiology

In general terms, Axiology is the branch of philosophy which examines social value and worth in humans (Zalta, 2008). In this study, a specific definition of axiology in relation to African psychology is a value-orientation that is applied to the relationships of humans to each other and nature (Parham, 2002). As stated earlier in this chapter, people of African descent derive their social value in their relationship with their forbearers, more specifically ancestors.

African axiology provides a value-orientation and a social lens by which Africans view, relate and learn current behaviours from their elders, living or dead. The enforcement or regulation of these values is collectively encouraged in society.

Thus, Axiology refers to the field of philosophy that deals with values in general. Graeber (2001) argues that values can be comprehended with emotion, as opposed to existence which is comprehended by intellect. Values in the African context should be construed in a generalised sense and should be included in all aspects of human activity. Idiung (2015) asserts that every human being raised in a society is likely to be infused with the culture of that society, whether knowingly or unknowingly. These values will underpin the worldview of the individual.

Udefi (2014) points to the existence of a dichotomy between the epistemic subject and the object within Western philosophy. He argues that this dichotomy is non-existent within the African social context. He suggests instead, interdependence, interpenetration of the self and the external world of the African person. According to Anyanwu (cited in Udefi, 2014), within the African culture there is no sharp distinction between subject and object. Rather, the self tends to be the centre of the world, hence every experience and reality is perceived to be personal. This thinking, he argues, stands in contrast to Westerners' view.

Mnyandu (as cited in Adibo, 2017) explains that African humanness is not a collection of positive qualities but rather the essence itself. This value, therefore, leads people to become humanized. In Sesotho it is said that they become *batho ba nang le botho*.

It is vitally important to state that within African humanity, individualism is non-existent. Eze (2005) asserts that *Ubuntu* is part of that value which enables humans to be responsible for the welfare of others. This value of collectiveness and communal welfare, as opposed to individuality, is the basis of African axiology. The notion of collectivity has its roots in African beliefs which define African values. For example, Basotho practice *letsema* (communal harvest). During harvest time, Basotho gather at the field of the harvesting person/family with the aim of helping them. This is an act of *Botho/Ubuntu* (humanity), which professes that *Motho ke motho ka batho ba bang* (I am because we are).

This collectivism is further captured in concepts such as *matsoho a hlatsoana* (one hand washes the other). Edwards et al (2006) capture this concept well by stating that “This practice is a spiritually-grounded community psychology that begins and ends in the community and ensures a form of humanism as expressed in the practice of ubuntu” (p.138).

It is important to emphasise that people who come to help in *Letsema*, for an example, are not paid but rather, as an act of gratitude, are given some of the harvest. These values are underpinned by the belief in the existence of powers of life in every community member and in all living things, which possess a life force.

Carroll (2012, p.2) points out that the distinction between African and European axiology is based upon an African value system that places the highest priorities upon interpersonal relationships and the collective group, while Europeans prioritises the individual. Furthermore, the African axiology prioritizes an interconnected and interrelated reality based upon non-material aspects of life, to make sense of the lived experiences. Conversely, the European worldview prioritizes the separation of social reality, only utilizing that which can be apprehended by the five senses to provide meaning of lived experiences.

Chalk (2006) states that due to a common origin, all creatures are connected and have a causal effect on each other. This includes people being connected to each other and attuned to nature with all its life forces, whether good or bad. The interconnectedness of

African people and nature forms the basis of their values. Chalk (2006) states “the interrelatedness of everything and the need of their regulation, is the basic underlying belief of African values and morals” (p.20). The rooting of African core beliefs in the role of ancestors and how it helps define the value system of African people. Graeber (2001) posits that there are material values and spiritual values. Material values refer to daily necessities of human life such as food, water and wood. Spiritual values refer to the faculties of intellect, emotion, truth, beauty and kindness. Of these two distinctions of value, axiology in our context is primarily understood to deal with spiritual values, which guide beliefs and attitudes.

It is important to point out that in the proper African context, the spiritual realm through, ancestor veneration, permeates all aspects of daily life. The community, as opposed to individual interest, defines the values of African people. Graeber (2006) considers values as a quality of an object that satisfies the desires of the subject. He further points out that when an object has a certain quality that satisfies the desires of the subject and which is recognized as such by the subject, then that superior quality of the object is called value.

For value to become actual, a process is needed in which the subject must recognise and appreciate the quality of the object as valuable (Graeber, 2006). In the African thought, African belief systems recognise *balimo*'s qualities which influence most aspects of their daily lives. (Senokoane, 2013 & Sitiloane, 2012). This attribute makes belief in *balimo* a vital component which determines the present and future of individuals and the community. When a person is facing challenges in their daily life, it is attributed to *balimo*'s unhappiness, and for this reason, a ritual must be performed to appease them. This illustrates *balimo*'s influence in people's personal life.

Therefore, it can be deduced that *balimo* are dominant in all aspects of African lives and inform the values they practice and hold dear. Chalks (2006,) points out that *balimo* are the moral police of African individuals, families, clans and societies. He further notes that even though they are dead, ancestors continue to influence life on earth. They are remembered, respected and revered because of their status as an intermediary between

the living and God. The next section will focus on how Africans understand the universe (African cosmology).

3.2.4. African Cosmology

Africa has had its own worldview since time immemorial which has outlined and guided the way people live and interact with the world around them and each other. In defining an African cosmology, there is need to consider the way Africans perceive, conceive and contemplate their universe (Kanu 2013, p.533). This includes examining how their belief systems govern the laws through which they see reality which, in turn, affects their value systems and attitudinal orientation. It is the Africans' search for meaning of life that governs their outlook and determines their cosmology.

Cosmologies are influenced by people's view of themselves in relation to their origin and functioning. Metuh (1997) suggests that cosmology looks at the fundamental questions about the place and relationship of people with the universe, which cannot be done outside the ambience of supernatural powers. Therefore, religion is the best medium that facilitates relations between people and the supernatural. Kanu (2013) is of the view that an underlying principle of cosmology is based on religion, which provides purpose and direction to people's lives and enables them to act purposefully and exercise control over their environment. Mbiti (1969) contributed to African cosmology by presenting African religion and beliefs as an ontological phenomenon that provides vital understanding to the African worldview and philosophy.

Dixon (1976; 2006), argues that axiology, epistemology and logic are central aspects of any worldview. He proposes that the value orientation of continental and diaspora Africans is based upon 'being, felt – time, communalism and harmony with nature' (p.115). Dixon (1976; 2006), further states that the fundamental difference between the African and Euro-centric worldviews is the self in relation to the other; instead of the 'me, myself and I'.

Nichols (1986) concurs by stating that African axiology elevates person-centeredness above object or acquisition-centeredness. He then describes logic as a process by which a person organises their knowledge. Additionally, Nobles (2013) advanced the discussion to include ontology and cosmology. An African cosmology should be considered as the link holding the African value system, philosophy of life, social conduct, morality, folklore, myths, rites, rituals, norms, rules, ideas, cognitive mapping and theologies together. An African cosmology, then, is considered from common principles that bind African people together. However, Kanu (2013) cautions that the idea of an African worldview should be understood in a general and restricted sense because an African worldview is not shared by all Africans in its totality. Rather, some central features of the common elements among African worldviews should inform such an understanding.

Kanu's assertion is sensible because, even within Africans in South Africa, there are deviations in their traditional practices. Many African traditions have a duality in everyday life that has a spiritual and physical manifestation. Washington (2010) states that in an African universe, there is a physical and spiritual dimension whose ontologies are neither separate nor contradictory. In the spirit realm, God represents the Chief Being sitting at the apex of power. In the physical world, humans dominate and occupy a principal place in God's creation. Washington (2010) points out that human beings' primacy in the African universe is due to the main place they occupy.

Mutwa (1989) and Kanu (2013) posit that the African universe consists of three levels, namely the sky, the earth and the underworld. God resides in the sky while on earth human, animals, natural resources and some observable realities abide. The ancestors and bad spirits live below the sky and earth levels, in the underworld, but they do not co-exist. This African cosmology represents a unified reality wherein there is constant interaction between the spiritual and physical worlds. Berglund (1976); Ngubane (1977), Gumede (1990) and Kanu (2013) suggest that these two worlds instill greater sacred sense in African people because they always see and feel the presence of the Supreme Being, divinations and ancestors.

The sacred then becomes visible in everything that is done and becomes evident in Africans' social life, politics, business and the law. Therefore, when laws are broken, it is settled among humans and the divine are also appeased through rituals and sacrifices. Despite being different entities, the spiritual and physical realms in the African cosmology are in constant interaction.

In this cosmology, God is a personal Being with whom one enters communion and communicates. Additionally, powers or life forces are endowed by God in every creature. God is approachable in all occasions of life. In the spiritual realm there are spirits. From an African epistemological paradigm, death does not imply the end for humans. After death, the soul returns to the Creator and the 'living' dead. The afterlife of African people is a life of continuing relationship with the living and the dead. Life in this African cosmos is cyclical where there is birth, death and rebirth. Chalk (2006) asserts that certain rites of passage from birth to death that Africans observe infuse the life force into the individual, which keeps him or her connected with the ancestors.

For Africans, the sole purpose of life is to foster life through procreation. Attitudes and actions that oppose this life force eventually destroy life itself and are considered immoral. Divination, soothsaying, and herbalism are meant to restore life. Ancestors play a prominent role in this cosmology. They are, however, not worshipped but honoured. Senokoane (2013) states that the honour given to ancestors is anchored in reciprocity and reincarnation. Having been honoured, the ancestors are expected to re-incarnate and reward the living members.

According to Kanu (2013), in the African cosmology a person stands at the centre and is more central than God. This view is in line with Mbiti's (1969) argument that a person is at the very centre of existence and African people see everything else in relation to this central position of person. Methu (1991) concurs with Mbiti (1969) and Kanu (2013) and he asserts that: "everything else in an African worldview seems to get its bearing from the position, meaning and end of man. Hence the idea of God, divination, ancestors, rituals, sacrifices etc., are only useful to the extent that they serve the needs of man" (p. 109).

In the African cosmology, there is a sense of community wherein all the inhabitants exist for each other. A Setswana proverb says: “*Motho ga iphetse*”, i.e. no being exists for self, but exists because others exist (a similar principle that guides *ubuntu*). At the centre of this African cosmology is the human being as well as the preservation and enhancement of his/her life being of prime value.

The divine elements exist to preserve life. People relate with these divine elements to preserve their life as well. Therefore, in the African cosmology, power is sought enabling one to achieve the purpose of being human by preserving life, having good relations with other people, the ancestral and/ other spirits, and with God (Chalk, 2006; Edwards et al 2006).

The concept of rape is foreign in African culture because African axiology, ontology and cosmology, dictate that men ought to know and uphold their value and worth, part of which is to protect women and children. When a man rapes, he has not only violated a woman, but he has violated a sacred relationship in the physical and spiritual realms, which is also a direct offence to the Supreme Being. The rapist’s behaviour is an act of disregard for the dignity of an individual, it encroaches upon *ubuntu* and it infringes the centrality of women in the African community.

Suda (1996) regards the violation of women as an issue of moral delocalisation, negative social change and unfiltered adaptation of modernisation in Africa. The advent of rape has re-defined the role of women who are launching social crusades to counteract an assault on the moral character of African societies. For these reasons, it is crucial that the African woman’s voice is raised, hence the following section will focus on the African woman’s perspective.

3.3. Womanism from an African Perspective

Women’s rights are a crucial aspect of human rights. This section will focus on the African/Black women’s plight as it relates to rape. For quite a while, the women’s plight has been championed by the Feminist movement. Recently, however, an exclusive African woman’s voice seeking to articulate its own struggle has emerged. According to

Nayak (2013) feminism requires the acknowledgement that all women share some commonalities, regardless of their differences. These commonalities may include gender discrimination or oppression in a patriarchal system.

Feminism recognises that women all over the world are more likely to experience poverty, oppression, domestic violence or rape. There is currently a global awakening and recognition of women's integral position in relation to the continuation and assertion of culture, which has a bearing on their axiology and cosmology. Nayak (2013) posits that this disjuncture is not in line with the inferior role that women are ascribed to in most cultures. Despite this prominent cultural role ascribed to women, it appears their rights are affected by the patriarchal systems that are in many cultures. At face value, the feminist movement appears to have the interests of all women at its core; black women find themselves in a unique position.

They are discriminated against first for being black, then further subjugated to acts of patriarchy from their fellow black men. The Feminist movement has not adequately addressed this double discrimination. The failure of Feminism to address issues that are specific to black women in general, has led to the need for an alternative paradigm that takes interest to African women issues and struggles. Blackmon (2008) quotes Ama Ata Aidoo, African novelist and critic who vehemently rejected feminism's utility in the Black female community: "*Feminism. You know how we feel about that embarrassing Western philosophy? The destroyer of homes. Imported mainly from America to ruin nice African women*" (Aidoo, 1986).

Womanism, as a movement, emerged over two fronts – one led by Alice Walker in the USA that advocated for the interests of female Afro-Americans, and the other by Nigerian author Ogunyemi in 1985 who arrived at the term independently during her work as a literary critic. According to Collins (2001), Walker offers two meanings to womanism. On the one hand, she sees womanism as being rooted in black women's concrete history in racial and gender oppression. On another hand, she considers womanism to be "black women's experience in opposition to those of white women" (p.10). The latter meaning of womanism sees it as different and superior to feminism, especially because black women

continue to experience double oppression in the hands of society and their fellow black men.

Blackmon (2008) correctly identifies Walker's definition of womanism considering women of colour and black feminists who share a love with other women sexually and/or non-sexually and who prefer women's culture, emotional flexibility, and strength, as well as committing themselves to the survival and wholeness of an entire people, male and female. Collins (2010) argues that Womanism offers a distance from the 'enemy' -white people in general-and white women, yet still raises the issue of gender.

While Walker concentrates on the struggles of the black Afro-American woman, Ogunyemi's view is that black Womanism celebrates black roots, the ideals of a black life, while giving a balance as a presentation of womanhood (Ogunyemi, 1985). The aim of Womanism is the dynamism of wholeness and self-healing of black people. For Oduyoye (2001) and Ogunyemi (1985), the gender question can be dealt with only in the context of issues such as racial and social standing that are relevant to African women.

It should be noted here that Womanism does not only deal with issues that affect African women, but that it incorporates all women and black men. Kabo (2016) states that Womanism acknowledges the role of black men in helping to transform colonised black people from mere national "subjects" to political 'objects'. Womanism, in this regard, incorporates the well-being of men who are also victims of the world power structure that subjugates black people (Frada, 2014; Kabo, 2016).

The Womanist movement is gaining ground as an alternatively appropriate force to address issues that affect black women globally. Masenya (1995) has analysed the situation of a black woman in South Africa and differentiates black women's struggles from white Feminism. She prefers calling black women in liberation issues Womanists rather than Feminists. Kabo (2016) also contextualises the situation of women subjugation in a South African setting and argues that the women struggle to challenge the patriarchal culture of subordination is still very relevant today. Some scholars have argued against the concept of power and authoritarianism, where a social structure in

which some people are regarded as having the right to exercise control over the lives of others by the position that they may hold within the social structure (Kee, Althaus-Reid and Petrolla 2008; Kabo 2016). Womanism as a movement can thus represent the interests of all women who face discrimination.

Womanism as a philosophy and intellectual movement is, however, facing challenges of recognition and use. Kabo (2016) succinctly outlines one of the major challenges facing the movement by suggesting that black women and men intellectuals engage more with their white colleagues than with each other. This is further compounded by the fact that a shortage of black intellectuals, advocates and activists as well as the rarity of black female protagonists, in particular, works against the necessary dialogue that can help advance this philosophy.

Another critique that has been advanced towards Womanism is its failure to address sexuality. Coleman (2006) is especially critical of the movement as she envisages that Walker was supportive of female sexuality, particularly lesbianism. To Coleman (2006, p.85), Womanist religious scholars have done very little to address the theological, spiritual, and religious experiences of black lesbians. This has a bearing on this study where incidents of corrective rape against lesbians have been widely reported with very little reaction from female structures in the country, in general, and leading women intellectuals and activists, in particular.

While up to this far this study has not made mention of “corrective rape”, it is important to raise it as a matter of concern because rape, whatever the motivation, still constitutes rape. Therefore, for African clinicians, the intervention for African female survivors of rape should not be swayed by their sexual orientation such as lesbianism, an issue which is still widely regarded as “unAfrican”. Although rape is a physical act of subjugation, the core of it is a socio-psychological matter for both the perpetrator and the victim. It affects individual and societal psyches, the effects of which must be viewed, analysed and mediated through the contextual lens of the African setting. The following section will focus on how African psychologists can and should incorporate the African-centred understanding of the ‘essence of being’, into our university curriculum to promote as well as to prepare future psychologists to understand and contextualise their clients’ needs.

3.4. Espousing an African Psychology

The previous sections have discussed what African epistemology, ontology, axiology and cosmology entail. These African worldviews need to be incorporated into academic disciplines, given that there is a push to decolonise and Africanise the curriculum in African universities.

Nwoye (2015) argues that for the past half century, the formal study of psychology in African universities has been usurped and over-determined by Western psychology. In the development of an African psychology, the concept of spiritual wholeness (*umoya*) can be utilised in maintaining a sense of being for African people. A paradigm shift is needed that will result in the psychology that is appropriate for African people, as well as embrace African tenets and ways of thinking. As discussed earlier, African people are guided by spirituality. The researcher believes that this can help inform their way of dealing with psychological issues. Washington (2010) states that African psychology is grounded in an African psycho-spiritual notion of being. He adds that the spirit permeates, affects and impacts all living things and its divine element resides in all things.

African psychology should ultimately be concerned with understanding the system of humanness, the features of human functioning and the restoration of normal/natural roots to human development (Rowe 1995). As Nwoye (2015) argues, there has evolved a deep need for corrective counter discourses aimed at interrogating the highly partial and self-serving negative image of Africa in western scholarship. The desire for an African centred psychology arises from the fact that the psychological needs of Africans and people of African descent may not be fully covered by western psychology (Ebede-Ndi, 2016). Hilliard (1997) argues that there is something fundamentally wrong with psychology and psychological analysis that makes African people strangers to themselves, alien to their culture, oblivious to their condition and makes them less than human to their oppressor.

Based on the above argument, the western leanings of mainstream psychology need to be re-examined if the interest of black/African people are to be better served. Myers and Speight (2010) argue that psychology has been problematized to an extent that its

knowledge products appear to be serving the narrow interests of the dominant group rather than the collective good within society.

There is need for psychology to serve the interests of specific people based on their own worldview. Such a psychology needs to acknowledge that people of African descent are diverse and geographically scattered; hence it needs to ground itself in the wisdom and traditions of deep, black thought, incorporating cultural realities and lived experiences, such as the scourge of rape in South Africa.

Parham (2009) suggests that an African centred psychology will not be homogenous. However, unity exists amidst the different segments of African people based on commonalities across traditions and cultures. The concepts of Ubuntu and Skh Djr are such commonalities. Central to these commonalities is the concept of humanness. Washington (2010) posits that African psychology should ultimately be concerned with understanding the system of humaneness, the feeling of human functioning and the restoration of natural/normal development.

Myers and Speight (2010) suggest that African psychology is uniquely placed, based on its worldview, to examine what is human and use it as a springboard to advance the discipline. Nobles et al (2016) on the other hand suggest that it is only when we can think deeply about what it means to be a human being (*motho*) and subsequently how that meaning shapes our responses and reaction to the problems of education, socialisation and conditions of life, will we then learn anything of value.

African psychology is thus able to provide a lens through which there can be an interpretation of the world around us, the capacity to ask the right questions and to test the truth of the answers received based on realities experienced uniquely from an African perspective (Myers and Speight 2010). African/black psychologists need to start prioritising the development of an African centred psychology that considers the interest of African values and dispositions. Myers and Speight (2010) assert that human beings and their sociocultural bearings are inseparable. This should apply to all disciplines that have a bearing to the psychological well-being of African people.

The suggested African psychology needs to base itself on core African principles which have been practiced over time. Nwoye (2015) suggests that an African psychology should base its focus on Africans' view of reality. This reality should be one that recognises that nothing in life is absolute.

The current paradigm of psychology and its treatment modalities in Africa, is an import which has been adopted and practiced in its European design. It is a misfit and an unsuitable tool that does not consider the uniquely African social, economic, spiritual and emotional fabric of people groups on the continent. Adibo (2017) supports this thesis' assertion by stating that there are no people who are culturally neutral and for this reason, providing Africans a Euro-cultured psychological treatment is akin to fetching water with a stick, instead of using a suitable tool. Adibo (2017) confirms that Africans are least likely to benefit from counselling techniques that are alien to their worldview and philosophies.

As enshrined in many African traditions and cultures, this emergent psychology should recognise the interdependence between the individual and the community, as seen through African lenses such as Ubuntu where a human is human through other humans. Nwoye (2015) however cautions that this African psychology should not only be concerned with studying and understanding the psychology of past Africans and their worlds but should also deal with the psychology of contemporary Africans and their complicated multi-cultural and multi-racial identities under which they work and live.

He further suggests that an African psychology should equally embrace the psychologies of white identity in contemporary Africa in their legitimate worries, focus, aspirations, beliefs, strengths etc. It should also equally consider the concerns of the European and Indian Africans that have settled in those continents as co-heirs with black African and American populations. In this way, African psychology will not be viewed as a psychology of polarisation, but rather as one aiming to provide the achievement of a human synthesis in a race-less society.

3.4.1. The Relevance of African Languages

It is also of paramount importance that African psychology, in its practice, must incorporate African languages to be relevant and contextual to the population that we serve. Baloyi and Ramose (2016) support this view by stating that indigenous African languages are an indispensable resource in the understanding of concepts that are used in both psychology and psychotherapy. Furthermore, Mkhize and Ndimande-Hlongwa (2014) hold the view that “African languages and Indigenous Knowledge Systems (IKS) are indispensable to the transformation of higher education landscape” (p.14).

It is, therefore, logical and reasonable to expect that diversifying the medium of education in the institutions of higher learning would be a crucial step in the transformation of our education system so that it could embrace our multicultural country. This means that introducing as well as encouraging scholars, in this case, those studying psychology, to learn the discipline by incorporating African centred knowledge and African languages would not only equip them but will also contribute to inculcating a relevant healing system (Zezeza 2006; Teffo 2008; Khoza 2014) .

Noble et al (2016), allude to the fact that, one of the contestable issues for Western psychology is the view that African languages are not adequately developed to be used in the application of science. As part of their argument, they cite that trying to reason things out is certainly problematic in that, language is a bearer of a specific epistemological paradigm. These authors further suggest that rendering the ‘African’ experience in a language that is foreign would be confusing the issue at hand, and thus resulting in irrelevant or inappropriate manner to the African discourse. For example, the issue of epistemic justice meaning the respect and upholding of the African episteme as being equally genuine in the human family of knowledge.

This type of justice does recognise the fact that embedded in every language is the logic of understanding the human roles, relationships, and responsibilities. According to Mthimkhulu (2002), the richness of African languages lies in their use of metaphors, *maele* (proverbs), *lilotho* (idioms) and *lithoko* (praise poems). These metaphors are

effective in breaking barriers, for example during trauma counselling for victims of rape. For instance, instead of using the word 'vagina', especially in reference to mature African women, one may use the word: *bofumahali ba hao and liphate/thobalano* to refer to sex.

Fukiau (2012) acknowledge that 'illuminating' the human spirit can be found in the language of the Bantu-Kongo. He cites that when members of the community violate the sacredness of their *Kingongo* (Inner Divine Presence), a condition called *Sumunu* happens. This condition comes about because of breaking taboos, cultural precepts as well as ancestral traditions. He further alludes to the fact that any human relations, especially those that demean or dehumanize by violating the sacred inner self results in *Sumunu*, which then transitions into a condition called *Kizungu Zongu* (tornadoes of the mind) which he compares to the defilement of the human spirit. What Fukiau (2012) is describing seems like what the act of rape does to the rape victims. As was mentioned in the rape chapter, *peto* (rape) is tantamount to *ho ntsha moya nameng* (to extracting one's spirit from their being). A detailed exposition of *moya* is outlined in chapter 2.

One of the symptoms that tend to be experienced by rape trauma survivors is called Dissociative Experience, and the one that is consistent in the description to *Kizungu Zongu* is known as 'intrusive recalls' (*likhopolo tse ferekanyang kapa mehopollo e lubang maikutlo*). These feelings tend to leave the rape survivor feeling disconnected and inferior. In addition, Nobles (2015) notion of *Skh Djr* recommends that the language and logic of African people be interrogated to gain an understanding on how contemporary Africans function. Therefore, the importance of language is fundamental in that embedded in it, is the language of traditional philosophy from which ancient words and phrases, as well as proverbs and idioms are derived. Therefore, it is the firm view of this thesis that losing the essence of the wealth of African languages would be tantamount to undergoing psychological genocide or what Mazrui (1978) termed "Cultural Schizophrenia".

3.5 Summary

This chapter has provided the theoretical framework that underpins this study. It has provided a historical background of African Knowledge Systems as a basis upon which

treatment of rape victims can be advanced. The African worldview, which is a philosophical exposition of the lived experiences of African people, has also been outlined. This worldview has been discussed based on Africans deep held custom of using symbolic imagery and rhythm. The African epistemology based on Ubuntu and Skh Djr has also been posited. African ontology that uses local belief systems has also been discussed. The axiology of African people as a framework for understanding the need for an African Psychology has also been presented by examining African value systems where the self tends to be the centre of the world and every reality and experience as being personal. An African cosmology has also been discussed based on African beliefs and cultural systems. Womanism from an African perspective, and as a basis for understanding the unique challenges that African women face has been examined. Finally, the need for an African psychology that will cater and speak to African people has been suggested. The next chapter provides the methodology that will guide this study.

Chapter 4

Methodology Using an African-Centered Approach

4.1 Introduction

This chapter discusses the research methodology, paradigm, and design that were employed in carrying out this study. It contextualizes the study within Indigenous Knowledge Systems (IKS), with a specific emphasis on an African centered methodological approach. The *Ubuntu* philosophy and its underlying assumptions that are shared by diverse African groups in developing knowledge are discussed. The research design, sample population and size, participants, selection techniques and data collection methods are also presented. The data collection and analysis processes are described, followed by ethical considerations that guided the study. This is followed by the introduction and discussion of the new “People’s Involvement Research” (PIR) methodology that was conceptualised during the course of study, more specifically in the data collection phase.

4.2 Research Design

This study employs qualitative research which, according to Creswell (2002) and Denzin & Lincoln (1994), is a research methodology that purposefully explores and interprets concepts and social phenomena in their natural contexts. As opposed to reducing African respondents’ lived experiences to numerical codes, percentages and statistics, as it is the case in quantitative research. On the other hand, qualitative conceptions and analysis solicit and explore Africans’ socio-spiritual lived realities. Qualitative research that is practiced from an African lens is regarded by Naamwintome (2015) as socio-spiritual knowledge that is heterogeneous and complex which deals with higher order discourses. According to Asante (1987 and 1992), a qualitative method is compatible with African knowledge systems (IKS) because it captures African-specific meanings and nuances. Furthermore, Erlingsson & Brysiewicz (2017) assert that qualitative research bears an

important African relevance because it is useful in deepening the understanding of the human experience, which in the African setting, goes beyond the physical and the psychological, to include the spiritual dimensions.

This particular study has adopted an indigenous exploratory research paradigm because it centers on people and the participants' particular lived experiences and allows for a deeper understanding of human lives from their personal perspectives (Adibo, 2017; Mouton & Montijo, 2017). Moreover, qualitative research has several integral components which makes it ideal and compatible to exploring Africans and their lived experiences. It is naturalistic in its application as it allows for participants to be studied in their natural settings (Balester, 1993). Balester (1993) further asserts that the researcher's initial hypotheses and theories can be altered continuously as participants reveal new but related concepts. Contrary to quantitative methodology which studies people's reality through numerical data that is analysed mathematically, thereby removing them from their reality (Creswell, 1994), this study uses qualitative methodology that places emphasis on the context and environment in which the studied population lives (Creswell, 2007) and of a community that is under observation (Patton, 1980).

Qualitative research embraces a holistic perspective because it assumes that almost every action, in an African community concerning its lived experiences, is solely located within an Africa community itself (Bopape, 2019). Qualitative research allows for an inquiry process to go back to the roots of knowing that is derived from elders and forebears, thereby representing epistemological underpinnings of indigenous knowledge (Kovach, 2010). More importantly as Moen (2006) points out, indigenous methodologies are compatible with qualitative research and consistent with narrative and dialogic interactions which, in turn, are attuned to an African-centered research philosophy.

The choice of integrating qualitative research with indigenous methods proved to be appropriate because this study relied substantially on a narrative format and also sought to access intangible knowledge and data that would otherwise be inaccessible to a quantitative methodology (Denzin et al., 2008). A research approach of placing

respondents in a central role of sharing knowledge through a dialogue and narrative is typically Afrocentric (Asante, 2009). In this study, the qualitative approach has permitted traditional healers and African rape survivors to operate as conduits of previously unavailable spiritual knowledge. The African centeredness of this chosen methodology approach was the most appropriate choice for this study.

4.3 African-Centered Research Philosophy

An extensive review of literature reveals that European-centered research methodologies continue to dominate most aspects of academic research worldwide (Denzin et al., 2008; Morgensen, 2012; Smith, 1999; Wilson, 2001). This is despite their irrelevance, ineffectiveness, misrepresentation and distortion tendencies when applied to indigenous communities. Chilisa (2005: p.8) succinctly states that, “arguably, the whole idea of research belongs to the Western paradigm, hence some Africanness has to be sacrificed in the process of carrying out research within an African context”.

Wilson (2001) is of the view that scholars must mount a concerted campaign to debunk current prevalent research myth which states that, indigenous research can only be legitimate and real knowledge when it is crafted within a Western framework. In support of this view, Smith (1999) in her book: *‘Decolonising Methodologies: Research and Indigenous Peoples’*, eloquently deconstructed the underlying assumptions in Western methodologies which malign any indigenous knowledge traditions as unscientific. She succeeded in demonstrating how indigenous methodologies are scientifically viable in conducting research among indigenous people.

Smith’s (1999) assertions about the indigenous research methodologies have found resonance in the African continent and throughout the diaspora academic community. The African knowledge development process and philosophy are progressively assuming a central role in facilitating and advancing African scholarship. There has been a return, in recent times, to African indigenous foundations in academia by numerous authors such as Baloyi and Ramose (2016), Baloyi, (2020a), Baloyi, (2020b), Chilisa (2012), Matoane

(2012), Mkhize (2004, 2014), Nobles (2016), Nwoye (2015, 2017), Ramose (2016), Ramose & Baloyi (2020), Segalo (2019), Nobles, Baloyi & Sodi (2016) among African academics and researchers. The return of African philosophy into continental research by community-conscious academics and researchers is intended to transform the colonised knowledge that is pervasive in academia (Odora-Hoppers, 2002). Odora-Hoppers argues that the main aim of restoring African philosophy in knowledge development is to inform research such as the current study which otherwise, would have been subjected to “epistemological disenfranchisement by the combination of colonial and apartheid practices buttressed by the attitudes, ethos and practices of the scientific community” (p. 5). However, the advancement of African scholarship has not gone unchallenged by a remnant of Western apologists whose criticisms still reverberates in the epistemological debates (Osman, 2010).

Progler (1999) observed that the project of Western intellectual and knowledge domination by some remnants continues to prosper because current systems of academic knowledge production and dissemination in Africa is still subjected to Western supremacy. On this basis, questions have arisen on the validity of Western research paradigms that encompasses IKS. Critics of IKS scholars and theorists such as Creswell (1998), Horsthemke (2004), Nel (2008) and Selami (1999) describe the African scholars’ work as vague and not constituting proper epistemology. This criticism, therefore, raises a concern about whose worldview should Africans base their epistemology on. All people, irrespective of where they are in the world, have their own unique and valid epistemologies (Keeney, 1979). No epistemology is superior to the other. The above criticism is therefore not based on sound epistemological, methodological, intellectual, logical and ethical basis.

The concern raised above made it imperative that this study aligns itself with indigenous research knowledge system and methodologies. Thus, an Indigenous African methodology called People’s Involvement Research (PIR) was developed in this study for application, as a method of inquiry to conceptualise specific African modalities of treating African female rape survivors. A detailed discussion of the proposed indigenous

methodology is introduced later in this chapter. Furthermore, the raging debate on the decolonization of knowledge in South Africa and the need for an African based episteme in knowledge creation, makes it imperative for this study to adopt a methodology that is suitable for the context of an African socio-cultural-spiritual setting. This is in line with calls made by scholars of African psychology and indigenous methodologies, who include among others; Baloyi (2020), Karenga (2000), Mazrui, (1978), Mkhize (2014), Noble (2016), Ntuli (1999), Nwoye (2017), Nyerere (1967), Ramose (2016), Ramose & Baloyi (2020), Segalo (2019), Sodi et al (2016).

Mkhabela (2005) states that an African-centered methodology is unique and most appropriate to the social structure and cultural values of African indigenous communities. This method of inquiry is, therefore, more suitable in explaining findings in an African context. African spirituality is an aspect that would not be sufficiently explained if Western-centric methodologies were to be used because it deliberately considers the intangible African heritage as unworthy of research (Manetsi, 2007). Essentially, African spiritual knowledge that exists in realms which are inaccessible to Western science is considered non-objective and therefore, does not qualify as researchable knowledge. Chilisa (2012), Denzin et al. (2008), Kovach (2009), Lambert (2014), support this view by stating that there is a need to have methodologies that draw from philosophical and theoretical assumptions of a post-colonial indigenous paradigm, which will accentuate the unique contributions of indigenous knowledge. Okere et al. (2005) reasonably argues that indigenous knowledge is embedded in local cultural originality and it is, at all relevant times, context based. Additionally, Chilisa (2018) notes that such an undertaking is most likely to be premised and influenced by the cultural, political and historical contexts.

4.4 The African Indigenous Knowledge and Research Methodologies

There has been a debate on whether social science methodologies of Western origin are necessarily universal (Bigden & Biklen, 1992; Mazrui, Schweick & Young, 1997 and Smith, 1992). This universalism assertion is both erroneous and dubious because proponents of Western methodologies and science have rejected approaches that do not

conform to their criteria of what constitutes 'scientific knowledge', particularly if non-Western notions include conceptions of spiritual subjective experiences of Africans. Therefore, Western methodologies are not universal. Chilisa (2012) coined the term 'the captive mind' in reference to an uncritical imitation of Western research by intellectuals of African descent within academia throughout the African and diaspora world.

Fanon (1962) and Wa Thiongo (1986) argue that this uncritical acceptance of the Western methods needs to be curtailed by decolonising the African mind. Decolonising the mind, in the context of this study, means to use local indigenous methods and languages to investigate rape culture and phenomenon. In this study, decolonizing the mind of society and challenging the rape myths is a necessary national paradigm shift that is essential to transform societal perceptions and to curtail the perpetuation of the current scourge.

Adopting context and culturally relevant methods is most likely to resonate with the African socio-political reality. The dominance of Western research approaches is challenged because they do not capture the very essence of indigenous peoples' being. Smith (1992) argues that indigenous research approaches, Afrocentrism must be at the centre of a significant struggle against Western dominance in knowledge production, acquisition, and dissemination.

In this study, the research is immersed in a process supported by Carroll's (2012), idea that indigenous research must reflect the interdependence, co-existence and interconnectedness of the African reality. The indigenous research process should capture and reflect the spiritual and material nature of African reality. For example, Baloyi & Ramose (2016) state that the three-dimensional understanding of community in African ontology reflects the centrality of *moya (spirit)* as the life force of goodness. Smith (2006) posits that any axiology (placement of value) from an African perspective requires that the researcher should reflect on the concept of personal versus participants' involvement in the research. In other words, the researcher must be consciously aware of their own background, bias and value orientation, lest they influence participants in undesirable

ways. The focus in African research should be based on participants as co-creators of knowledge and it is this that ethos that makes it Afrocentric in orientation.

4.5 Afrocentric Research and Design

Research involving African people should best be carried out using an indigenous African approach. Owusu-Ansah & Mji, (2013) state that it is of paramount importance in Afrocentric research that indigenous people must be involved in all aspects and stages of the entire process. Asante (1987, 1987b, 1990, 1992), asserts that only an Afrocentric system can capture the meanings and nuances that are specific to African people. In support of this view, Mkhabela (2005) notes that the Afrocentric method strives to relocate African knowledge historically, economically, socially, politically and philosophically into an African context. Bishop (1998) supports these arguments by indicating that an Afrocentric paradigm challenges the dominant worldview of Western research by avoiding technocratic rationality that restricts diverse research methods.

4.6 The *Ubuntu* Philosophy in African Research

Chapter 3 introduced *Ubuntu* as the archetypal building block, which forms the basis of African understanding of what it means to be human (Nobles, Baloyi & Sodi, 2016). However, in this ensuing narrative, it is important to explore the role of *Ubuntu* in the process of developing an indigenous research knowledge paradigm. Therefore, this section will focus on *Ubuntu* in the context of African research methodologies. Mkhabela (2005) states that African indigenous knowledge must be understood as the core of any research and outcomes affecting indigenous African communities.

According to Mkhabela & Luthuli (1997), *Ubuntu* is characterised by generosity, love, maturity, hospitality, politeness, as well as humility. The philosophy of *Ubuntu* is also espoused through a humane, respectful and polite attitude towards others, their languages and epistemologies (Ramose, 2002). For example, in this study, the researcher used the participants' preferred vernacular language to facilitate the

conversations. It is on this basis that the traditional practitioners were addressed with their appropriate designations.

These were *Gogo*, *Mkhulu* or *Makhosi* for the traditional healers, and *Mme* for the spiritual healers. Collectively, these titles attribute rightful veneration, role or position and point to their place in the human-spiritual complex web. In addition, *Ubuntu* is espoused through practices and principles such as *Letsema* (communal harvest) and *Batho Pele* (People first).

To give practical effect to the *Ubuntu* philosophy, the researcher demonstrated a respectful and communal attitude while collaborating in the process of generating knowledge. In this way, the researcher and the participants were co-involved in the knowledge creation process. Based on the researcher's experience in this current study, the indigenous African research that is embedded in *Ubuntu* philosophy should

- rely and build on the capacity and legitimacy of local people and organizations
- combine the investigation process with education for the researcher and the community that is being investigated.
- provide a direct link between research and problem solving (research-for-the-benefit-of community), which is the unique feature of an indigenous African based research approach (Chatterton et al., 2007).

According to Chawane (2016), combining the creation of knowledge about socio-cultural-spiritual reality with concrete action, distinguishes the traditional research dichotomy between knowing and doing. Therefore, it is of utmost importance here that those who are participating in research have the opportunity of making decisions regarding its use and application in their daily lives (Van Vlaenderen & Neves, 2004). In practice, proponents of an Afrocentric approach contend that Afrocentric methods and principles can be operationalised in a variety of ways depending on the participants' real-life circumstances (Owusu-Ansah & Miji, 2013; Smith, 2006).

The word 'operationalize', in this context, refers to how the particular entity or phenomenon under investigation, e.g., African treatment modalities of rape, is defined by the researcher and participants, what social structures are used in investigating it, how co-learning is facilitated and, in the process, the balance of developing community capacity and data generation is achieved (Braun et al., 2012). The closest research method that seemed feasibly compatible and suitable to an African ethos of this research was initially the Participatory Action Research (PAR).

Although PAR involves active participation of respondents in research, it is still premised on the Western epistemological paradigm, and falls short on crucial elements that the *Ubuntu* philosophy-based research should espouse, such as; involving the past-present perceptible and non-perceptible participants, tangible and intangible evidence, inter-generational knowledge that is admissible as data and as well as exploring multi-dimensional personhood (including the spiritual) as beneficiaries of intended research interventions. For this reason, the researcher had to be creative and remain consistent with the current study's epistemological paradigm to explore a novel suitable and appropriate African indigenous methodology that would involve a whole person, involvement of their relations (present or passed) and all their human dimensions that have hitherto, never been accessed and explored by foreign research methodologies. The researcher termed it the *Liphuputso tse Akaretsang Batho* (People's Involvement Research-PIR) Methodology.

4.7. People's Involvement Research (PIR) Methodology

While operationalising the research, particularly in the data collection phase grappled with the possibility of adapting and adopting the PAR. This would however been epistemologically and methodologically inconsistent with the Afrocentric thought and value system. It is on this basis that the researcher has had to create culturally unique and nuanced indigenous practices and etiquette that facilitated a trustworthy rapport with, and a deep meaningful involvement of traditional health practitioners. The new academic social contract between the researcher and participants facilitated the conceptualisation

of what the researcher terms the People's Involvement Research (PIR) methodology. The researcher regards the PIR as a social research methodology, which ethically solicits knowledge and truths about African people's lived experiences from their own perspective. Moreover, it specifically involves ordinary indigenous bearers of knowledge, such as traditional healers and elders as active sites of knowledge (participants) in informing and contributing to the conceptualisation of a research problem, refining concepts and clarifying them.

Consistent with the *Ubuntu* philosophy, PIR has gone further to develop a deep collaborative and relational connection which facilitates access to classified and 'sacred' knowledge. The openness and trust between the researcher and participants is essential in developing Afrocentric therapeutic modalities for African rape survivors. PIR challenges the role of the researcher wherein he or she must give away their deeply held views and learn appropriate new ways of relating to the cultural context, personally and professionally. An essential prerequisite of practising PIR is that a researcher should have the cultural and spiritual acumen to effectively provide a wholistic therapeutic intervention. In the case of this research, participants have sought access and permission to the spiritual realm to connect with the researcher. Through this process they, for example, requested to perform rituals which assisted them to access and obtain 'sacred' knowledge from the ancestors.

Although traditional practitioners are permitted, following certain prescripts to access spiritually classified knowledge, it must be done in accordance with strict protocol that the researcher had to embrace, learn, assimilate and stringently observe in practice. The nuanced protocols are discussed in the next section. The accessing, analysis, use and publishing of this spiritual and indigenous knowledge is normally secured confidentially by the ancestors of research participants. Therefore, it can only be obtained and sanctioned through a set of protocol that are facilitated by 'enabler-participants', i.e., traditional and faith healers acting as spiritual conduits and *balisa ba khoro* (gatekeepers).

Traditional and faith healers act within strict spiritual parameters and must request

permission from the 'living' dead or ancestors, and other higher spiritual beings to divulge *pinyane* (deep secrets) on an earned need-to-know basis. Yalae (2008), cites that Western science critiques the concealment of African spiritual knowledge as a guide to "accentuate the piety of the medicine practitioners and to affirm the spirituality of the process to maintain a strong societal belief in the efficacy of the system" (p.409). In defense of the African spiritual practices, the reason for strict boundaries in the discharging of relevant knowledge is in compliance to an age old hitherto unpublished *leano la thepa ea mahlale* (intellectual property policy) which protects sacred knowledge from exploitation and distortion, hence it can only be released through *balisa ba khoro* (custodian gatekeepers).

In the African knowledge contexts, *balisa ba khoro* (custodians) are bearers of indigenous knowledge systems (Maluleka & Ngoepe, 2018; Mokgobi, 2014). They have close, sacred connections with ancestors and their role is to relay knowledge between the living and the living dead. They must and are expected to guard against potential perversion of African sacred knowledge. An example of this is how the late South African Sanusi, Baba Credo Mutwa's wisdom was exploited by Western professors, researchers and authors for commercial gains. Lalonde (1991) argues that it is difficult to tell how much of the African spiritual and indigenous "applied knowledge systems of today, are reflected by ancient tradition rather than the product of colonialization process and the market economy" (p.8). It is for this reason that, principles of PIR are strictly observed in the course of data collection, on Afrocentric research studies.

4.7.1 Principles of PIR

The researcher had to learn through trial and error to adhere to *melaoana e thata* (strict protocols) that have been collated in this study, to form the basic tenets and principles of PIR. The following principles are unique to PIR and more specifically, they pertain to the collection of sacred spiritual knowledge that has, hitherto, hardly been accessed by researchers as far as a detailed literature revealed in this study.

- All credible and certified traditional healers and African faith practitioners belong to a registered institution. The researcher was advised to engage them through a local representative body. Most healers belong to the South African National Traditional Healers Association (SANTHA). Their services and conduct are regulated by The Traditional Health Practitioners Act 22 of 2007 to ensure that they practice with efficacy, safety and their interventions are underpinned by excellence (Street, 2016). Equally, their knowledge, skills, traditional equipment and institutions are protected by the Protection, Promotion, Development and Management of the Indigenous Knowledge Systems Bill of 2019 (PMG, 2019).
- South Africa has a diversity of spiritual healing traditions, each with its range of convention (Mothibe & Sibanda, 2019; Thornton, 2009). It is therefore recommended that researchers first acquaint themselves with traditional and spiritual healer's protocols before initiating their studies.
- Researchers need to be constantly aware of their own personal and professional values and beliefs (Gelmez et al., 2019), to expertly manage them in the process of PIR. The reason for this is that the researcher's cultural, racial, spiritual and moral orientation might be in conflict with that of their research environment, research process and participants. The researcher therefore argues that this awareness constitutes an appropriate research ethic, from an indigenous PIR point of view
- PIR is a methodology wherein all primary participants, i.e., healing practitioners, clients and ancestors are actively involved in co-creating indigenous knowledge, with a spiritual component at its centre. For that reason, researchers are advised to be willing and ready to actively participate in observing ceremonies and rituals of a faith or belief system that is under investigation. Primarily, PIR is a participant-observation experiential process/engagement that requires a researcher to be culturally competent and immersed in the data collection process, to earn the right to sacred data. This is the opposite of 'armchair research' (Brown et al., 2020) that

denotes a superiority mentality that resembles most Western colonial researcher approaches that still dominate research philosophies in indigenous contexts.

- It is essential for a researcher to be willing to accept, beforehand, that there may be some questions or experiences that are 'out of reach' for them during the PIR. This means that participant healers might decline to reveal some spiritual truths, as a directive from their ancestors. Some facts are reserved for spiritual intermediaries only, as was the case when healers were not permitted to divulge specific therapeutic articles and relics, in this study. Mokgobi (2013) asserts that the veil of secrecy is specifically meant for the purposes of protecting sacred knowledge that is shared only amongst the initiated. The permission to share it with researchers is often determined by ancestors, as the researcher also found out in the current study.
- It is recommended that in PIR, researchers need to be honest, open and transparent when outlining their study objectives, intended outcomes and publication plans to enhance effective knowledge co-creation. Dlamini (2001) found that the lack of transparency and openness posed a barrier in a knowledge exchange setting that involves traditional healers and Western trained professionals. Inter professional mistrust, contempt and disrespect of indigenous healers by Western research 'experts' impedes cooperation, as also observed by Hlabano (2013).
- It is a principle of Ubuntu philosophy as well as a professional, courteous academic honesty to acknowledge African indigenous healers as primary sites and knowledge co-creators of research in PIR. Muwanga-Zake (2009) concurs by stating that Ubuntu ethics require the acknowledgement of participants' contributions to research findings as well as sharing, analysing and deliberating the outcomes with participants, as co-creators of knowledge. PIR endorses consultative verification with participating healers to ensure that they sanction and validate new knowledge as true. This also ensures that the study passes the rigor and confirmability test. This therefore constitutes the African conception of confirmability, trustworthiness and reliability.

4.7.2 People's Involvement Research (PIR) - Practice Principles

The following concise discussion of a PIR practice principles is intended to introduce its operational concepts and to briefly outline its recommended stepwise techniques. This framework is sequential in its design but not rigid because it depends on the type of healer and the stage that the research is on. Embedded in this framework is a set of key principles of engaging traditional and spiritual healers. The steps and technique proposed here are also facilitating factors in the process of effectively and efficiently gathering indigenous African knowledge.

Mohato oa pele (Step 1): ***Tsebiso ea ba nka karolo*** (Identification of respondents)

Mokhoa (Technique 1): A local or national association of traditional or spiritual healers is *approached* for a referral to a certified healer.

Mohato oa bobeli (Step 2): ***Kopano*** (Pre-meeting plan)

Mokhoa (Technique 2) Following a referral, an initial briefing meeting is arranged for a researcher to introduce themselves to their allotted potential participant - healer for the purpose of outlining the objectives of the planned research process.

Mohato oa boraro: (Step 3): ***Puisano tsa seboka*** (Group conversations)

Mokhoa (Technique 3) In a *puisano tsa seboka*, discussions are best held at a venue that meets the healers' preferences. Location is not only a physical space, but also a spiritual facilitating factor in data collection. The predetermined rules of engagements by the healers are to be observed and respected by the researcher. If there are co-researchers who work alongside the principal researcher, they need to have pre-approval from participants and to be properly briefed by their leader in the study.

Mohato oa bone: (Step 4): ***Meetlo ea kalafo e sa tsoaneng*** (Diverse healing traditions)

Mokhoa (Technique 4): It is rational and logical to have *lipuisano* with healers from different spiritual orientations in different settings. Some are

diametrically opposed. For each group, data collection tools and processes might need to be uniquely and appropriately engaged. For instance, traditional healers who use bones might not want to participate alongside African religious diviners in the same session and vice versa. Equally, one set of identical questions in a data collection tool, like a questionnaire, might not be applicable.

Mohato oa bohlano (Step 5): ***Boihlompho ba bohlohi ba pokello*** (Data collection etiquette)

Mokhoa (Technique 5): Different healing traditions require distinctive etiquette that is suitable structured for its practitioners. It must be established at a pre-data collection engagement. It is important to state the researcher's intended methodology so that it can distinctly modified and aligned with each healer's preferences. While some participant healers might agree to respond to a questionnaire directly, others could choose to engage in a ritual before the *puisano* (*conversation*). A dress code (e.g. as in covering your head and shoulders) could be a crucial factor to one healer while to the next, language (e.g. using the appropriate reference) might rank as the most important salutation or gesture.

Mohato oa botshelela: (Step 6): ***Ho hapa mohloli*** (Data capturing)

Mokhoa (Technique 6): Different traditional and spiritual healers have protocols that determine acceptable data collection mechanisms. While voice recordings and photos might be acceptable to some, others might take exception to live videos. The researcher needs to receive ethical consent from participants as well as to observe pre-determined data collection agreements. However, ethical clearance in this case is not sought from experts like academic ethics committees, but from knowledge bearers themselves, with the permission of ancestors.

Mohato oa bosupa (Step 7): ***Ho arolelana sephetho*** (Share outcomes)

Mokhoa (Technique 7): In PIR, participant healers are regarded as co-creators in the indigenous African knowledge creation process. As such, healers are

entitled to participate in every step of the research process. They also have the right to be acknowledged in the outcomes of their intellectual property.

The PIR framework represents an effective process that facilitates the exploration, studying and researching of sacred African spiritual knowledge in an indigenously and venerable, yet scholarly rigorous manner. The crucial thread that is prevalent in implementing PIR, is a set of African ethical concepts of ubuntu which include; respect for participants, regard for spiritual authority and sources, acknowledgement for the elders and involvement of the community. Mangena (2016) adds that the process of involving African participants in research has to be dialogical and consultative, as is espoused in PIR principles. An equally important principle of PIR is the location or site in which the *puisano* takes place. The land in which African participants live and the geographical spot on which a healer consults, have spiritual significance hence a PIR practitioner needs to pay homage to the ancestors. These PIR principles are fundamental in facilitating a PIR process.

4.7.2.1 Process of PIR

The following operational processes are proposed in the implementation of the PIR. All stages are recommended based on the researcher's experience and find some expression in various studies. They are intended as PIR guidelines with the objective of simplifying a complex process of collecting data in the African spiritual healing settings. They are not designed as standard sequential steps because they are culture-and-context dependent and researchers are encouraged to be flexible.

Mohato oa pele (Step1): ***Tsebiso ea ba nka karolo*** (Identification of respondents)

Tsamaiso (Process 1): A researcher is advised to approach a local or national association for a formal referral to a trained and qualified African traditional healer or spiritual practitioner. It is important for researchers to identify participants in formal and accredited African healers' institutions because, as Mokgobi (2014) has established,

Western trained professionals including researchers, have demonstrated little knowledge and relational experiences within the traditional healers' working space. If researchers use casual referrals to select any African traditional healer as a potential participant, they are likely to pick imposters who fraudulently advertise their services on traffic light poles, street walls and on unauthorised sites. It is also a significant PIR procedural flaw to enlist random 'healers' who may not have been 'called' and endowed with spiritual authority to participate in the co-creation of indigenous African knowledge processes.

Therefore, the correct identification of legitimate traditional healers is conceivably the most important precautionary step to take in the PIR process. This is significantly crucial because as literature has indicated, like in other health professions, the traditional healing field of practice is also susceptible to be infiltrated by quacks, fakes and charlatans (Abdullahi, 2011; Ebomoyi, 2009; Ndhlala et al., 2011; Tangwa, 2007). This will ensure research trustworthiness as envisaged in the literature (Harrison et al., 2001; Mabuza et al., 2014 and Sinovics et al., 2012).

Mohato oa bobeli (Step 2): **Kopano** (*Pre-meeting plan*)

Tsamaiso (Process 2): In PIR, the purpose of the initial meeting is for the researcher to introduce himself/herself and to outline the objectives of the planned face-to-face data collection meetings. Researchers must bear in mind that traditional healers and spiritual healers have different conventions. Traditional healers and spiritual healers operate in distinct ways that will inform the approach to setting up the first meeting (Mokgobi, 2014). The researcher in the current study has observed that PIR was significantly facilitated by a principle of 'being forewarned and being forearmed'. It has proven that prior knowledge of their host participant earned them acceptance, trust

and a knowledge co-creator status to collect data with very limited cultural or spiritual barriers.

A researcher is, therefore, advised to set up an appointment for an initial introductory briefing meeting using information derived from a referral or lead received from a local or national healers' institution. The appointment could be arranged either telephonically or through an intermediary. In this study, the researcher was permitted to make contact by phone. Equally, it is not forbidden for a researcher to show up for the first time, like healers' clients do, to formally request and set up a research meeting for a later date.

The initial approach is critical in establishing the research relationship and process. To enhance access, a researcher needs to find out about etiquette; greeting procedure, dress code, titles by which to address the host, language and related pre-meeting preparations. For instance, in this study, the researcher was asked to implore and venerate her ancestors even before setting off to go to the research meeting location. Such conduct will ensure confirmability (Harrison et al., 2001; Mabuza et al., 2014 and Sinovics et al., 2012).

The location of the meeting is also a vital factor in the data collection process with healers. From the experience of using PIR, the researcher should offer to meet the traditional or spiritual diviner preferably at their homes wherein most of them have set up their practices. Also, the location may have a set of guidelines that need to be observed. The location is more than a physical space, it constitutes the spiritual connectedness that creates a healing conduit and context.

Typically, visitors to a traditional healer's practice would demonstrate respect by entering barefooted in silence, waiting to be greeted and offered a spot to sit on the floor, invited to prayer or 'arrival customs' and then beginning a consultative meeting or procedure (Pinkoane et al., 2005).

In a case where it is necessary to invite a translator, he or she must seek and obtain permission through the researcher to ensure that they have language proficiency, knowledge and understanding of culture and customs of participating healers, as is recommended by Ramchundar & Nlooto (2017). Acceptability and approval of the translator by research participants would also ensure credibility of the study (Harrison et al., 2001; Mabuza et al., 2014 and Sinkovics et al., 2012)

Mohato oa boraro: (Step 3): ***Puisano tsa seboka*** (Group conversations)

Tsamaiso (Process 3): In a *puisano tsa seboka* (group conversations), it is prudent for a researcher to know the different healer constituencies who are participants in *puisano tsa seboka*. Prior to assembling different participating healers in a venue for *puisano tsa seboka*, it is advisable to inform them who their co-attendees are, so that they can consider and approve a joint session (or not) in advance, lest their spiritual values are diametrically opposed to fellow participants.

To facilitate an effective PIR group data collection exercise, a researcher is recommended to arrange a relatively sizable, central and pre-approved venue acceptable to everyone, which meets the needs of participating healers. Meeting at a venue establishment or a restaurant that sells pork for example, might be a spiritual

hindrance to the data collection process. It is advisable to involve participants in locating a practical and acceptable meeting venue.

Once the venue has been agreed upon, the researcher needs to formulate the rules of engagements with participants in the *pre-seboka* planning. A researcher must investigate and be cognisant of different languages, age groups, genders, seniority and related protocols, to plan for respectful and effective facilitation of *puisano tsa seboka*.

This would demonstrate the notion of transferability to other similar African indigenous research contexts (Harrison et al., 2001; Mabuza et al., 2014 and Sinkovics et al., 2012).

Mohato oa bone: (Step 4): ***Meetlo ea kalafo e sa tsoaneng*** (Diverse healing traditions)

Tsamaiso (Process 4): Consistent with the PIR principles, the researcher needs to

explore a range of different African traditional healing practices, each method/modality of therapy or practice needs to be examined individually and in accordance with the prescripts of the traditional practice concerned. Sodi et al. (2011) have identified at least four basic and different types of African healers as *ngaka/inyanga* (traditional doctor), *umprofeti or umthandazeli* (faith healer), *isangoma* (diviner) and *umbelethisi* (traditional birth attendant). PIR recognises that each of these African traditional health practices have their own distinct pathways of accessing indigenous spiritual knowledge from a higher sphere (ancestral realm), as observed by the researcher in this current study.

It follows that during the data collection processes, researchers need to adjust and adapt their data collection approaches and processes to accommodate the unique and suitable ways for different indigenous African spiritual practices. From the PIR point of view and the researcher's experience in this research process, the following

unique interactional aspects for each of the diverse healing traditions are recommended.

1. *Ngaka/inyanganga* (traditional doctor): *Puisano ka bongoe* (One-on-one conversations)

- Observe the ritual of *ukukhanyisela/ ho khantshetsa* (this may take the form symbolic appeal to the ancestors, using a monetary token if this is applicable in the traditional healer's line of practice).
- Use of open-ended, probing and follow-up conversations facilitated by the researcher.
- Voice recordings may be done with permission that is sought and obtained from participants, prior to the data collection session.
- Some of the processes and rituals performed by a traditional healer may only be observed, but not video recorded.
- Photographic evidence may be allowed if permitted by the participating healer.

2. *uMprofeti/morapeleli* (faith healer): *Puisano ka bongoe* (One-on-one conversations)

- Use of open-ended questions asked by the researcher.
- Observation and experiential involvement e.g., prayer, candle lighting, burn incense, sprinkling of snuff, as requested, or prescribed by the participating healer.
- Photographic evidence may be utilised if permitted in advance.
- If a researcher is female, they may be required to cover their head and shoulders and, if wearing pants, they would be required to wrap a cloth around to cover the pants. Male researcher may be asked to take off their hats. Different healers have distinct clothing etiquettes that symbolise respect for them, the ancestors and their healing traditions.

3. *iSangoma/ mokoma* (diviner): *Puisano ka bongoe* (One-on-one conversations)

- Exploration through open-ended conversations by the researcher may be done and adapted in line with the participants' responses.
- A voice recorder may be used with permission that was requested in advance. The participant healers might ask for certain aspects of their revelations to be off the

record.

- Observation may be conducted without video recordings, unless permission is granted by the participants.
- Photographic evidence may be allowed if it was expressly permitted.
- *ukhanyisela/ ho khantshetsa* (Different healers may make a request to and appease the participant's ancestors).
- Experiential participation e.g., sprinkling of snuff or throwing of bones must be anticipated and performed, if it has been requested by a participating healer.

4. *uMbelethisi/ mopepisi* (Traditional birth attendant) *Puisano ka bongoe* (One-on-one conversations) is preferable as most of the *uMbelethisi/ mopepisi* regularly work alone.

- Use of open-ended conversations that are facilitated by the researcher may be permissible.
- The session may be voice recorded with the participant's permission.
- Observation with video recordings is strictly prohibited as the consultation process involves intimate details of women's bodies.
- Photographic evidence may *not be* permitted to protect the dignity of patients' and their process.

Mohato oa bohlano (Step 5): ***Boihlompho ba bohloli ba pokello*** (Data collection etiquette)

Tsamaiso (Process): In each meeting, a researcher endeavours to behave according to the appropriate/required/prescribed behavioral and ethical etiquette. For instance, all who enter the sacred place must take their shoes off, hat off (if you are male), cover hair (if you are female) before entering the sacred enclave, bow or clasp hands to greet, perform a prayer, candle lighting, burning of incense or herbs, sprinkling of snuff to appease the ancestors, if so requested (Pinkoane et al., 2005).

Equally, a researcher is advised to do a preliminary investigation regarding forbidden and non-permissible conduct. Research indicates that most traditional healers might take exception at being video filmed, particularly when they are in a trance or engaged in a transcendental contact and communication with their ancestors. Likewise, a researcher may not, in many cases, touch or handle some of the therapeutic equipment and devices as they may be deemed exclusively sacred (Peu et al., 2020). For these reasons, data collection etiquette needs to be adapted to each African traditional healer's preferred way of working as ordered/instructed by their ancestors. Adherence to this requirement will ensure dependability (Harrison et al., 2001; Mabuza et al., 2014 and Sinkovics et al., 2012)

Mohato oa botshelela: (Step 6): ***Ho hapa mohloli*** (Data capturing)

Tsamaiso (Process): Once data has been collected, it must be stored securely in electronic format or in discreet physical files (Ngulube, 2002). Some of the information may be off-the-record material if participant healers clearly stated it as such, during the data collection phase. (Mathonsi, 2013) concurs with this study's affirmation that traditional healers, who are co-creators of knowledge, must be consulted reiteratively throughout all stages of research, including in data capturing, translation and verification processes.

The objective of iteratively consulting participants is to ensure that their original concepts are authentically captured in a way that elucidates the semantics and essence of indigenous knowledge. This is to ensure that the original meanings of participant's contributions are not lost in translation.

Based on the researcher's experience on this study, it is advisable to allow participants access to recorded material for verification

purposes. This action also ensures credibility of the study (Harrison et al., 2001; Mabuza et al., 2014 and Sinkovics et al., 2012)

The final captured data should reflect the 'letter and spirit' of the new shared knowledge and therefore, the confirmation of its authenticity can be done only by participating traditional healers before it is published. It is ideal to retain the original translation to ensure consistency, validity and reliability of data. This is in line with the basic and crucial research rigor principles (Krefting, 1991).

Mohato oa bosupa (Step 7): ***Ho arolelana sephetho*** (Share outcomes)

Tsamaiso (Process): Preferably, participants must be acknowledged and consulted first to share the final outcomes of the research with them. The format of the final document might look different and possibly inaccessible to participants, in terms of language and the complexity of the narrative. The role of the translator is particularly paramount in this instance because they can confirm that their knowledge contribution is accurately captured for publication and to ensure that participants' trust and buy-in are maintained in the final product. This is a symbolic gesture for the purposes of endorsing and certifying the outcomes of the research process. Referring back to participants for verification, adds and ensures credibility to the study (Harrison et al., 2001; Mabuza et al., 2014 and Sinkovics et al., 2012).

Sharing the outcomes of research with traditional/indigenous African healers accords them the status of custodians of indigenous knowledge. Highlighting the group identities on research participants when outcomes are published does not necessarily breach the fundamental ethics principle of anonymity and confidentiality, as outlined by Crow & Wiles (2008).

PIR recognises that “revealing the identity of study participants may empower them because their voice can finally be heard” (Surmiak, 2018: p.1). However, PIR proposes the acknowledgement of participants, if they request it, by mentioning them as a group or ‘profession/calling’ on publications without disclosing their specific individual biographical identities. In this way, the objective of acknowledging them as co-creators is still achieved.

Although there was no explicit request from the current participants, the matter of previous non-acknowledgement in other studies, was considered by the researcher, hence permission was solicited from the participant healers. African traditional healers are regarded as custodians and a voice of African indigenous knowledge and are therefore acknowledged as sharers and co-creators of in the research process (Hlabano, 2013; Sebata, 2015).

In PIR, there are common features and practices that are standard in all data collection processes, which are recommended for all researchers. All *liboka* (plural for *seboka*) need to be conducted essentially in a vernacular language, given that Africans relate and communicate with their healers and ancestors in an indigenous language. Additionally, some concepts are best expressed in vernacular to retain the original meanings in therapy (Nobles & Federico, 2020; Simango & Segalo, 2020). This study has attempted to retain the original meanings of concepts by using vernacular languages, mainly Sesotho.

The PIR’s central aims are designed to achieve the following outcomes:

- Exploration of the cultural and contextual background as the basis of indigenous knowledge.
- Researcher-healer collaboration in identifying, understanding and developing solutions in the Afrocentric therapeutic methodology for African rape survivors.
- An understanding of socio-cultural-spiritual determinants of rape in Africa

- Respondents assuming a central role as co-creators of the narrative. Moeta et al (2019) show that there is wide use of stakeholder conversations between traditional indigenous knowledge bearers /holders and academics wherein, the former's invaluable knowledge has not been accordingly acknowledged.

Literature has shown that African traditional healers have been interested and open over time to collaboratively documenting, preserving and sharing their indigenous knowledge and healing practices that are within their spiritual bounds (Fenyves, 1994; Hountondji, 1995; Mathibela et al., 2015; Mokgobi, 2014). Baloyi (2008) asserts and confirms that "the construction of collaborative and respectful dialogical engagement platforms by all interacting forms of psychotherapy knowledge systems, will most likely result in shared experiences and knowledge pools based on different cultural experiences" (p.8).

This assertion above has been affirmatively proven in this study by traditional healers and faith healers who actively participated in this current research. They voluntarily shared centuries-old indigenous knowledge that will, in this case, facilitate the development of a therapeutic framework for use in the wholistic healing of African rape survivors (Ashforth, 2005). Participating healers have outlined their preferred protocols during pre-research meetings. It is the researcher's ethical responsibility and duty to investigate the healers' requirements and context before a data collection visit (Pinkoane et al., 2005). The following pictures depict a basic etiquette that the researcher has had to observe.



Figure 4.1: Ukucelisa/Ho kopisa le ho khantshetsa (Revering ancestors)

Pele mokoma a ka ho hlahloba, o tlameha ho khantshetsa balimo. A nto baroka, a be ba kopa hore ba senole litaba tsa motho ea tlleng ho kopa thuso ho bona (Before a healer can discern the matter at hand, the client must make a monetary offering to both their ancestors as well as the healers. Thereafter, the healer will summon their own as well as their client's ancestors to guide and reveal the predicament and the requisite intervention. The researcher on this current study is kneeling between the two *bakoma* (traditional healers))



Figure 4.2 (a) Moaparo oa Bakoma (Bakoma's traditional way of dressing). (b) Ho hlompha meetlo e tshoanang le tsela ea ho lula, ho roala, ho rola lieta (showing respect sitting on the floor in an acceptable manner, covering of head, depending on a particular healer, and taking off the shoes when entering their divine healing space).



Figure 4.3: *Ho khantshetsa* (gift token, prayer and pouring of snuff). The researcher performs a ‘prayer’ as per participant healer’s request. She is adorned in line with the spiritual healer’s protocols. In this case, the researcher is asking for ‘insight and revelation’ from the spiritual realm.



Figure 4.4: Engoe ea kobo tsa baporofeta. (one of many Spiritual healer's way of dressing). *Ha ngata baporofeta ba theosetsoa mmala le mofuta oa kobo e ba tsoanetseng ho e apara ha ba kena tshebeleletsong ea semoya* (In most cases the spiritual healer receives a revelation by the ancestors as to what colour and what clothing to wear during a spiritual service)

4.8 Integrated Research Design

The research design adopted in this study is an integration of IKS and PIR which makes it a uniquely indigenous Afrocentric research approach, consistent with the theoretical framework employed herein. The choice of an Afrocentric design is predicated on the need to understand the subjective views and experiences of African healers/spiritual participants.

Participants' views and perceptions are not quantifiable; hence, they are best understood using axiology (relational quality) means. Mkhabela (2005) states that the Afrocentric method has a philosophical and theoretical perspective that forms the essential core of understanding indigenous experiences. This is because it focuses on the collection, analysis and interpretation of all data from the standpoint of Africans as participants and human beings rather than objects of study.

This study used a qualitative research tradition akin in some instances, to ethnography, which promotes knowing the world from the perspective of its socio-cultural-spiritual cosmic standpoint. Kvale (2006) affirms this researcher's adoption of *Seboka* dialogues by stating that it is an attempt "to understand the world from the participants' points of view and to unfold the meaning of their lived world. Kvale, (2006) further states that dialogues with participants give "voice to common people, allowing them to present freely, their life situations in their own words" (p.481).

Data was solicited from participants through *Seboka* and *Puisano*. *Seboka* is a Sesotho word for a group of people gathered with a common purpose, while *Puisano* is also a Sesotho word for dialogue or conversation. In the African research context, dialogism is best defined by Mkhize (2004) as a process of interindividual communication with an extended scope that includes their social and cultural world. It is crucial at this point to mention that, in a non-Afrocentric setting, the concept of focus groups would be used in qualitative research. However, using the word focus groups in this study may reduce the, meaning, depth and context of the preferred concept of *seboka*.

Similarly, Nare (2016) and Pienaar (2015) define *seboka / lekgotla* as a gathering or a meeting consisting of a particular interest group that is assembled, in this case, for the purpose of data gathering wherein a researcher is accorded an observer status. Nare (2016) further outlines, what he researcher calls *seboka*, as a communion where there is “invaluable wealth of sharing and reciprocal engagement which lies at the heart of Africa’s philosophy” (p.3).

In an indigenous Afrocentric research process, *seboka (group)* is a meeting in which researchers and participants have a conversation and share information in a dialogically reciprocal manner. The two parties assume equal but distinct roles which facilitate learning from one to another in the research process. This is consistent with African ethics, wherein emphasis is on the responsibility towards the other, in line with Ubuntu philosophy. In sharing knowledge, Gyekye (2011) expounds it as people fulfilling community responsibilities to others because of their needs and shared welfare, as opposed to an obligation to their rights. Gyekye (2002) calls this communitarianism

An African knowledge sharing is contrary to Western traditional focus groups processes where a researcher dictates the direction, content and terms of data gathering process. Similarly, *lipuisano* (dialogues) are information exchange conversations wherein values and wisdom are shared, for passing on and benefiting fellow citizens and the next generation. In *seboka* and *puisano*, the researcher has to seek permission from *balebeli ba khoru* (gatekeepers) who are the organisational management team in different NGOs.

4.8.1 Aim

The study is aimed at developing an effective therapeutic intervention for African rape survivors, with two features in it; firstly, it is informed by indigenous knowledge. Western knowledge, therapies and interventions are inherently flawed and limited in their design, to locate and heal deep seated spiritual trauma that Africans have suffered (Baloyi, 2008), in this case, African rape survivors. Secondly, an indigenous intervention tends to integrate spiritual therapy for untreated human dimensions that have been overlooked by

Western based interventions. African rape survivors in this study, detailed how they still live with perceived 'violations' that Western therapies could not locate, access and heal, as the survivors' trauma is embedded in the spiritual realm. The spirituality aspect of health in Africans is integral in the healing process (Ohajunwa, 2019).

4.8.2 Setting

The study was conducted in the province of Gauteng, in Soweto and Alexandra townships. Only three participants; one a traditional healer and two faith healers had a dialogue with the researcher at their homes respectively, in the greater Johannesburg Metropolitan area.

Figure. 4.5 Geographical location of Alexandra (highlighted in green) and Soweto (highlighted in yellow)



HSRC, 2003

4.8.3 Participants

The researcher opted to limit the study to two sets of participants: *bakoma* (traditional healers) and *baporofeta* (spiritual healers) on one hand and rape survivors on the other. The first group, *Bakoma* have been identified to provide knowledge about their spiritual healing practices and more specifically how they detect, treat and prevent rape holistically. This knowledge is considered 'sacred' and it is entrusted to them to protect, manage and share it, as sole custodians. *Baporofeta* are increasingly consulted by many Africans particularly in urban areas as they also use of allopathic medicine (Edwards, 1986). Indeed, *baporofeta* have confirmed in this research that they offer spiritual healing to "clients" who include African rape survivors.

Mahlatsipa (Rape survivors) on the other hand, have been included in this study as participants because they are uniquely positioned to provide knowledge about their subjective experiences of rape, its perceived causes and how they deal with the aftermath of rape.

Although the rape survivors are not the focus of this study, the rationale to include them was motivated by the idea that they will serve a purpose of supplementing, corroborating and even contrasting, if at all, the views of healers. African survivors of rape who consult African healers, do so because they recognise that the spirit, which is a source of self that encompasses the transpersonal realms (Edwards, 2011) is also affected by rape. Crawford & Lipsedge (2004), attest to the fact that Africans who are in psycho-spiritual distress opt to consult African healers with expectations of wholistic healing based on diviners and faith healers' spiritual skills. For this reason, African rape survivors' invaluable anecdotes have succeeded in substantiating and validating the hypothesis of this study.

To ensure that data and knowledge gathered in this study is authentic, the researcher sought and identified participants through professionally accredited institutions such as (People Opposed to Woman Abuse) POWA and Agisanang Domestic Abuse Prevention

and Training (ADAPT) in collaboration with registered traditional healers. Additionally, several participating traditional and faith healers from different backgrounds were brought together and this had an effect of ensuring confirmability and authenticity. Guba & Lincoln (1989) regard confirmability of research as the extent to which its outcomes can be verifiable while authenticity refers to the research's worthwhile and impactful results. As recommended by Bereda (2002), the researcher in this current study requested participants to peruse and verify captured data, concepts, and meanings over several iterations, to ensure that the study reflected the essence and spirit of the knowledge that they contributed to captured in this study.

Healers and survivors have provided a richer, wide ranging primary data that forms the basis of new knowledge in this thesis. The rape survivors, who participated in this study, are volunteers from the survivor groups that are affiliated with the following organizations: POWA and ADAPT. They were reached through Social Workers who are the first line *balebeli ba khorol baetapele* (gatekeepers/ community leaders).

Five traditional healers were accessed through their professional organisation that is affiliated to ADAPT, in Alexandra. Two spiritual healers were from the Blessed Apostolic Church in Soweto and a traditional healer from Machadodorp in Mpumalanga who was doing *ho hlola* (consultancy) work in Johannesburg, were approached individually by the researcher.

4.8.4 Sampling

Convenience sampling method was used to access survivors and practitioners. Convenience sampling is a non-probability sampling technique wherein participants are chosen because of their convenient accessibility and relevance to the study (Creswell & Clark, 2011). The researcher contacted POWA and ADAPT who gave consent and facilitated the identification of participants. Participant healers were identified through a process of snowballing after the researcher sourced the first referral from the Blessed Apostolic Church and the Alexandra Traditional Healers Association (ATHA). Basically,

snowballing entails the identification of other participants by peers and acquaintances who may be in the same professional or social network (Biernacki & Waldorf (1981).

Participants who were sampled and enrolled on the study qualify as legitimate co-creators of knowledge due to the unique and classified data that they contribute to the study. They were identified from an official organisation called ATHA. Keane et al., (2017) refer to them as “ co-researchers in a process of collaborative knowledge generation” (p.17). They are uniquely positioned between the ancestors and their clients (rape survivors), as conduits of knowledge (data) and mouthpiece healing practitioners, respectively (Zuma et al., 2016). Rape survivors bring invaluable lived experiences that they may not have shared previously.

Their experiences brought a unique aspect to this research, which is psycho-cultural-spiritual healing needs for African survivors of rape. For these reasons, data management must be done in a way that is academically rigorous but also in a manner that is indigenously ethically appropriate, which transcends the limitations of prevalent Western research methods (Owusu-Ansah & Mji, 2013).

4.9 Data Management of Indigenous Knowledge

Data management in the context of research refers to the handling, organisation, classification, securing and distribution of data that was gathered and used in research studies (Wits Library Guides, 2020). In the definition of data management, the concept of ‘research studies’ denotes the mainstream Western scientific scholarship. As posited earlier in this study, Western science is not necessarily universal by design, it excludes African and other indigenous knowledge and scholarship in the concept of research studies. By extension, it also seeks to dictate the terms of data management even in the indigenous African knowledge environment.

Feyerabend (1987) has interrogated the broadly held supposition that Western science is the only authority that determines the truth and, in this case, universal data management

methods as well. It is, therefore, the contention of the researcher in this study that since Western science is not the universal standard, knowledge produced from Africans, would be best managed by Africans using indigenous processes and methods. Hountondji (2009) aptly states it in his article titled: "*Knowledge of Africa, knowledge by Africans: Two Perspectives on African Studies*" by urging African scholars to collect knowledge on African issues but most importantly, to control and preserve it.

This means that African scholars who are entrusted with sacred indigenous spiritual knowledge by participating as co-creators, become the bonafide data guardians of indigenous knowledge. This assertion does not preclude non-African scholars from creating African knowledge, enlisting indigenous co-creators as participants and managing resultant data. Odugbemi et al., (2019) notes that there has been a misappropriation of African knowledge by Western scholars. Their contention supports this study's position that data management of indigenous African knowledge should not be underpinned by a "Eurocentric format of studying Africa" (p.1).

Based on the standpoint discussed above, the researcher in this study proposes that data management of indigenous African Knowledge should be the sole preserve of researchers and scholars who are Africans or other academics who are Africanists in orientation. This means only those researchers who have demonstrated an ethical and moral obligation and interest in the welfare of Africa. For the context and purpose of this study, the researcher conceives of indigenous knowledge data management as 'Indigenous African Knowledge Custodianship' (IAKC).

In this study, the researcher defines the notion of IAKC as the awarding of an earned privilege to a researcher or academic of ethically gathering, managing and disseminating indigenous knowledge. This is a position of being entrusted with classified information, some of it deemed spiritually sacred which makes them invaluable members of society. Conversely, academics and researchers who have been sanctioned as custodians of indigenous knowledge, have to recognise that data that they manage and subsequent knowledge that they publish is still the intellectual property of collective participants and community that it is derived from. Ngulube (2002) asserts that indigenous knowledge is subject to intellectual property rights globally and locally.

African Indigenous knowledge is enshrined and protected as intellectual property in the 2001 United Nations Draft Declaration on the Rights of Indigenous Peoples (Ngulube, 2002).

He further explains that the Economic Commission for Africa accords protection to oral tradition and indigenous knowledge as African intellectual property that belongs to its communities.

4.9.1 Process: Data Management of Indigenous Knowledge

Schwandt (1997) defines the process of organising and managing data as “a designed structure for systematizing, categorizing, and filing materials to make them efficiently retrievable and duplicable” (p. 61). This definition is particularly pertinent to common Western scientific research undertaking but in the context of this current study, it might not be adequate to outline the process of managing unique African indigenous knowledge. Asante (1987) concurs with this observation by stating that methods contained in Western thought are inadequate to explain and for application to processing and management of indigenous knowledge. This study proposes the adaption of existing data management methods.

Fundamentally, the proposition entails the enhancing of current scientific data management methods by supplementing them with ethical and relevant African procedures. This is hardly a new notion in advancing African knowledge. Asante (1987) applauds and commends a host of African scholars who have adapted Western theories and constructs and enriching them with African knowledge to make them relevant to the African reality. Equally, Ngulube (2002) concurs by articulating the same principle by proposing that Western trained information professionals should “become part of the indigenous knowledge management equation in so far as organizing the information and making it usable and accessible.” (p.5). Ngulube further suggests that, in managing local society’s indigenous knowledge resources and information, professionals should consolidate and preserve it similarly to other documented knowledge materials.

The inference from these assertions is that the basic principle to be applied in the process of managing indigenous African data and knowledge, can be executed within current

models on condition they are enhanced and premised on African philosophy, beliefs and cultures. According to Guest et al (2013), current scientific methods of data management are defined as a practice wherein data is handled, prepared, processed, stored and preserved.

The management of research data and African indigenous knowledge is also embedded in the agreement between the study researcher and participants, which states that whatever was shared and entrusted to the researcher, may not be manipulated and misrepresented in the process of being processed or disseminated (Williams & Hardison, 2013). Data that has been recorded through note taking and an electronic recording device with permission from ancestral sources must be transcribed verbatim before being analysed (Khupe, 2014). In addition, a process of content analysis was used to interpret themes, notions, thoughts and perceptions that appeared frequently, in particular sequences and those that appeared similar (Creswell, 2009).

According to Corden & Sainsbury (2005b), the process of extracting meaning from concepts that are in verbatim recordings, is also a form of intricate data management. In the process of decoding recorded data, which is open coding, the researcher had to oscillate in consultations between *Bakoma*, herself and professional peers who possess cultural competency, sensitivity and skill. The purpose therein, was to verify that the data that has been interpreted and analysed, has not lost its original semantic value (Braun & Clarke, 2006).

For instance, a researcher has had to obtain sensitive knowledge (data) on request and had to consent to an oath of confidentiality which includes utmost respect in a way the researcher handles and divulges the data (Terreblanche et al., 2006). The researcher was careful not to use data out of context, otherwise it will attract chastisement and censure.

By observing the conditions of data management, the researcher was able to build a knowledge base as the process unfolded, as opposed to bringing a pre-conceived framework. A list of concepts was later extracted inductively in the analysis process, to formulate an emerging picture, narrative and theory (Suter, 2012). A record of this process was clearly noted and retained. Therefore, in this study, data management was not just a matter of extracting, interrogating and keeping data safe, but it involved the reverent

management of indigenous knowledge as it is an invaluable asset in the development of an African therapeutic intervention. The narrative above has outlined the principles and ethics that underpinned data collection processes, which are discussed in detail below.

4.10 Step-by-Step Data Management of Indigenous Knowledge

Based on the principles outlined above and studies done by Janke & Sentina (2018) and Ngulube (2002), who consolidated the basic tenets and process of indigenous knowledge and data management.

- It is mandatory to obtain a prior informed consent of the traditional healer, faith healer or community groups that have been identified and sampled for interviews. Ideally, a researcher is advised to obtain and retain documentary proof for the purpose of storage, documenting and historical use. In instances where participants object to written agreements, the researcher is advised to enter into equally binding verbal agreements, consistent with the oral tradition espoused by the African worldview.
- In all cases, a researcher, academic or information professional must have a clearly spelled out 'Code of Ethics' from their academic institution, private company, or public organisation in advance of the research or study. Since many universities have Western based Codes of Ethics, it is advisable for African researchers to add clauses to them, which would clarify and expatiate unique indigenous requirements. Traditional councils are very resourceful in this regard and can be contacted by the researcher to establish appropriate research protocols and ethics applicable to their communities.
- Janke & Sentina (2018) concur with PIR principles which state that permission must be requested in terms of copyright clearances before any audio and visual recordings can be made, published or broadcast. Indigenous African communities have the discretion to grant copyright to the preservation and publishing of their sacred knowledge in different ways. There was verbal agreement and oath in this

particular research. The researcher in this study was unaware of other African indigenous precedents regarding copyright clearances during indigenous research. This requires further research so that researcher in indigenous contexts can be sensitized to these procedures.

- Ngulube (2002) proposes that the collection of indigenous knowledge is the primary responsibility of “ethnographers, anthropologists, oral historians” (p.97).
- The storage, archiving, retrieval and use of indigenous data and knowledge is governed by national and international conventions and laws, as was discussed earlier. They include United Nations Draft Declaration on the Rights of Indigenous Peoples (2001), Economic Commission for Africa and the Traditional Health Practitioners Act. 2007 which was amended in 2019.
- All collected indigenous African data and knowledge need to be centralized in regional Indigenous Knowledge System (IKS) resource centers with a view to create some knowledge base, promote and enhance access to this data base (Ngulube, 2002).
- IKS resources may be currently archived using Western information systems while the recommended process of developing community centre-based systems are being developed in collaboration with traditional institutions in communities (Ngulube, 2002). Essentially, Western methods of archiving are used to reserve IKS while Afrocentric archive mechanisms are still in the developmental phase.
- IKS data is stored, archived and managed in the form of knowledge files such as “films, sound recordings, reports, photographs, books and records”, according to Janke & Sentina (2018, p.65). Increasingly, university portals store research output that way and such would be the case in this current study.
- Researchers and co-creators of knowledge are encouraged to document their work and store them in “Galleries, libraries, archives and museums (which) are a vital access point for Indigenous Knowledge” (Janke & Sentina, 2018; p.65)

4.11 Data Collection

To strengthen the research design for this study, IKS was used as the bedrock upon which PIR is based. The following reasons are advanced for this approach:

- * IKS advocates for African cultural expression which reveals people identify, history, beliefs and values (Janke & Sentina, 2018).
- 1. The researcher does not operate as the bearer of knowledge or expert but co-creates knowledge together with participants. He or she facilitates people's involvement in research by soliciting the indigenous knowledge that they are custodians of, in *seboka* or *dipuisano* (conversations), as per observation in this current research.
- 2. IKS as a rich resource of African data and wisdom, is best activated and actuated when people (healers, clients, communities) are actively involved. Khupe, C. & Keane, M. (2017) support this notion by stating that, proper participatory and community centred methodologies need to be looked at, acknowledged and developed. These methods may then be used by researchers when conducting research in indigenous communities.

It was important to link the Afrocentric approach to the African cultural theoretical approach especially when collecting data and in the data analysis stage. The Afrocentric approach refers to an intention to advance an 'African brewed' slant and the attribution of African legitimacy and meaning in the process of constructing knowledge (Baloyi, 2008), as was the case in this study. Wiredu (1998) advocates for an intentional Afrocentric approach to knowledge creation as a 'strategic particularism' wherein, indigenous wisdom is purposely used to inform the process. Furthermore, Ramose (2018) aptly defines an Afrocentric approach to knowledge creation as 'Africans speaking for themselves' thus prompting researchers to be acutely aware and expressively Afrocentric when collecting data in this context indigenous contexts. This sensitivity to African cultural realities constitutes an Afro-cultural approach.

An Afro-cultural approach seeks to explain the various phenomena associated with African cultural practices and behaviour (Asante, 2007). Afro-cultural theory also suggests that the use of African traditions, customs and rituals might help to explain behaviours and attitudes of Africans (Mazama, 2007). Therefore, it follows that, in the creation of indigenous African knowledge, data collection must be significantly Afrocentric in its approach. The implementation thereof, must be conducted in indigenous traditions, customs and etiquette as stated by PIR principles.

This assertion by no means suggests that African female survivors of rape may not have any other contemporary influences on how they would cope as well as receive intervention. Instead, it suggests that one should understand the cultural basis of the African ethos and conceptions of healing when treating African survivors. According to Motsi & Masango (2012) defining and understanding rape trauma, with an Afrocentric viewpoint, is critical as it will most likely provide an appropriate healing process for many African rape trauma survivors. In addition, Afrocentric methods are critical to allow the researcher to deconstruct the irrelevant and culturally insensitive Western practices that, according to Baloyi & Ramose's (2016) observation, have mostly resulted in the distortions, misrepresentation and misunderstanding of African realities. Thus, the Afrocentric data collection that was used in this study sought to introduce relevant indigenous practices that create an awareness, restore indigenous healing modalities for rape survivors of African ancestry.

This study has revealed the following Afrocentric data collection process:

- Consulting the ancestors *ka ho lahla litaola* (throwing of bones)
- Rituals before embarking on gathering data in *seboka* or *puisano*
- The researcher must be willing to learn from the participants and must be ready to engage in a conversation as opposed to taking on an interrogatory interview approach which positions him or her as an expert.
- Adopt a collaborative researcher-participants approach to co-create knowledge
- Observe and respect the sacred invisible nature of the indigenous research process

- The researcher must embrace and blend into the African research context with its unpredictability and unwritten prescripts

The main tools and techniques that were used in this study were:

- *Lipuisano* (In-depth conversations)
- *Seboka* (group conversations)
- Literature reviews of similar research themes

The dominant Western-conceived data collection method of interviewer–participants relationship has placed a researcher as an expert extractor of data from participants. This monolithic approach positions the researcher as the sole formulator of theories and knowledge expert (Held, 2019). This Western approach has limited and ineffective applicability when compared with the Afrocentric concept of data collection *lipuisano* (dialogue) adopted in this research. In support of this view, Mkabela (2005) observed that “Afrocentricity is generally opposed to theories that "dislocate" Africans in the periphery of human thought and experience” (p.4).

While Western data collection methods are inapt in terms of their design and process to fully involve participants in co-creating knowledge and solutions, some Western researchers are beginning to realise its inadequacies and pitfalls. One such author and researcher who is rethinking and challenging prevalent knowledge conceptions and narratives is Healy (2011) espoused in his 'transformative dialogue' discourse. Healy (2011) recognises a need for a deliberative model in research that he argues is as a necessary communicative reform between the researcher and the participants during data collection. He does not only assert the importance of a dialogical communal-oriented data collection process, but he also goes further to advocate for a model that recognises and enhances the 'specific histories, identities and life experiences of diversely situated individuals' to bring about a situated knowledge (p297). The awareness and sensitivity displayed by Healy is consistent with the Afrocentric approach.

Viewed from the above espoused perspective, this study, therefore, adopted African IKS with the tenets of Healy’s (2011) transformative dialogue to collect data while achieving mutual learning and joint knowledge development by the researcher and the participants.

Healy (2011) aptly calls it dialogical reciprocity, in the context of this study referred to as *dipuisano*. The dialogical reciprocity, *puisano* and *seboka* were done within an Afrocentric paradigm. In indigenous research, emphasis is placed on knowledge as a relational concept. This means that the transactions of knowledge sharing are facilitated in social relationships (Smith, 1992). The researcher and participants dialogically engaged throughout the research process. In practical terms, the researcher adopted a more facilitative role while the participants were at liberty to determine, guide and advice how the process would be facilitated. For example, *bakoma* decided on the sitting arrangement and the ritual to be performed to evoke *moya* (spirit), consistent with their healing philosophies, cultural practices and beliefs.

Mkhabela's (2005) thoughts of Afrocentrism are consistent with the researcher's view which is that researchers have to immerse themselves culturally and socially with knowledge bearers, which was done though *puisano* and *seboka* in this study. The type of narrative structure suitable for collecting data for this research was that of *puisano tsa seboka* (conversations). Although Kovich (2010) recommends conversational method for indigenous contexts, this method may in the researcher's view be limited in that it is likely to be subjected to 'group think' which is a phenomenon where participants may tend to think alike to uphold group unity and solidarity (Nyumba et al., 2018). *Puisano tsa seboka* may be less able to reveal the strength of individual participants' views. Despite this criticism against this method, this study was able to achieve the following:

- It facilitated the exploration of the group's shared experiences and phenomenon
- was able to reveal the nature of participants' views and experiences
- It gave a collective voice from indigenous practitioners and the ownership of created narratives and knowledge that emerged from this process.

4.11.1 Sources of Indigenous Knowledge

Accessing indigenous knowledge can be done only through legitimate and credible sources within the African communities. Magni (2017) and Watene & Yap (2015) point out that indigenous languages and values are rooted in the landscapes and natural resources within their territories. It is worth noting that women have a particularly unique role in transferring indigenous African knowledge which encompasses a technical understanding about ecosystems, farming, environmental change, food security and conservation (Wane & Chandler, 2002). Also, of great importance is the indisputable role of the elderly in transmitting African knowledge, conservation and cultural progression as encapsulated in the African proverb which asserts that “When an elder dies, a library burns down” (Maina, 2012). Bujo (1998) promotes the concept of dialogue to build African solidarity and togetherness and its indigenous ethics and morality.

In addition, various African artists and gifted entertainers also possess a range of talents which are fashioned specifically to transmit indigenous African knowledge. According to Owusu-Ansah & Mji, (2013), knowledge is transmitted through “story-telling, proverbs, folktales, recitation, demonstration, sport, epic, poetry, reasoning, riddles, praise, songs, word games, puzzles, tongue-twisters, dance, music, and other education-centred activities in community ceremonies and meetings”. (p. 2).

Consistent to this study, Thornton (2009) found that African traditional healers are committed to a spiritual and generational task of transmitting knowledge within the institution of traditional healing. Apart from their deep technical knowledge of herbs and curing and restoring the sick, African traditional healers are ‘called’ and installed as custodians and educators of African spirituality, customs and community relations (Maluleka & Ngulube, 2018; Mokgobi 2014).

In addition to *seboka*, and *lipuisano* (conversations) with indigenous practitioners who comprise of *baporofeta* and *bakoma*, experiential observations were conducted wherein the researcher performed rituals and observed customs as part of data gathering. The

reason for including indigenous practitioners in this study was that *mokoma or moporofeta* has a crucial link between humans and *badimo* (living dead/ ancestors).

Bojuwoye (2013) concurs by stating that ancestors relay information through African healing practitioners in an understandable manner that may bring new awareness which may help influence behavioral change in clients. This is the kind of insight that this research unearthed/excavated, which clearly indicate that traditional healers are custodians of knowledge. The additional focus of wholistic traditional healing has also included the healers' close association with *setso* (culture), *tsa Baebele* (religious/Bible), *tumello tsa semoea* (Spiritual beliefs) and related practices. In fact, these healers, in most instances, speak the language of those consulting them, they spend time with those seeking their help and they immerse themselves in the cultural context of their clients. Furthermore, the healers provide a diagnosis and prognosis, either through throwing bones, praying or prophesy. (Ross, 2016).

4.11.2 Pokello ea mohloli (Data Collection Process)

The research narratives were collected in isiZulu and Sesotho which helped to preserve the essence of the original meanings of words and expressions. This is because language is crucial not only to the research process, but also to the resultant data and its interpretation (Gudhlanga & Makaudze, 2012). Language allows the research participants to identify meanings of the word. Furthermore, it permits the researcher and the participants to interact to produce an understanding of the social world of the participant and an interpretation of this context (Lee, 2001). That is why, the use of vernacular languages has preserved actual meanings of indigenous concepts and there was no loss of semantics and meaning through translations. Therefore, the use of a vernacular language in indigenous research is deemed a fundamental tool that allows researchers to understand human behaviour, and socio-cultural meanings (Hennink, 2007; 2008; Liamputtong, 2010a, Watkins- Mthys, 2006).

The *Seboka sa bakoma* (Traditional Healers' group) had seven participants. Taking cues from other research such as a study by Zuma et al (2016), group discussions like *seboka*

were conducted with nine THPs. Although the group size was not nationally representative, Zuma et al used the finding to extrapolate to a larger group and to recommend that a large sample study be done. In the current study, six to ten Traditional Healers were sought. In general, these numbers were based on the view that if the number is less than six and if the participants have low levels of involvement with the issue, it would be difficult to maintain an active discussion. In addition, the information generated may not be adequate or rich enough, given that there would be fewer people to interact with (Smithson, 2008). In this study however, the survivor group from ADAPT (*Seboka 2*), was initially composed of five participants but only two honoured the invitation. While on the other hand, the group of rape survivors from POWA (*Seboka 3*), comprised of three participants instead of the initial five. However, participants from the latter group requested that they participate individually rather than as a group.

The researcher honoured their request in line with the philosophy of *Ubuntu* by demonstrating respect for the experiences and choices, as the bearers of knowledge. The initial objective of a dialogue with healers in *Seboka* was to explore traditional healing therapies and related modalities, solely from practitioners and not survivors.

4.11.3 Lipuisano (Research Conversations)

Conversation in research is regarded as an effective tool that involves an exchange of knowledge and ideas between a researcher and participants. More specifically, Feldman (1999) asserts that a conversation method is a collaborative and systematic inquiry that has a threefold goal of gaining knowledge, understanding and decision making.

According to Kovach (2010) and Owusu-Ansah & Mji (2013), indigenous knowledge systems are mainly oral, not written. Kovach (2010) refers to the oral method of collecting data as the conversational method (*puisano*), to gather information through techniques such as storytelling, which are consistent with indigenous epistemologies. As an indigenous researcher, Kovach (2015) has observed that people who live in the margins of society experience silencing and injustice. This is true of participants in this study, such

as traditional healers and African female rape survivors whose views, truths and knowledge do not feature in mainstream research in academia. Kovach (2015) asserts that within research and the process of knowledge production, the absence of an indigenous voice is significant and disturbing. Hence this research opted for indigenous techniques of voicing knowledge which are *Lipuisano* (conversations) to facilitate the production of knowledge to achieve what Kovach (2015) calls emancipatory research. The use of story and conversation is a culturally organic means of gathering knowledge in doing research with indigenous communities (Bishop, 1999 and Thomas, 2005).

4.11.4 Mohloli oa pokello le mekhoha (Data Collection Tools and Practices)

The first phase of data collection, which was about consultations, as well as the subsequent data collection *Lipuisano*, were conducted in isiZulu and Sesotho. English was used in instances when participants opted for it (Keikelame & Swartz, 2015). The PIR data collection method was adhered to, in accordance with respondents' cultural practices and preferences. In some cases, respondents asked for *ukukhanyisela* (prayer or a ritual) to be performed before the data collection process could commence. Traditional healers, for instance, needed *ukukhanyisela* (to 'light up' the path or process) with candles so they can be empowered by *Molimo le balimo* (*God and the living dead/ancestors*) with wisdom to impart knowledge to the researcher.

It is important to note here that the researcher is not regarded as an expert, but as a mutual participant who also takes guidance from participants (Pope-Davis et al., 1997). It was crucial to observe the preferred ways of even a dress code for instance, in some cases; practitioners had to be robed with their special garb, which demonstrate honour to *selimo sa bona* (their ancestors). Practitioners were justifiably pedantic even about a specific sitting arrangement that they and their clients assume during consultations. Although the researcher was collecting data, in this context she was considered by the participants at the level of someone consulting, hence the strict adherence to the consultation protocol. The researcher had to for example sit flat on a grass woven carpet as a ceremonial gesture to respect the sacred space during conversations. Contrary to

the Western approach to research in which the researcher is dominant and almost in charge of the process, in this case, the participants were directing the process consistent with their epistemological paradigm. This is a deconstruction of the normative data collection practice as espoused by Western oriented research.

On a different data collection occasion, the researcher was requested to pray before she left home, ahead of *seboka*. It is important to mention that the researcher had met with *seboka sa bakoma* previously. However, the recordings of the initial *seboka* were lost. The researcher could not locate them on her three electronic formats such as her phone recorder, computer hard drive or on the cloud database where they were stored. Thus, the researcher had to request another *seboka* with *bakoma*. Upon arrival, the researcher was asked to *phahla* (a ritual where one evokes her own ancestors to join the ancestors of all *bakoma* present), by one of *bakoma*, who was in the room and suddenly engulfed by *umoya/moya* (De Ricco & Sciarra, 2005). One of *bakoma* explained that the possible reason the recording disappeared was, a *mokoma* at the first *seboka* divulged names of herbs without permission from his ancestors. Opinions on this phenomenon are outlined in the personal reflection section in chapter 6. These are socio-spiritual nuances and protocols that are unique to an African epistemology.

4.12 Ho fetolela mohloli mokhoeng oa ho ngola (Data Transcription Process)

Data transcription is the conversion of electronically recorded audio data into a written format. It was the first step in data analysis (Bailey, 2008) because during transcription, the researcher engaged with data in terms of hermeneutically translating it from isiZulu and Sesotho to English, thereby assigning accurate meanings and connotations to concepts. Participants were native language speakers. The objective was to capture the original semantics and related non-verbal cues. A series of decisions had to be made in the process of representing audio data, which included reduction and interpretation to ensure that data is readable and meaningful.

The researcher has observed a series of non-verbal actions and rituals that occurred during the process of data collection. They included trances, change of clothing, manner of speech, postures among others, which have rich meanings and subtexts. These were captured as notes and they formed part of the analysis process. The researcher had to make a formal request to obtain personal access to each of the traditional healers (See *Appendix A*). In turn, they had to seek permission from *balimo* (ancestors) to engage in the research dialogues.

In a couple of cases, some healers had to offer prayers and perform rituals (*ukukhanyisela/ ho khantshetsa*) with a purpose of appeasing and inviting *balimo* (ancestors). A sitting arrangement is also crucial as it indicates that a visitor is willing to be humble and is respectful of the sanctity of the practice or consulting rooms. Although a few pictures were taken to illustrate the point, not all nuanced acts could be recorded and transcribed, but they were used in the analysis and discussions in the next chapter. The original recordings and transcripts were captured in vernacular and are retained for verification and reliability purposes, as per requirement. They will be revisited and referenced if a need arises.

4.12.1 Qhaqhollo ea mohloli (Data Analysis)

The process of analysis converts raw data into findings by structuring, ordering and ascribing meaning to transcribed data (Patton, 2002). It is critical to note that qualitative analysis “does not proceed tidily or in a linear fashion but is more of a circular process; it entails reducing the volume of the information, sorting out significant from irrelevant facts, identifying patterns and trends, and constructing a framework for communicating the essence of what was revealed by the data” (de Vos et al., 2005; 333). In terms of analysing the data that was collected from participants, the researcher made an informed decision that, whatever analysis method is opted for, it had to be compatible with the philosophy of *Ubuntu*.

The rationale behind this decision is that, as relevant and useful the typical traditional academic analysis methods are, they are fundamentally inadequate in their design and process, to analyse the intricate meanings, connotations, subtexts that are deeply

embedded in *bakoma*'s knowledge. For this reason, the researcher opted to use Content Analysis and to enhance its applicability in this African research context by incorporating Ubuntu philosophy principles in the process. Practically, this means that during *qhaqhollo* (analysis), the researcher mindfully and respectfully considered every word, concept and notion in its indigenous sense and ascribed to it, its literal, figurative and symbolic meanings. Therefore, Content Analysis is augmented with the researcher's 'cultural intelligence' that is based in the Ubuntu philosophy.

4.12.2 Further thoughts on Content Analysis regarding this study

Content analysis is a 'method for the subjective interpretation of the content of text data through the systematic classification process of coding and identifying themes or patterns' Hsieh and Shannon (2005; p.1278). The secondary aim of this study is to analyse subjective, personal and socio-cultural-spiritual dimensions of rape survivors' experiences that Western based analyses could, hitherto, not achieve. Nabudere (2002) states that analysis of the research content, which has primary or secondary data, is the derivation of "knowledge" that is achieved through reinterpretation of data, leading to the synthesis of theories. Nwoye (2015) concurs with this view by stating that content analysis is compatible with IKS because it 'reflects other ways of theorizing on human knowledge that is fundamental in the epistemological context of African Psychology' (p.108).

This form of data analysis is used in written, verbal, or visual communication messages (Cole, 1988). According to Harwood & Garry (2003), Content Analysis was initially used to analyse hymns, newspapers, magazine articles, advertisements, and political speeches in the 19th century. However, today it is used in many disciplines including psychology (Neundorf, 2002). The rationale for choosing Content Analysis' for this study is its ability to discern real meaning of data in context (Dowe-Warmboldt, 1992). The significance of using content analysis is that this study sought to formulate an African centred way of healing for rape survivors. So, content analysis' approach does uphold the sensitivities and respect that this study espouses.

Additionally, Content Analysis allows for the researcher to test theoretical issues to strengthen data comprehension (Elo & Kyngash, 2008). Krippendorff (1980), Dowe-Warboldt (1992) and Sendelowski (1995) state that Content Analysis, as a research method, makes it possible to condense words into meaningful categories. Furthermore, Content Analysis enables data to be replicated with an aim of providing knowledge, representation of facts and guidance to the study (Krippendorff, 1989). This research method resonates with this study as it sought to strengthen the comprehension of participants' data and to condense it into meaningful categories, from which to provide knowledge that will develop an African treatment modality for rape survivors.

The reliability of Content Analysis is seen in its applicability in either deductive or inductive approaches (Lauri & Kynges 2005). In this study, an inductive approach will be adopted. Inductive Content analysis entails organising qualitative data. The steps are open coding, creating categories and abstraction (Elo & Kyngashy 2008). Weber (1990) and Bernard (1996) state that both inductive and deductive analysis approaches consist of three phases which are preparation, organisation and reporting, which have been followed in this study, to satisfy reliability requirements and to make the study trustworthy.

4.13 Trustworthiness and Rigour

One of the values of qualitative research is the extent to which it is objective in its process of describing, analysing and achieving its results (Zahle, 2020). In this study, the researcher endeavored to remain impartial; that is, not to influence the outcome of the research and to be acutely aware of her own value system so as to process knew knowledge in an unbiased manner.

Interventions, theories, models and other outcomes that result from qualitative research can be deemed accurate and trustworthy once they have been subjected to trustworthiness tests, mostly by peers. Qualitative research findings are, therefore, tested and judged on a standard set of criteria that are determined by an established scientific community. Cutcliffe & Mckenna (1999) maintain that qualitative studies must be tested

for their trustworthiness on criteria that are exclusively developed for the specific methodology. According to (Harrison et al., 2001, Mabuza et al., 2014 and Sinkovics et al., 2012), trustworthiness in qualitative research encompasses following four criteria, which are: Credibility, Dependability, Confirmability and Transferability.

- * Credibility refers to the integrity and, more importantly, the believability of the research to its target audience (McCroskey & Young, 1981). It also denotes the confidence that the researcher has in the truth of the research findings. The essence of credibility is often found in the truthful answer to the question of “How do you know that your findings are true and accurate” (Statistics solutions, 2016). Researchers can establish credibility of their studies by triangulation which entails using more than one method of collecting data on the same topic (Salkind, 2010).

In this study, the researcher has used triangulation in which she verified her data by engaging multiple analysts such as independent editors and professional peers. The most stringent ‘checks’ were done by *bakoma* and *baporofeta* who are the co-creators, guardians and custodians of this knowledge. They have a vested interest in a version of knowledge that is presented in this study, to ensure that it is a true representation. *Bakoma* were consulted continually in the ‘truth’ verification process. In the final analysis, participants are the worthy members of knowledge production process who can fairly judge the credibility of the results. (Birt et al, 2016).

1. Dependability is a characteristic of research which ensures that the study findings are consistent and invariable when replicated by other researchers (Lincoln & Guba, 1982). Usually, an independent audit should attain little variation in terms of the same findings. Dependability is measured in all facets and processes of research such as the congruence of the topic and the aims, validity and application of the methodology, analysis as outlined in the proposal and plan, as well as the presentation of the final outcome. Therefore, each facet and process in a study needs to be presented in detail to facilitate easy verification and the achievement

of similarly ideal or optimum results, by any other independent researcher. Since this is a novel study on African therapeutic interventions for rape victims, the indigenous philosophical underpinnings have been clearly spelt out in addition to step-by-step data collection and analysis strategies, which led to the development of an indigenous research method (PIR) and new therapeutic model (*Phekolo: Mahlatsipa a Peto* – Intimation, Probe, Analyze, Diagnose, Treat and/or Refer (IPADTR) Model. This model will be explained in detail in chapter 6.

2. Confirmability serves to test and ensure that research findings are indeed the results of data collected from participants, and not the researcher's preferences (Shenton 2004). A confirmability test checks the possibility of a researchers' bias in the study because qualitative research provides a wide scope for researchers to apply their subjective predisposition (Patton, 1999). An independent researcher or reader checks if collected primary data, in the case of this study, and resultant analysis are reasonably logical and rational, so that they are more than a researchers' "figments of the researcher's imagination" (Guba & Lincoln, 1989, p 243). The researcher in this study has opted to involve participants in all stages of research by consulting them to verify the accuracy of data collected and analysis thereof. The findings were also subjected to a consultative verification by *bakoma* and *baporofeta* to ensure that the essence of their knowledge is well represented in the researcher's analysis and conclusions. This process has certified the findings of the study as uncensored truth, thereby have passed the confirmability test, in so far as the knowledge co-creators are concerned. This study is open to added confirmability audit by peer researchers.
3. Transferability demonstrates that the outcome and applicability of a study can be utilized for similar situations, populations and phenomena (Krippendorff, 2018). The responsibility of the researcher in this study has been to provide a detailed and accurate description of participants, the setting, sample group characteristics, interview themes and questions as well as related processes.

When all of the above descriptive data are provided in clear detail as it is in this research, Korstjens & Moser (2018) argue that it is then the duty and call of the reader to make the transferability judgement, in accordance with their specific settings and needs.

Chilisa (2012) also points out that participants should be able to recognize the descriptions and interpretations of their human experiences as accurate and true. To ensure credibility in this study, the researcher spent a few minutes at each sitting, to get to know the participants before engaging them on the research. The intention was to build a rapport with the participants so that they would be free to provide truthful information on the topic under study.

To further ensure that the data collection is a true reflection of what has been narrated by the participants, the researcher has recorded all dialogues as accurately as possible by using a voice recorder. The inclusion of participants in all stages of the research, was a fulfillment of an Ubuntu research requirement, which is underpinned by a recognition of *bakoma* and *baporofeta* as co-creators of knowledge and respect of the sacred truth entrusted to them by their ancestors. Hence the almost dutiful and indigenously compliant member checks that the researcher had to perform religiously by going back to some of the respondents to confirm the validity of what has been recorded. Credibility is vital in qualitative research because this method of enquiry is characterized by multiple realities and truths (Chilisa, 2012). This study is not exempted from a credibility audit because it has uncovered multiple realities.

Rigour is a crucial element of qualitative research which provides scientific credence to any study. This study is not exempted from a scientific evaluation to determine its rigor. Koch and Harrington (1998) regard reliability and validity as elements that qualify a study as rigorous. These elements are guaranteed when the study has been subjected to evaluation and approved by peer professionals and participants, as final findings are presented. This requirement is more stringent in the African indigenous research context

because, the 'checks and balances' are integrated in every step of the process, from the onset right to the end.

In this study, for instance, the researcher had to earn approval from *bakoma and baporofeta* by consenting to confidentiality, respect for participants, reverencing the knowledge revealed to her and more importantly, subjecting every step to constant reviews. *Bakoma* and *baporofeta*'s 'checks and balances' were implemented mainly to eliminate mistakes, prohibit improper behaviour, to reinforce collaboration and to reduce the potential subjectivity of the researcher, i.e., a researcher-centric bias. This was *Bakoma* and *baporofeta*'s way of ascertaining rigor in the study because the credibility of indigenous knowledge is at stake. Additionally, supervision contributed to this study's rigor by ensuring that all processes are authentic. The researcher also consulted fellow researchers for verification throughout the study.

4.14 Ethical Considerations

Since this research involved investigating treatment modalities as practiced from an African perspective, it followed the ethical considerations as prescribed in UNISA's code of ethics. Consent to conduct *lipuisano (dialogues)* and *seboka (focus groups)* was granted by organisations from which participants were accessed. Anonymity has been factored in through non-disclosure of names in recorded dialogues and questionnaires. The research report will not name respondents in keeping with the anonymity agreement to protect the identity of respondents. Ethical clearance was sought and granted by the University of South Africa, to conduct this study. Participants have been informed of their right to withdraw from the research process at any given moment and the right to share the results that will emerge from the study. According to Mkhabela (2005); Peters (2013), other ethical considerations when engaging in IKS include the following:

- Researchers must act in an appropriate and respectful manner.
- An appreciation of the significance of all participants.
- The respect and inclusion for the elders of the community.

- An appreciation of the interconnectedness of all things.
- To be accountable to those with, for, and on whom the research is being conducted.
- The researcher has observed all the above in the data collection process.

4.15 Summary

This chapter presented the methodology that was used in carrying out this study. It contextualized the study within Indigenous Knowledge Systems (IKS) and *Ubuntu*, with a specific emphasis on an African-Centered Methodology. The chapter also included the integrated research design, study population, sample size, sampling techniques and data collection methods. The processes of identifying participants, enrolling them on the study, specific etiquettes of relating with them were all framed in PIR and comprehensively discussed in this chapter. Furthermore, ethical considerations that guide the study were also addressed with individual respondents and the groups.

Chapter 5

Presentation and Description of Research Findings

5.1 Introduction

The objective of this chapter is to present, describe and to analyse the research findings that emanate from data collected in chapter four. Content Analysis will be used to decode, or to decipher and interpret participants' narratives with a view to identifying themes and to discuss them alongside observations that the researcher has made during data collection. Content analysis will be applied on primary data through the lens of IKS, PIR and the Ubuntu philosophy, as outlined in chapter four. In its application, content analysis will be enhanced with the use of indigenous cultural competency that the researcher possesses. The process of integrating content analysis with IKS, PIR and Ubuntu philosophy is necessary to achieve the main aim of this study, which is to develop Afrocentric treatment modalities to provide interventions for African survivors of rape in South Africa. Primary concepts and themes that were generated from the data collection phase are presented and analysed in the next section.

5.2 Themes: Rape Survivors

A number of themes were generated inductively after a systematic process of translating discernable patterns, associations and comparable concepts in the raw text (Ryan & Bernard, 2000). These simplified concepts were then clustered in categories and further grouped into the following survivors' sub-themes.

- *Ho tlontlolloa le ho theosoa seriti* (humiliation and stripping of human dignity)
- *Ho tlosa sesila 'meleng* (removing off the filth from the body).
- *Ho ipona molato* (Self-blame)
- *Motlamuoa* (Hostage)
- *Matsoao a bakoang ke peto* (*Rape Trauma Symptoms*)

5.2.1 *Ho tlontlolloa le ho theosoa seriti* (humiliation and stripping of human dignity)

It is a well-established fact in literature that the rape of women is more than a physical attack and a violation of the victim's body (Atwater, 2009; Clarke, 2008; Olomjobi, 2016; Poll & Smith, 2003). Rape violates the dignity of women's physical, psychological, social and spiritual being. This experience is illustrated by *Lehlatsipa* (002) who felt that the stripping off her clothes meant stripping her humanness off;

'I stayed there for a very long time They even robbed me of my phone and took off my clothes. I had no clue what the time was. After a long while taking turns on me.. the one who assaulted me was worse. ...repeatedly raping me... Just before ...the crack of dawn...., they said...guys. we must finish our mission with this girl. We must do something practical because dawn has arrived' (*Lehlatsipa-002*)

It is clear that as a result of the rape, the victim was cognitively affected in that she became disoriented to a point of losing track of time and her location. In addition, she also suffered a physical dispossession in that, her personal belongings such as mobile phone and clothing items were stolen by the perpetrators. What *Lehlatsipa* (002) experienced, attests to the reality that in many cases, rape is coupled with robbery and attempted killings which indicate the multiple violations and dispossessions that victims suffer. The healing process will, therefore, require more than just physical and psychological interventions which are offered by Western trained therapists. Evidence shows that rape survivors have some levels of their personality dimensions; for example, their spiritual being, that is not fully treated by the Western interventions, as indicated below.

5.2.2 *Ho tlosa sesila 'meleng* (washing off the filth from the body)

Ho tlosa sesila 'meleng (scrubbing off of perceived dirt) in the context of this study, refers to a physical gesture or a personal bodily ritual that a rape survivor engages in, which is an attempt to rid herself of 'deep rooted filth'. Survivors state that they use the strongest cloth or 'orange sack' material as scrapers to remove the perceived lingering dirt that is seemingly stuck on them. It is an act of physical symbolism that represents a spiritual

process of removing the survivor's *sesila* (stain) that was inflicted on her spiritual human dimension during the physical sexual violation. Knoetze (2019) supports this claim by stating that in the African context, physical rituals are a method of communicating matters of religious significance by means of actions or symbols. Mbiti (1991) concurs by declaring that rituals are an embodiment of beliefs. This is how the wholeness of being of the rape survivor is fragmented by the violation. Survivors have underlying lingering 'untreated' affective experiences that remain intact and traumatised, which are evident in this extract. Their experiences suggest some form of disconnection with self.

Yes, quite a bit...feels like you could just scrape yourself.... You often don't feel yourself when you take a soft bath...as if you could scrape yourself...wishing this dirt could all come off...as if you are not taking care of your body.....as if it was donated to you by some person ...you don't sense yourself. I never negotiate with my body when it's bath time. A regular bath soap does not make me clean during bathing. I want to bath with Surf.

I feel unclean when I use regular bath soap. I need to actually bath with Surf. I would even take an orange sack and bath with it. I don't want to use only a towel. I take that orange sack and bath with it.... everything including private parts. (Lehlatsipa-004).

The above statement by *Lehlatsipa* (004), supports the fact that survivors of rape tend to battle with the deep-seated spiritual residue of rape that they attempt to eliminate symbolically by hard and repetitive bodily cleansing. In fact, the spiritual personhood of African rape survivors is also grossly affected (Messina-Dysert, 2012). Crisp (2012) states that spiritual and religious wounds inflicted by rape have proven to take much longer to heal. Van Wyk (2018) has found that rape has the effect of destructing survivors' spiritual wellbeing while intensifying their perceived worthlessness. More crucially, rape adversely affects victims spiritually to a point of feeling inadequate, dirty, immoral and incapable of embodying the divine in themselves (Messina-Dysert, 2012). Hence African

survivors feel the need for much deeper cleansing, which *Bakoma* confirm as a spiritual prerequisite for wholistic healing.

Furthermore, African rape survivors experience rape at a spiritual level. For this reason, they search deep within themselves for metaphysical answers which have significance and cannot be measured by empirical criteria. This evidence was corroborated independently by *bakoma* (in the next section) who found that African rape survivors' spiritual trauma was as a result of rape, remain untreated despite other Western professional interventions. Laher (2014) refers to it as 'spiritual illness'. This dehumanizing effect is not healed in the spirit by time, either because, it requires intentional wholistic "diagnosis" and healing by spiritually competent healers, such as traditional healer participants in this study.

5.2.3 *Ho ipona molato* (Self-blame)

Guilt resulting from self-blame has appeared as a dominant experience in all survivors' narratives. It is this experience that is expressed in many different ways, such as being at a wrong place at the wrong time, regrets on their dress codes or attributing their ordeal to their general negligence. Regrettably, some of the beliefs stated above which are seemingly embraced by some rape survivors, are held by some sections of the modern African society, although they are not representative of the indigenous African culture. For instance, research shows that some community attitudes towards women and girls, expressed above by survivors, have sustained the unacceptable levels of sexual violence against them (Segal et al, 2000). In a study that was conducted to solicit the views of young men in Gauteng, 80% of them appear to believe that women were the cause of sexual violence that occurred to them, and 30% were of the view that rape survivors asked for it (Deane, 2002). Some of these views are internalised and expressed as guilt, self-blame and anger at oneself, as illustrated below;

...I was disgusted at myself, angry at myself...feeling awful. Everything about me felt like I was in another world not alive. (Lehlatsipa - 004)

It does appear that the survivors had carried the burden of inflicting survivor guilt or shame on themselves. The tendency of women' self-blame is prevalent (Jewkes et al, 2005; Najdowski & Ullman, 2011). This makes wholistic healing difficult and increases the incidence of unresolved and unreported rape in South Africa. The judicial services' lax attitude in the courts have been a factor in rape survivors' self-blame and a low success in perpetrator prosecution rates. Evidence points to persisting rape myths and stereotypes that exists even within the criminal justice system (Rumney & Van Der Bijl, 2010). Myths such as: The belief that there is a prevalence of false rape charges and that women are vengeful. Another one is that "Real rape is one when a stranger jumps out of the bushes and viciously attacks and rapes a woman in the veld" (Vetten, 2014).

Apart from the societal myths and distortions about rape, African survivors in particular, are more inclined to resort to their spiritual higher power for answers and solutions. In the extract above, the survivor felt as if she 'was in another world not alive' (Lehlatsipha- 004). This is reference to another realm to which Africans regularly consult for reorientation when their earthly affairs are in disarray. Mkhize (2008) and Mpofo (2006) have observed that all intrapersonal and interpersonal conflicts as well as adverse events such as tragedies, are connected to this dimension that the survivor called 'another world'. Other dimensions of survivors remain as hostages as long as appropriate indigenous spiritual interventions are not developed and applied. It is on this basis that this study was conceived. Knapik (2006) showed in his study that some rape survivors to whom the spiritual dimension seemed difficult to reach, remained unrestored or not healed.

5.2.4. *Motlamuoa* (Hostage)

Hostage and captivity of rape survivors happen at three levels; physically, mentally and spiritually. Firstly, in many cases, most acts of rape are preceded by physical coercion and violence which inflict injury and trauma to the survivors' body. Gqola (2007) notes that in South Africa, rape is often accompanied by abductions, stabbings, jackrollings, gang rapes, all of which perpetrate gross physical and emotional harm on survivors. This

was corroborated by all the survivors in this study whose sexual ordeals were accompanied by bodily injuries and psychological trauma. They were all captured and held hostage against their will.

As Watt et al (2015) and Wojcicki (2002) point out that in other cases, perpetrators hold their victims' hostage physically by intentionally making them drunk or spiking their drinks and then taking advantage of them in their incapacitated state. Similarities between coercion and drunkenness or drugged states of rape victims are that, in most cases, women become *Motlamoua* (hostage) and their bodies are temporarily captured, owned and controlled by their perpetrators. As oppose to the myths held by respondents in Deane (2002), that women rape survivors were not the cause of sexual violence and that they have not, by any means, asked for it. It is a matter of fact that, as research shows, bodily injuries are inflicted even when women offer nonviolent resistance or resistance is made impossible by perpetrators because of a preemptive attack, thereby immobilising women physically (Block & Skogan, 1984), before capturing them mentally.

The use of physical violence and associated verbal insults by rapists, as reported by survivor participants in this study (*Lehlatsipa-004; Lehlatsipa-003*), can be seen as a way of taking control of and capturing their body, mind and spirit. Rape is also a psychological act of humiliation which seeks to take over mental control over the victim (Stern, 2012). The objective is to dominate rape victims for the duration of the violation. Brownmiller (1975) asserts that the act of males raping females 'is motivated not by lust but by the urge to control and dominate' (p.1). Domination infers, in this case, an act of lording it over on to a powerless female rape target, which resembles the social power dynamics of men over women in society. Evidence indicates that female rape victims are psychologically captured through feelings of fear and helplessness which tend to be pervasive during the act of rape. These feelings soon evolve into guilt or shame even long after the act and may remain with the survivor for years thereafter (Schwendinger & Schwendinger, 1980). Indeed, rape survivors do surrender due to fear of losing their lives as is evidenced by participant survivors in this research. The excerpt below illustrates a

survivor's helpless state of being captured and controlled by the rapist, as a psychological *Motlamoua* (hostage)

Then he said, ok... you will go wherever you want but now, I am telling you to leave this place. He then pushed me to the car and locked the doors. Along the way he asked me why I don't respond to his calls. I told him I am not obligated to answer his calls because we broke up a long while ago. He claimed he did not tell me he doesn't want me anymore and I have no right to dump him... As long as he is in the locality, he will find me. He'll hunt me down. (Lehlatsipa -000)

A conclusion of a South African study (Jewkes et al, 2021) titled: "*Risk factors for domestic violence: findings from a South African cross sectional study*", asserts that rape survivors may find beneficial resolution in interventions that are premised on 'gender-empowering' psychological support that aims to defuse internalised blame, stigma and shame, that are instilled mentally by perpetrators. The researcher's aim through this study is therefore to make a contribution towards the attainment of wholistically oriented interventions when dealing with rape survivors of African descent in South Africa specifically.

5.2.5 Survivor Theme 4: *Matsoao a bakoang ke peto* (Rape Trauma Symptoms)

Survivors have had their lives altered dramatically after a rape ordeal and they may experience a host of symptoms that persist particularly if they are not resolved, through professional or spiritual interventions. Burgess (1983) has found that rape activates psychological, cognitive, behavioral and somatic symptoms in survivors that she refers to collectively as Rape Trauma Syndrome. Literature backs Burgess' observations by stating that rape survivors display symptoms consistent with Post-Traumatic Stress Disorder (PTSD). The psychological symptoms include; shame, suicidal ideations, blunted affect, and survivor- guilt (Dahl, 1989). While the cognitive symptoms that resulted from rape were found to include; dissociative experience and emotional numbing (Scioli-Salter et al 2016).

In relation to behavioral symptoms of rape, White & Farrell (2001) report that some rape survivors opt for sex avoidance while others engage in risky sexual patterns such as not using protection or choosing multiple sexual partners. Additionally, Burgess and Holmstrom (1974) indicate that rape survivors dread being alone or being with crowds, they experience increased fears of outdoors or indoors spaces, being on high alert with a perception that people may be 'sneaking' behind them.

Messina-Dysert (2012) shows that rape has an effect of causing spiritual death in survivors due to the persistent and prevalent torment that remains unresolved. The adverse impact of rape on spirituality and the associated negative forms of spiritual coping, as discovered by Dale and Daniel (2011), are not well recognised in literature and in intervention practices. This knowledge gap in professional psychology prompted the researcher to conduct the current study. The primary aim of this study is to devise therapeutic modalities of treating all dimensions of an African rape survivor.

'I want to sit alone... when I sit with someone and realise that they annoy me.... At times when a male figure comes along and asks me anything, I am triggered and think to myself, I have no idea what he actually wants and resort to insulting him ...brings conflict. Similarly, when a person asks me out, in fact I rather nastily...and I admit it's not the right thing to do. (Lehlatsipa-000)

'... I grew up bitter because I was not raised by my parents. So, it is compounded by my rape. Now I harbour a lot of anger towards.... I am constantly angry. I am triggered by even minor incidents from people...I don't want anyone to upset me. I take everything seriously'. (Lehlatsipa-002)

'...emotionally like I am short tempered, impatient... like I tend to throw a tantrum readily. I tend to have that anger rather easily. Yes.' (Lehlatsipa-003)

'I grew up being wayward and ended up smoking. I smoked. I started smoking

at the age of 14. I smoked and drank. So, I think I did those things due to the violation that happened to me, but I could not attribute it to my past, then' (Lehlatsipa-001)

'In this ordeal, the one thing that I expected to heal me.... was my mother and my child, only. I was disgusted at myself, angry at myself...feeling awful. Everything about me.' (Lehlatsipa-004)

Participants' experiences in this study have corroborated a host of psychological, cognitive, behavioral and somatic symptoms that literature, cited above in the preceding narrative, has defined and outlined. For instance, *Lehlatsipa* (004) was left with enduring feelings of anger, irritability and self-condemnation as proven by her statement where she states that "*disgusted at myself, angry at myself...feeling awful*". Equally, *Lehlatsipa* (002) also confessed that "*Now I harbour a lot of anger towards... I am constantly angry. ...I don't want anyone to upset me*". This indicates psychological symptoms that Dahl (1989) identified as hypersensitivity, shame and guilt. Scioli-Salter et al (2016)'s observations of cognitive symptoms in rape survivors that include de-realization and depersonalization as well as out-of-body experiences, were confirmed by *Lehlatsipa* (004) who declared that, "*Everything about me... felt like I was in another world...not alive*".

Post-rape behavioural symptoms that were identified incorporated social phobias such as crowd avoidance and self-isolation as found by Burgess and Holmstrom (1974) and experienced by *Lehlatsipa* (000) who, since the rape "*I want to sit alone... when I sit with someone and realise that they annoy me....*". Additionally, some post rape behaviours resulted in the abuse of substances like in the case of *Lehlatsipa* (001) who 'smoked and drank'. Messina-Dysert (2012) and Dale and Daniel (2011), established that rape survivors tend to exhibit spiritual trauma symptoms that comprise spiritual death, feelings of body and spirit dissonance and in this case, a wish for intervention from a preceding generation.

It is widely-recognized that rape has adverse behaviours that are exhibited as inappropriate behaviour which Chivers-Wilson (2016) refers to 'post-assault psychopathologies' (pg. 116). Other post-rape negative behaviours that appeared in the above excerpts include; irritability, anger, impatience, insecurity, fear and mistrust. The experiences above are corroborated by Herman (1992) who has found the same set of resultant behaviours. All these are outcomes of rape that often appear and exist as a composite behaviour which needs wholistic healing. This necessitates a need for culturally appropriate wholistic interventions that would address all facets of a survivors' being. The following *lipuisano* (conversation) excerpts indicates the need for such an approach:

One common aspect of unresolved and unmet healing needs in all of the survivors' statements outlined above, is that they are deeply rooted beyond the reach of human senses. For this reason, rape effects that are embedded in the soul and spirit of African rape survivors are inaccessible to Western diagnostic mechanisms as they transcend the bodily experiences and are vividly embedded in survivors' spiritual consciousness, as observed by Dime (1995). The idea of being a self-blaming, captive, filthy and undignified spiritual being is difficult for the survivor to express in words, particularly in a professional setting. This was evident during *lipuisano* and *seboka* as the researcher in this study, had to probe for deeper meaning and elaboration of words, ideas and notions that participants expressed.

For that reason, therapists in the African context need to be equipped with professional skills, sensitivity and competency in working with indigenous clients to discern deep seated and spiritually concealed trauma. Accordingly, there is a need for the current and future cohort of psychologists to collaborate with *bakoma* and *baporofeta* in providing wholistic therapy for African female rape survivors.

5.3 Themes- *Bakoma* and *Baporofeta*

After a consistent process of condensing large texts, which involved classifying, coding, categorising and verification, six themes emerged. Each theme was analyzed individually, but it soon became evident during the process that, there are links, correlations and overlaps between these themes. Therefore, a few concepts were merged to produce the following themes;

- *Bohalaleli ba tsebo ea semoea* (Sanctity of spiritual knowledge)
- *Molomo oa balimo* (Spiritual channel)
- *Kalafo e akaretsang* (Integrated Wholistic care practice)
- *Peto* (Rape)
- *Thibelo ea bokoeta* (prevention of rape)
- *Mokhoa oa kalafi* (treatment methods)

The six themes are collectively presented and substantiated by direct voices from participants

5.3.1 Theme 1: *Bohalaleli ba tsebo ea semoea* (Sanctity of Spiritual Knowledge)

It became apparent early in the research process that some information and knowledge regarding African spirituality and healing practices are sacred (Kanu, 2018; Nwosu, 2010). This information is exclusive and unavailable to unqualified non-practitioners, including researchers who are not culturally conversant and competent to work with clients who present with spiritual challenges. Kanu (2018) observed that the privilege to access sacred spiritual knowledge is reserved for its 'called' and chosen custodians who include African priests, priestesses, *Bakoma* and *Baporofeta*.

It is critical to note that this excerpt emanates from a second interview because the first one was lost and *bakoma* gave reasons thereto attributing the loss to mistakes that occurred. According to their spiritual guide, the first mistake is the researcher inadvertently left home without asking for spiritual guidance regarding the meeting

with *bakoma*. She did not summon her ancestors. The second mistake was that *bakoma* had revealed to the researcher somethings that were not meant to be revealed as in, names of medicines and herbs that they use.

The concept of '*Tumello ea ho senola pineane*' (sanction to reveal secrets) is an established sub-theme in this research and even on national policy narratives.

'I don't know if I'm allowed to disclose when I haven't been informed to talk about some of them, right? I can't name them before I obtain express instruction to name them.... you see? In order to name them, I should have requested the ancestors first, so that I can name them. We don't just sing them, not just name them inappropriately without asking. Even before we immerse the victim in the bath, we first enquire on a particular prescription, how to mix and apply them. Only then will the spirit direct us to use particular substances...' (Moporofeta-002).

"...like, when you're a spirit-led person, you see all these through ...you're referring to...when...say for instance, you diagnose a client, you diagnose with your head and chest. Revelation just flows down and then they inform you. A voice arrives to you that reveals those issues to you, which inform you whatever is happening about your client...this person ought to do this...this person must have 1,2,3, done to them. I can't name them". (Seboka-001)

"...when a gifted person wants to relay certain issues or connect to listen to what they want to relay. My duty is also to connect with your ancestors (spontaneous collective verbal support from fellow bakoma in the background), your spirit, your forbearers who passed on because my ancestors do not know you. My ancestors have to ask yours to reveal your issues to them...They will reveal it to me, thokoza (salutation)" (Seboka-001)

“More often in rape cases...when you’re in the spiritual realm...when you haven’t ... (claps her hands....) on your legs... your legs will signal to you; you’ll find that you get a chill on your feet...your feet and waist are cold...what is going on? When it is related to sickness, this person has a waist condition, it will be revealed. If it is not a waist condition, it will also be revealed...that there’s something wrong in her body.” (Moporofeta-002)

Healers are able to diagnose and determine the type, location, and cause of illness in their patient by different spiritual and experiential means, as the latter excerpt above has provided as primary evidence. Ozioma and Chinwe (2019) assert that diagnosis and sensing in African traditional healing is regarded as an amalgamation of knowledge, practice, past experience and observations passed down generationally through narratives and by ancestors spiritually. In the excerpt above, the healer’s diagnosis was revealed in her own body by ancestors to point out what her patient is suffering from as well as prescriptions of remedies thereof. It implies therefore that, diagnosis is personal, individualised, spiritual and unique to the survivor or patient. Above all, the traditional healers, *bakoma* or *baporofeta* do not ‘diagnose’, they get guided spiritually by ancestral spirits and they only rely the messages from the spiritual realm.

Literature indicates that some ‘African patients’ firmly believe that the “consultation” (*go itlholo*) should remain a *sephiri* (secret) since the patient’s witches or enemies are not supposed to know who his/her traditional healer is” (Togarasei, et al, 2016; p. 10). It follows that protection through secrecy is needed, not just for the survivor–healer privilege and confidentiality, but for the safeguarding of the sanctity in the consultation process. The South African government supports the secrecy and sanctity of aspects of the African healing modalities due to the potential misappropriation by rogue individuals, companies and international countries. To this end, the South African government has developed a policy framework called ‘The Protection, Promotion, Development and Management of Indigenous Knowledge, Act 6 of 2019. Its objective is to safeguard indigenous knowledge and the bearers of such knowledge against exploitation (Department of Trade and Industry, 2008). It is a widely-held belief, as evidenced and corroborated by participating

Bakoma “that most of the African healers make covenants with their ancestors not to disclose the secrets of the practice to strangers” (Adekannbi et al., 2014, p. 8).

The ‘*Tumello ea ho senola pineane*’ (sanction to reveal secrets) is the sole prerogative of the spirit healing realm that is entrusted to the healer, who uses divination to consult the spirit world. (Ozioma & Chinwe, 2019). The secrete consultation is regarded as a means of accessing knowledge that is typically inaccessible to those without a calling. Omonzejele (2008) asserts that the private and personalised consultation is a transpersonal technique in which healers derive their knowledge of healing through concealed interaction with African spiritual forces. These spiritual forces include ancestors and other spiritual heads, as observed by Olupona (2004).

5.3.2: Theme 2: *Molomo oa balimo* (Spiritual Conduits)

It is evident from *lipuisano and seboka* that all the African traditional healers and faith healers participating in this research, explicitly proclaim and regard themselves as spiritual agents or conduits through which ancestors communicate. They maintain that they do not use their personal aptitude, nor do they heal in their own capacity but function as agents or conduits of ancestors at that point in time. This assertion is supported by several studies in the African context (Mabvurira, 2016; Mokgobi, 2013; Mulambuzi, 1997, Mothibe & Sibanda, 2019).

‘When you enter the spiritual realm and pray for the individual, you are able to pick up that this person is in a case.... has been raped because she will be ...it won’t be you...it will not be you at that moment rather, a diviner at work. So, you’re able to pick it up fairly rapidly that something has happened in this person’s life’. (Moporofeta-002)

Bakoma indicate that they discern through quiet meditation and some revelations come in the symbolism of the bones they use.

‘...when that person has rape related issues, those problems will show up. For example, I work with...work with bones. Here on the bones, it will be

revealed that ...man...this person yes...it's not their first time, they have encountered a problem ..., she comes to realize that, probably, these things follow her around and how will you recognize this person...you will see her... she'll shed tears and cry. Yes. then you question her she'll state everything,' (Seboka-001)

"We have inherited gifts from our maternal and paternal ancestors They had a God given gift. We have to use it as our forebears used it back then. They don't serve themselves. You've been sent...you're a messenger." (Moporofeta,002)

It became evident from the excerpts outlined above that African healers and spiritual diviners derive their diagnosis, treatment, advice, wisdom and healing abilities from ancestors. For this reason, healing is imparted to survivors and patients through appointed human conduits, i.e., healers do not employ their personal potential and aptitude to effect wholistic healing to clients.

5.3.3 Theme 3: *Kalafo e akaretsang* (Integrated Wholistic care practice)

One of the central tenets of African healing is that a person is a multi-dimensional being, that is, personhood comprises of the bio-psycho-social spiritual-cultural being. Mkhize (2011) observes that an African personhood is connected to a variety of multiple human systems of meaning from which they derive a whole sense of self identity. He argues that connectedness to a family, local tribe, clan and community and other African human systems, serves to integrate a crucial socially-embedded self (Mkhize, 2011). Mkhize (2011) espouses the concept of the dialogical self that he uses to argue for a special kind of connectedness, a whole self, wherein multiple orientations emanating are integrated. On this basis, interventions must be at multiple levels to be consistent with this existential reality (Juma, 2011, Sobiecki, 2014).

Wiredu (2001) observes that, ontologically, an Africa personhood is a composite of three constituents namely; the physical mental and the spiritual constituents. He states that the body is host to two non-bodily constituents, both of which hold the will and life respectively (Wiredu, 2001). It is these African human constituents, in African rape survivors, that need to be accessed for treatment if wholistic healing is to be achieved. This point was stressed by several *bakoma* during the conversations. They assert that healing is deep within a person and interpersonal for the living and the departed;

'There is different types of healing in the African way. There is people who get Healed only through prayer. There is people who get healed with herbs, maybe a person will drink something to get healed but it is something that has been there ever since us Africans have been around. It's just that in time, it did not get popular because of certain things that people did...to manipulate the system. So, people would get scared and the way people are portrayed, example... mazangoma (traditional healers) like, I know most people are scared of traditional healers...because of how they are portrayed in movies, let me say on TV'. (Moporofeta-001).

In the preceding extract, *Moporofeta-001* explicates a fundamental fact about African healing traditions, which is that, there are different distinct ways by which African healing is practiced in South Africa. WHO (1976) supports *Moporofeta-001*'s assertions by stating that African healing comprises different traditional and indigenous healing practices and techniques, some of which incorporate plant, animal, mineral, spiritual therapies, physical treatment, psycho-social interventions which are used as single therapies or in combinations. Mokgobi (2014) concurs by arguing that traditional healing refers to various healing systems which are dynamic and variable. Mokgobi (2014) further asserts that traditional healing has never been a homogenous healing system.

It is interesting to note that *Moporofeta(001)* deemed it useful to respond further by stating that 'people', which could be patients, did certain things or 'manipulated the system'. The plausible implication is that people may have strayed from prescriptions or did not apply

healing as per spiritual instruction, thereby giving different healing traditions, a reputational damage. More so, *Moporofeta (001)* points out that different traditional healers and possibly, their various healing therapies, are portrayed negatively in the media as part of relegating indigenous healing systems to the periphery of science and knowledge production.

'My calling is that of a spiritual healer. I assist with children. I facilitate with Ancestral ceremonies. I attend to children with mental disabilities. I attend also, to family matters, so we can assist them in issues that they can't resolve and with children who cannot cope academically at school.'(Moporofeta-002)

In response to a question about *Kalafo e akaretsang* (Integrated Wholistic care practice), *Moporofeta (002)* in an excerpt above, outlined the extended scope of practice that different healers have, in offering diverse therapies. The principle of a diverse traditional healing scope is backed by Mokgobi (2014) who states that the therapeutic services of various traditional healers often exceed the bounds of herbs prescription for physical ailments. Mokgobi (2014) also observes that traditional healers take on many varying roles which incorporate custodianship of “traditional African religion and customs, educators about culture, counselors, social workers and psychologists” (p1).

The current study finds resonance in Utas (2009), who outlines different healing therapies that were used for survivors of sexual abuse in the aftermath of the Sierra Leone civil war which took place between 1991 and 2002. In this case, Utas (2009)' study looked specifically at indigenous healing therapies that were provided by herbalists, Mori-men (spiritual therapists), Karamoko (African Arabic healers) and Soweh mammies who used medicine and spirituality. It appears that all of the Africa traditional healers referred to above may range from different healing backgrounds, but all seem to have spiritual ancestral directives to use natural elements in the healing of sexual abuse survivors. In the case of the current research in South Africa, the spiritual healer explains the process of healing and cleansing of a rape survivor:

'I counselled her and told her that what has happened has happened...she has no power over what happened butto deal with it professionally, she must not keep it inside her but be able to tell, most importantly... a person who can offer help about what happened. She must not blame herself and to put her trust in God.....to ask God to empower her to forgive the perpetrator' ... prepared her candles to pray with, I gave her blue and white candles, holy water... also gave her pink herbal salt (sewasho se se pink) to cleanse. The blue candle is for strength, white candles to invite the universe, angels for protection.....Ok, I put her in a bath of misfortune... bath of misfortune is a cleaning bath that comprise of ash milk and water (Moporofeta- 001).

"Then we prepare bath water to cleanse herself and prepare a mixture with which to bath as well as to prepare her drinking portions which will flush out all calamity through the urinal tract....and her guilt to disappear from her...and to sit her down in a counseling session for a thorough talk" (Moporofeta-002).

Regarding the procedures that *Bakoma* use, confidentiality is upheld and, in addition, values, customs, traditions and the restoring of family unity is respected. Confidentiality in *Kalafo e akaretsang* (Integrated wholistic care practice) is a crucial factor for patients. According to literature, patients value confidentiality that is upheld by African healing therapists or practitioners (Hlabano, 2013; Matlala et al, 2015; Mutola et al, 2021). Hlabano (2013) showed in his study that, in accordance with a concern for their patients, African traditional healers have, invariably, opted to practice concealed administration without employing, for instance, Western official referral slips. He goes on to indicate that healers chose to respect the confidentiality of their clients, as is consistent with the practice espoused in this study by *Kalafo e akaretsang* (Integrated wholistic care practice), with a motive of placing their patients' wellbeing ahead of their business interests (Hlabano, 2013).

In the Mutola et al (2021) study, participants indicated that although they consult both Western and African medicine practitioners in an integrated manner, their choice of

African traditional medicine was motivated by accessibility, trustworthiness, and confidentiality. On the other hand, patients who have consulted traditional healers have expressed their confidentiality needs in the Western consultations, regarding use of health systems (Matlala et al, 2015). This also implies that clients want to be assured of their ethical personal protection and confidentiality as they exercise their health rights in seeking *Kalafo e akaretsang* (Integrated wholistic care practice). In order to protect the confidentiality of their individual clients, African healers can go to an extent of concealing healing secrets between couples as illustrated in the extract below;

“... When you go to that behaviour enquiring from the ancestral granny or grandpa, it is revealed, even confidentiality is observed here. Hmmm, you don't just...you know families will reveal somethings and conceal others...can you fetch water for me or go shopping on my behalf? You just say, sir...please fetch me some candles. Meanwhile you know a store is a long distance away. Quickly, the story goes this, that and that way’. (Seboka-001).

“ It is very important to do that because sometimes a man and wife have come to consult for their home...but it then becomes revealed that either the man has committed something like what in Sepedi is regarded as: o fetile pitseng tse kgolo (he has landed in big pots). That means he slept with a pregnant woman, and now he is sick. So, you can't ask him in the presence of his wife. You have to remove the wife or perhaps when he returns the next day to collect his medication, you reveal to him saying, you see something happened” (Seboka-001).

“Sir, you have violated someone somewhere and I can see a crying victim, you see?.Let's talk. They open up to us because they trust us these people....let him know that he forced himself on her because here I see a victim crying...how do you make him account now....you know despite giving treatment”(Seboka-002).

Another aspect of integrated *wholistic care practice* refers to healing, not just an individual survivor, but also her ancestral generations who are alive and those who have passed on. In some extenuating cases, *bakoma* and *baporofeta* will also cleanse the victims' ancestors who are further down the lineage, to rid current and future generations of the rape curse. This point was clearly articulated by (Seboka -003) who stated that, a rouge ancestor who is not cured of the raping spirit will continue to violate and terrorise other victims if they are not identified and cleansed.

'This man's grandfather, from his lineage, was a rapist, ok ...he adopted rape as his family custom. Now, this one, does it out in the public... ..also adopts it as a custom...preys on the public' (Seboka-003).

"Now, hence we say we need to start with the defiled ancestor, because it was The first to be wayward. It is the one that rises and use this perpetrator. ... which rapes this one (victim). It uses him now evil...which cleanses...yes.....because we'll constantly suspect him as a rapist while it is this bad spirit that rapes. Hence, we find that. that's why we need to cleanse and cast it away in the healing process?"(Seboka-005).

Bakoma also alluded to the importance of working as a collective with other role players. This sentiment was well captured by *Mokoma* (001), when she mentioned that:

"This spirituality is integrated. It's a wholistic care practice. It is not one dimensional. Wholistic means, it goes from your herb to justice". (Seboka-001)

The above excerpt indicates that African traditional health integrates spirit, body and mind in its healing therapies, and is known to be the oldest, most diverse process, as it incorporates cultural and social aspects of healing, thereby making it the most holistic (Mothibe & Sibanda, 2019). The implication is that African healing regards an individual African person, rape survivor in this case, who is composed of multiple dimensions, all of

which are adversely impacted by rape. These multiple dimensions need wholistic therapy in all their levels of being. *Bakoma* also acknowledge that they need to work with other agencies outside of their scope of practice, to ensure that a survivor's being in its entirety, receives healing, recovery, restoration and protection. *Seboka* (005) illustrates this concept in the excerpt below;

“ We treat her and they would...we would even advise her to go get counseling we have ADAPT, yes, when we have ADAPT..... there's FAMSA that will deal with this, there's Life Line that will deal with this..... we refer these people...we refer. There's police that can intervene...also. We have partners ...Life Line, yes...like yes, like, what is it...SANCA” (Seboka-005).

The extract above also highlights the inter-professional collaboration that *Bakoma* and other healers are open to entering into, as well as the acute awareness of their limitations and scope of their practice. For instance, the security and justice cluster has to apprehend the perpetrator and bring them to book. The biomedical fraternity needs to offer immediate intervention to stabilize the survivor and collect evidence for court purposes. Families have to be involved and this aspect would require FAMSA, for example, to locate the survivor's loved ones almost immediately in the aftermath of the crime. Helpful and beneficial as they are, all agencies mentioned above have no capacity, skill, knowledge, scope to reach the spiritual-cultural being of a survivor that needs highly specialised intervention that only African spiritual healers can diagnose and heal wholistically.

In the extract below, *Bakoma* sum up their purpose as, one that is designed to embark on what their calling dictates. For example:

“We restore the inner soul...i'inner soul siyayilungisa..ukuthi abe right...live with it and then life goes on” (Seboka-001).

The one distinct function, role and expertise of *Bakoma* in wholistic integrated healing is to provide spiritual healing. This is the most crucial part whose healing facilitates recovery

in the spirit, mind, body, social and other levels of being, on a rape survivor. As illustrated above, *Kalafo e akaretsang* (Integrated wholistic care practice) incorporates all dimensions of an African personhood, none of which must be left out in the process of healing. This section has, however, illustrated that the most crucial element of healing, is the spiritual beingness that is the core of an African rape survivor.

5.3.4 Theme 4: *Peto* (Rape)

Bakoma believe that rape is a manifestation of wandering evil spirits which often inhabits men and use them to commit sexual crimes against women. For this reason, *bakoma* are of the firm belief that the justice system and allopathic medicine as well as Western psychology have not, to date, controlled rape trends and rates that are prevalent in the African communities in general, and South Africa in particular. However, evidence from *Bakoma* indicates that indeed common rape crime and one which is inherited from errant and delinquent ancestors, can be controlled, as stated below;

“This man's grandfather, from his lineage, was a rapist, ok ...he adopted rape as his family custom. Now, this one, does it out in the public... ..also adopts it as a custom...preys on the public’. (Seboka-003)

As stated above, ancestors can pass their untreated generational spiritual conditions to subsequent lineages who in turn, victimise and traumatise members of society. *Seboka* (005) states categorically that healing must be retrospective wherein the wondering ancestors are cleansed of any untreated and lingering spirits that harbour rapist tendencies. This concept is demonstrated in the following extract:

“Now, hence we say we need to start with the defiled ancestor, because it was the first to be wayward. It is the one that rises and use this perpetrator.... which rapes this one (victim). It uses him now evil...which cleanses...yes.....because we'll constantly suspect him as a rapist while it is this bad spirit that rapes. Hence, we find that.. that's why we need to cleanse and cast it away in the healing process?” (Seboka-005).

The extract above illustrates the fact that a human body exists to host the mind and, crucially, the spirit, which is the most fundamental and powerful living part of a being and subsequently shapes their personality. When the spirit is diseased, no amount of non-spirit founded therapy can heal the core of a human. Rather, healing must flow from the spirit outwards towards the mind and body of an African rape survivor.

“When I say it's a disease, it starts in the mind...it's a psychological condition. A person's state of being, their thinking. When we put it together...returning deep to that consultation now. This person thinks this way, behaves this way...what is this origin of this thing...because it is no coincidence. No one is born a rapist. In all the rapists that we encounter, none was born that way, something has happened to them. That's where we need to go and search cause of this person's behaviour” (Seboka-001).

The extract above clearly demonstrates that a spirit that has been diseased and troubled, will not find rest until it has been healed. *Seboka* (001) and *Seboka* (005) respectively emphasise that the spirit is the seat that hosts the core of our being.

“Meaning psychologically, as a Clinical Psychologist...psychologically in traditional healing...also the psychological part, right? but we go as far as now...the soul, the spirit that is within this person's body (someone groans). What is it about it that we need to unleash or search that this person's behaviour may have a likely cause in his ancestral lineage. (whisper: what happened) what happened? Which of the ancestors need to be cleansed? Which of them violated or were violated back then...those who were not cleansed will repeat themselves upon return” (Seboka- 002).

“So, right now we only focus...yes, we are concentrating on the vulnerable part, as in women but also with these men? What need to happen with these men? What needs to happen...who heals them. Who heals these men? He'll rape and get arrested. There's punitive measures in court. We hand down their sentences

and they go serve their time...they come back. Won't they do it again? They still do it..., they are not cured, this thing is not cured yet... we then run to heal this one... yes, rape victim...who was raped who was raped, whereas the sickest is this one...because even in prison they still rape where they are incarcerated on their own ...by themselves.”(Seboka-001)

“This concept of rape is actually a social malady...almost cultural. Some have turned it into a culture. Will sleep with a daughter in the family because in some households there's a self-imposed customs, are futile customs...the young don't go and consummate elsewhere. I must be the first one...No, that's rape”.
(Seboka-004)

The African conception of wholistic treatment is not only focused or directed at the survivor, but also on the perpetrator and his ancestor. If untreated, the raging wondering rapist spirit can be detrimental to the very family system and the community at large, wherein it can be self-destructive. This shows that treatment cannot be limited to the individual rape survivor or the physical body, in the form of punitive measures. Instead, the spiritual cleansing of the survivor as well as of the perpetrator should be the primary aim. Wholistic healing takes into account the entire interactive communal system, and not only the rape victim.

An interesting view expressed by *bakoma* is that rape can occur in instances where someone is resisting an ancestral calling.

“ Right, in relation to the victim, the victim herself...since she didn't accept the calling from the ancestors. She has to go and negotiate whether she...accepts her calling or not and what the reasons are, you understand? That is on the basis that, if the person...what if she is not a candidate...you see? If she's not a calling candidate, it just means we go and cleanse ancestors because it has been fouled. It is a ritual to plead with the ancestors and appeal for forgiveness”
(Seboka-004).

“And to add on that, if that victim is a called...if she can accept her calling, she will never be raped again. Then we can claim that we can do what... to prevent rape, right gogo?” (Seboka-001).

Some literature shows that indeed, people who resist an ancestral ‘calling’ are punished in various ways, including persistent sickness and misfortunes (Rogerson, 2017, Zuma et al, 2016). However, it was not clear in literature whether rape was a form of punishment that was used by ancestors to reprimand those who resist the calling as is claimed by *Seboka 001* and *Seboka 004* respectively.

On the other hand, rape seems to be a spiritual mechanism that is used by rogue ancestors who possess undisciplined men as conduits to carry out their heinous acts. The above findings are consistent with the findings of a study conducted by Bantu (2012) with prisoners who were convicted of rape. The study investigated cultural influences on rape on African men. “This statement which followed another statement in which the participant had just likened rape to a drunkard who is enslaved to alcohol – describes rape as reaction when something within the individual is triggered – an evil spirit” (Buntu, 2012; p. 113).

This section of *Peto*, has demonstrated that rape is more than just a physical violation of females by males. Equally, rape is more than a form of power exerted on the victim. Evidence from this study’s participants shows that rape is an initiative of uncleansed and rogue spiritual agents. *Seboka* participants have stated that perpetrators need to be cleansed and restored so as to ensure community safety. Clearly, rape does not only inflict physical and psychological pain on the victim alone, but also on families and society at large.

5.3.5 Theme 5: *Thibelo ya Bokweta* (Prevention of Rape)

The prevention of rape in indigenous traditional communities is done by a retrospective cleansing of rapist’s ancestral spirits who prey on victims, through perpetrators. This

implies that once rouge and roaming rapist ancestors have been located and cleansed, many African women in communities, who would have been potential rape victims, would be protected.

A theme that appeared to dominate the conversation during *Seboka sa bakoma* was the 'prevention of a recurrence of rape'. *Bakoma* indicated a threefold objective which was to cleanse the ancestors who were defiled by rapists, purging survivors of their current spiritual trauma as well as for protecting them from potential future sexual violence.

'A special ritual has to be performed.... it has its own ceremony...customised ritual'. (Seboka-005)

Zuma, et al (2016) have observed that traditional healers do not just focus on the psychosomatic symptoms, but they also delve deeper into the patients' spiritual, social, mental and emotional aspects of their illnesses or misfortunes. Survivors may present with physical trauma but traditional healers are trained, skilled and gifted to spiritually discern a patient's problems and matters surrounding their future, as illustrated by *Moporofeta*(001), in the except below:

"Then they apply oil that is how shall I put it.... that it strengthens or prevents It repels other spirits. Yes, like we say that bathing in Aloe that washes away the bad omen to prevent a recurrence. We actually.....like I said, it washes calamities away. Yes, so rape was a calamity that happened' (Moporofeta-001)

Thibelo ya bokweta (Prevention of rape) is a primary focus of traditional healers' services hence they stated in *Seboka* that, they treat the physical manifestation of injuries but they go levels deeper to the spiritual core of the misfortune. Essentially, the cause of the rape is regarded by traditional healers as spiritual and therefore, the prevention of rape is seen as a spiritual intervention, as well.

"And again prevention...I could say yes 80%... 80, 90% we can prevent rape.

By now us having to go back to our roots. When I say our roots, yes we, we more living in a society that is ehh, guided by a Western system, so much that we have forgotten that we're Africans...and all that. Like I said earlier, rape goes as far back to our forebears, in our rurals you know... Rape is not in alleys and streets....it happens in homes (Seboka-003).

Bakoma have also emphasised the importance of returning to the indigenous practices in order to curtail the scourge of rape. They firmly believe that the loss of *Ubuntu* has contributed to the current state of moral decay that execrated the rape culture in communities (Sodi, Bopape & Makgahlela (2020). In addition, Seboka(002) reaffirms her belief that rape can be prevented if a return to old African traditional codes is initiated:

“For example, if old traditions and rituals can be performed again like male initiations, and...in Sepedi we call them (dikgopa) female finishing schools, where girls are gathered, initiated into womanhood and inducted on female mannerisms. I think rape can decrease, because those social norms don't exist anymore...finishing schools, initiations ..they...only 10% of them are practiced here and there, wherever, yes male initiations” (Seboka-002).

Judging by primary evidence that has emerged from *lipuisano* (conversation) with *seboka* participants, rape can be prevented in at least two ways: Firstly, once an African woman has been raped, the susceptibility and predisposition to secondary rape can be removed by the healers through various spiritual healing and preventative healing/therapeutic means. This assertion has been supported by Utas (2009) who observed that secondary rape was prevented in sexual violation of survivors, by adorning them with a piece of string on their bodies, to dispel potential violation. Secondly, the identification, seizure and purging of rouge raping ancestors prevents potential violation of women who, otherwise, would have been victims (*Seboka sa bakoma*).

5.3.6 Theme 6: *Mekhoa ea Kalafo* (Treatment Methods)

The principle of the sanctity and secrecy of indigenous healing modalities dictates that *bakoma* and *baporofeta* cannot reveal *pinyane ea kalafi*, that is, classified healing knowledge without authorisation from their ancestors (Bereda, 2002; Chavunduka, 1994; Semanya & Potgieter, 2014). However, for the purpose of this study, they have provided sufficient information that they deem useful for research purposes and for the development of an intended treatment modality by the researcher, which is an integrated wholistic Afrocentric healing/therapy for African female survivors of rape.

Some of the treatment methods include: the ‘numbing’ of memories which entails purging and expelling rape memories from survivors (Utas, 2009); counselling their clients as advisors and social workers (Mokgobi, 2014); orally-administered herbs and medication such as herbal blends and portions, and finished herbal products (Mothibe & Sibanda, 2019) and corroborated by *Moporofeta* (001) below; the use of topical creams and oils, bath and river cleansing. Apart from the listed methods of medication, other African traditional medicating techniques include rectal suppositories, topical creams, nasal sniffing or through passive inhalation applications of prepared dried plant materials (Ozioma & Chinwe, 2019). In addition to other options, there is prayer and displacing of evil omens into sacrificial animals (Mvunabandi, 2008) as stated in evidence by *Seboka* (003) below.

“Ok to add on the treatment ...right? We even give the person, ehh, in Sepedi we refer to it as a 'Go lebadisha motho' (memory numbing) ...we make her forget that she...displaced her from that situation. We administer treatment to erase the memory, yes what she was subjected to” (Seboka-002)

“Alright, we have medication, right...we handle medication...we orally administer a certain medication to erase her memory of the ordeal, otherwise she won't forget. As gogo said again that such victims live with constant fear right, we can even cure fear with related medication so that she does not

react to males or stranger's knocking, with fear. We can eliminate fear and we can erase her bad memories because, honestly, time goes. she can't continuously live in a rape mentality. Yes, she was raped, and it is past her... in the meantime, what happens to life... go on. Ya, we cure her with appropriate medication.' (Seboka-004)

"When she returned the next weekoh, I gave her sediba (holy water) from a well to drinkprepared her candles to pray with I gave her blue and white candles Pink herbal salts ...I said we should bath her because she was..... children under 21 years of age are not put under the steam." (Moporofeta-001)

"Uhhhm, when you heal a person within African healing perspective, and you take him/her to a cave or to a river or you give them herbs.. which are plants, which are from earth and when we heal, we speak with them, we speak to water, we speak to rocks; we speak with plants....all of that is a sign of the connection with animate, and inanimate objects and entities and creations." (Mokoma -000).

"Sometimes, others use this Guinea Fowl, they don't slaughter it. they don't do anything to it. They take a live fowl and place it on a person. Then they perform this, that or the other. and it will go off on its own. It gets lost, doesn't it? that's (chuckling away) yes...to dispose of something .. " (Seboka-003).

The above catalogue of healing methods is used by different practitioners, based on the victim's spiritual orientation. This list of healing methods is not exhaustive, t but rather represents a sample of some of the African indigenous healing modalities that *bakoma* and *baporofeta* use. Some African traditional treatment methods are concealed to protect the sacred nature of the practices and to also preserve the intellectual property that is entrusted to those who have the ancestral gift. Consistent with the African epistemological paradigm, this sacred practice was respected.

5.4 Summary

The main objective of this chapter was to report and describe the findings of the study as obtained from the participants. After an extensive repetitive process of extracting, decoding and deciphering, as well as analysing relevant excerpts from *lipuisano* through the use of Content Analysis, six themes were achieved. The six themes emerged from dialogues with *bakoma* and *baporofeta*. In addition, five supporting themes emerged from the survivor group narratives. The two sets of themes correlate in that, survivors stated the cultural, physical, psychological, spiritual and societal effects of rape that healers are able to, diagnose, process, treat and possibly prevent, thereby healing the whole multi-dimensional beingness of the survivors in the context of their community. What has been most evident in this chapter is that, even though some of these rape survivors have been through the judiciary system as well as through psychological and medical therapies, they still believed that the resultant rape 'filth' remains intact very deep within their unreached spiritual beingness.'

The next chapter will discuss the implications of the findings, related theory, and how these theories and the knowledge generated from participants in this study contribute to the development of new knowledge of Afrocentric treatment modalities.

Chapter 6

Discussion

6.1 Introduction

It has become apparent in literature that almost all current forms of therapy and interventions that are used in South Africa on African female rape survivors are Eurocentric in nature, content, focus and application. This study explored Western conceptions of rape and how its decades-old interventions have had a limited therapeutic effect on African female rape survivors. The basic premise from which this study was conceived is the apparent prevalence of the unmet spiritual healing needs of African rape *mahlatsipa* (survivors) which has created a knowledge and wholistic therapy gap in South Africa. It is a strong indication that the most current Western-based therapies that are used for African female rape survivors are inadequate and irrelevant. For this reason, most psychosocial treatment modalities that are currently applied in South Africa are not informed by the cultural and spiritual context and therefore, need to be re-purposed so that, indigenous interventions conceived from the African experience and relevant to the local culture need to be adopted for the African context.

This chapter will specifically discuss the results of the study conducted with African rape survivors and traditional healers. The discussion of the results will be framed around the relevant literature and current dominant theories that are used in therapy, all of which will be interrogated in indigenous knowledge and an Afrocentric philosophy. The aim is to consolidate and synthesize primary data and current knowledge into new context-based modalities of treating African *mahlatsipa* of rape. An understanding of the multi-dimensional African rape survivor treatment modality will facilitate an appreciation and application of a wholistic bio-psycho-social-spiritual healing for therapists and healthcare workers in general to effectively deal with indigenous clients, and female rape survivors, in particular.

6.2 Dimensions of an African Person

It is crucial to state that in order to bring comprehensive healing and recovery for African rape victims, dimensions of their complex personhood have to be identified, studied and treated and protected from potential future attacks. Meyer et al (2003) assert that in contrast to the widely embraced and practiced Western concept of healing which treats humans' presumed dualism, that is, mind and body, Mkhize (2004) calls it personhood. The African perspective encompasses the physical, spiritual and social dimensions of the individual. Juma (2011) argues that wholistic healing does not occur in the absence of an intervention of the ancestors who, in the African ontology, reside in the realm of the living-dead. Wholistic healing of African female rape survivors must take place in the spiritual as well as at personal, family and community levels where conflicts and tensions (rape) resulted.

Nwoye (2017) affirms, in his journal article titled; *Afrocentric theory of human personhood*, that Africans live their lives from a knowledge that misfortunes like rape in this case, illnesses, deaths and "failure have their origins from unseen forces, unknown and unseen infuriated spiritual agencies, and revengeful ancestors" (p. 47). Nwoye (2015b) emphasizes that indeed the four possible sources of human misfortunes are biological, psychological, social and spiritual. Nobles et al (2015) affirm this conception by stating the African episteme, that is a way of knowing, is rooted in *Skh Djr* philosophy which posits that the African lived reality is "made up of three interrelated (not oppositional) hierarchical worlds consisting of the immediate perceptible world (the microcosms); the intermediate world of spirits, genies, and beneficial/malevolent forces (the mesocosmos); and the world beyond the senses, the realm of the Divine, ancestors and spirit beings (the macrocosms)" (p. 39). These authors imply that Africans live in all three dimensions simultaneously and continually. This means that whatever happens in the one dimension happens concurrently in the other two dimensions. This assertion is supported by Messina-Dysert (2012) who state that rape is a violation of women that inflicts traumatic injuries to both their physical and spiritual health. This view was also supported by evidence from *Bakoma* (Traditional Healers) in this study, as outlined in Chapter 5. These

assertions back this study's claims that rape is also spiritual, social and multi-generational in its genesis and incidence.

Mokoma (003) states that unrepentant and uncleaned ancestors pass on their predatory habits to be inherited by their surviving offsprings who tend to perpetrate rape in communities. It is on this basis that *Mokoma* (001) asserts that male rapists and their forebears need to be purged and cleansed of their raping evil spirits. *Bakoma* and *baporofeta* are 'called', trained and endowed with the competence to co-labour with ancestors to provide spiritual therapy for African rape victims and to prevent further revictimization. As a result, effective interventions must treat all dimensions of a rape victim and to explore and examine the collateral effects on relations around them, in this physical sphere and the imperceptible domain they live in.

Equally, in the African belief system, rape victims like most Africans, have their lives overlapping with their forebears (Nobles et al, 2015) and their traumatised and raped spirits will outlive their physical existence beyond the current temporal sphere. This implies that the physical body that was raped ought to submit to an all-encompassing multi-dimensional treatment alongside her social-spiritual relations such as parents, forebears and future generations, which have been equally violated together with her (*Mokoma*, 002). Despite well-intended objectives, methodologies, principles and techniques, Western therapies cannot reach the deep-seated spiritual locus of trauma and 'filth' that African female rape survivors perceive, which is embedded in the spiritual domain of their being. Therefore, this reality makes conventional psychology rape interventions limited in scope and effectiveness.

6.2.1 Taxonomy of a limited scope in conventional rape interventions

| Therapies & Basic Tenets | Focus Human Dimensions | Shortfalls & Limitations |
|--|---|---|
| <p>Psychiatry: Drug interventions for PTSD (Osterman et al, 2001)dgf</p> | <p>Biological basis of the mental trauma</p> | <p>The violated African human ecosystem has other dimensions that Psychiatry cannot access</p> |
| <p>Pharmacotherapy Treatment: Internal & external body system changes occur after rape (Chivers-Wilson, 2006)</p> | <p>Reduces anxiety and flashbacks, stress resilience, limits disability and comorbidity, decreases symptoms</p> | <p>Deals only with psychosomatic manifestations of rape. Victim has no control or efficacy over treatment</p> |
| <p>Psychodynamic Therapy: Self-esteem, effective thinking and treating PTSD (Rose, 1991)</p> | <p>Focusses on emotional conflicts caused by trauma</p> | <p>Focuses mainly on the past and does not achieve adjustment. Ignores spiritual being</p> |
| <p>Cognitive Behavioural Therapy (CBT): Management of thought patterns, negative emotions & anxiety. Restores coping & social skills. Jaycox et al (2002)</p> | <p>Mental fortitude and ability to relate socially</p> | <p>Restores deep scars and possible relapse of 'why' issues remain unresolved</p> |
| <p>Eye Movement Desensitization & Reprocessing (EMDR) Combines parts of CBT, psychodynamic, experiential & body-centred therapies Posmontier et al (2010)</p> | <p>Mental processing of trauma</p> | <p>Emphasis is placed on the mind to heal the body</p> |

Figure 6.1: Major psychology treatment options used for victims of rape

Several shortfalls and limitations of current rape treatments are outlined in *Figure 6.1* above. It is evident that none of the interventions conceive of African rape victims as created with other multiple dimensions of being that need intervention beyond their individual bodies and minds.

All this explains the persistent prevalence of unmet healing and recovery needs of African rape victims. *Mahlatsipa* who survived rape express their unmet spiritual needs in implicit and veiled words and narratives that only a culturally sensitive, competent professional can discern such intimations for diagnosis of a deeply-concealed rape-related spiritual trauma. An example of such a deciphered description of an undiagnosed spiritual trauma is expressed by *Lehlatsipa* (00) when she states that she uses strong detergents symbolically in a concerted attempt to purge herself of the 'dirt' that has been inflicted on her by a rapist, but to no avail. She attempted this self-initiated cleansing habit even after undergoing Western- based therapy.

The most telling evidence here is that although *Mahlatsipa* have participated in conventional post-rape counselling interventions, the spiritual trauma remains deeply embedded in their human dimension. The African rape survivor has more than two dimensions to their being, which are simultaneously violated when she is raped. For that reason, for any intervention to provide relevant and appropriate treatment, it must access the 'whole being' through all the human dimensions so that healing, restoration and future protection from revictimization can occur.

Table 6.1 below highlights the only African human dimensions that current Eurocentric conceived interventions do access and treat to a limited extent. The table also indicates (in blank blue blocks) the human dimensions of African female rape survivors that remain inaccessible and untreated by a range of Western therapeutic modalities.

Ref: ✓ = Treated; □ = Untreated

| Western Therapies | Human Dimensions of an African Rape Survivor | | | | | |
|-------------------------|--|--------|-----------|--------|-----------|------------|
| | Biological | Mental | Spiritual | Family | Community | Prevention |
| CBT | | ✓ | □ | ✓ | □ | □ |
| Psychiatry | ✓ | ✓ | □ | □ | □ | □ |
| Psychoanalysis | | ✓ | □ | □ | □ | □ |
| Gestalt | | ✓ | □ | □ | □ | □ |
| Allopathic Medicine | ✓ | ✓ | □ | □ | □ | □ |
| Person Centered Therapy | | ✓ | □ | ✓ | ✓ | □ |

Table 6.1: African human dimensions treated by Western therapies

The above-stated Western therapies have been proven, including in this study, to have limited efficacy in wholistically treating all human dimensions, particularly the spiritual being of African female rape survivors. The limitations of Western therapies are deliberately or inadvertently constrained by their disregard of verbal promptings that are often expressed by African female rape survivors during therapy sessions, in relation to social and spiritual unmet needs. This contention is backed up by evidence from female rape survivors in this study who indicate that the POWA and ADAPT psychological interventions have helped them stabilize and reorient them to a limited extent. However, the participants expressed the existence of lingering deeply embedded unresolved trauma, for which they seek intervention. Therefore, it is a view of this study that Western therapies are reductionist in their conceptualisation and application. They grossly under-represent other human dimensions and they are wittingly or unwittingly ignorant of survivors' full range of subjective experiences. Bryant-Davies et al., (2015) asserts that social support has been consistently flagged as a critical factor that facilitates a recovery process, particularly in a rape survivor demographic sub-group of African descent, in the diaspora.

Ahrens et al., (2010) have proven that survivors who, during therapy, opt for various spiritual means to feel close to God, tend to have higher levels of psychological well-being and coping than those who seem to have no spiritual reference. In a systematic review conducted by Shaw et al. (2005), they found that survivors' choice and use of religion and spirituality in therapy processes proved to be generally beneficial to whole and rapid healing.

Anecdotal evidence in South Africa shows that many rape cases are not even reported to official safety agencies, therefore do not make it to the judiciary rolls due to a general lack of trust in the inept parts of the criminal or civil courts and the general judicial system. This assertion is supported by the Rape Crisis-Cape Town Trust (2020) which indicates that fewer than 20% of rape cases that are reported to the safety and justice system make it to the trial roll and a mere 8,6% of cases end up in a successful conviction. For this reason, survivors opt to disclose their rape ordeal to social support structures like family, friends, religious networks, NGOs and traditional healers to seek solace and sharing the traumatic burden of abuse. African female rape survivors' instinctive motivation to confide in their close family and spiritual networks is an indication and declaration of their need for 'higher' healing intervention. Burgess and Holmstrom (2001) confirm in their study that women who deliberately sought spiritual intervention recovered more rapidly and effectively from post-rape trauma than survivors who relied on standard therapies that did not utilise spirituality.

The socio-cultural and African spiritual ethos that is premised on the Ubuntu philosophy stipulates that every African person, even a rape survivor in this instance, may be restored to become human again in every way possible, through other African humans (Mugumbate, 2013). Hence the saying "*motho ke motho ka batho ba bang*". This ethos is supported by many African proverbs for instance; '*matsoho a hlatsoana...izandla ziyagezana*' (hands wash one another) or '*Matlo ho tjha mabapi* (your inferno affects me too as your neighbour). Effectively, every African human and rape survivor may not be left to deal with their multi-dimensional wounds on their own because from an African perspective, 'an injury to one is an injury to all' (when one person is affected negatively, the behavior/impact will be felt by others in the system), as this *Ubuntu* mantra and

practice dictates. This means that every rape case is not an individual's ordeal but it is an affront to her community. Gyekye (2011) captures this humanitarian approach to life by Africans through the Ghanaian Akan proverb which states that: "The well-being of man (African human) depends on his fellow man" (p.9).

In South Africa, African communities have often taken the law into their own hands by jointly effecting the citizens' arrest and further dispensing communal sanctions and social justice (commonly known as 'mob justice') by apprehending, beating and in extreme cases, killing rapists. Often, the collective opinion of the community is that the justice system has not protected its individual members. This communal action is meted out on behalf of female rape survivors, because rape is not just an 'injury' to one (victim) but a social 'injury' to the community at large.

Many such cases have been reported in the media, although some are billed as 'mob justice' (Chothia, 2019; Hlongwane, 2019 & McCain, 2019). The concept of 'mob' is contestable in this case because it insinuates criminality when a community that has been 'socially raped' responds through collective justice to reclaim its *seriti* (human dignity). One rape victim's ordeal inflicts an injury on the individual, familial, and communal dimension that needs to be identified, diagnosed and treated by a culturally trained and competent professional or referred directly to a specialist African spiritual therapist. Western therapies that are outlined in *Table 6.2* are inadequate to offer healing to African female rape survivors and all their affected dimensions hence a need for an African wholistic healing modality, as well as an additional prevention therapy.

Furthermore, the results and findings of this study in Chapter 5 show that African female rape survivors have a need to seek unexpressed healing beyond what was offered by Western therapies. Rape tends to create intense and persistent post-traumatic symptoms that remain for life if they are untreated (NACOSA, 2015). Due to the state of confusion, denial, anger and a myriad of other reactions in the aftermath, African female rape survivors are not able to fully identify when and which human dimension requires specialized. They may only implicitly infer or provide a cue about their African spiritual

healing need in an encoded language during therapy sessions. This critical therapeutic intimation ought to be deciphered by culturally astute therapists during any of the stages of recovery in conventional treatment.

It is the view of the researcher in this study that therapists trained in Western therapeutic philosophies and modalities will not adequately manage to diagnose the spiritual impact of rape on African survivors, let alone treat it. The findings of this study indicate that therapists assisting rape victims in indigenous contexts need an in-depth understanding and appreciation of an African philosophical worldview that will undergird their orientation and training into African wholistic healing modalities. For this reason, a need for an integration of the biological, psychological, social and the spiritual elements in therapy is critical when dealing with indigenous communities whose worldview and belief systems are premised on the physical and metaphysical ontologies.

6.3 Bio-psychosocial-cultural-spiritual Model of African Healing

The general objective of this thesis is to develop and advocate for an application of a wholistic African spiritual healing or therapy that treats all human dimensions of African female rape survivors.

Sodi et al (2020) show that *Ubuntu* or *Botho* is the quintessential and valid African human experience that constitutes the foundation of African psychology. The identification and acknowledgment of the African spiritual being, as a personal dimension, is the essential element that has been missing in the academy and healing therapies, hence the high burden of neglected African spiritual morbidity in African female survivors of rape in South Africa.

In addition, Sodi, et al (2020) have observed that the four elements that Western conceptualised Psychology has been discounting are; African spirituality, *botho* as personhood, *botho* and interconnectedness as well as *botho* and communalism. Therefore, this study implores Psychologists who are consulted by African female rape

survivors to recognise and employ the four human elements that are outlined above. In accordance to the principles of *Ubuntu/ Botho*, the researcher would like to suggest a set of values that can be incorporated into this African centred therapy for female African survivors of rape. These suggested values will underpin and reinforce the PIR process.

- The therapist will bear in mind that, throughout African human history, healing practice was linked to spiritual connectedness and guidance.
- The African spiritual values and beliefs of survivors are the critical determinants of the therapy journey from beginning to end
- The therapist shall not impose his or her spiritual or cultural beliefs upon any patient- in this case, the rape survivor.
- The multidimensional diversity of patients is an invitation to accommodate therapy protocols sympathetically considering their deeply personal spiritual–religious experiences, values, beliefs and practices.
- When a patient brings up African spiritual concerns and needs, a therapist needs to embrace them as an essential aspect of their being that requires the spiritual therapeutic process.
- African ethical commitments and *Ubuntu* philosophy will be placed as integral aspects of personal spirituality, reflecting African universal values, truths and ethic about humanity.
- A therapist intends to grow spiritually through the relationship with patients, their families, and their community through the privilege of practicing wholistic therapy.

This major professional transformation must precede training in the new, proposed model referred to as *Phekolo: Mahlatsipa a Peto* (Therapy: Female rape survivors), for Western qualified therapists attending to African female rape survivors. Most Western therapies that are currently used in the South African rape intervention landscape fall short of accessing and treating all African personhood dimensions. For this reason, therapists need to recognise the gap in cultural knowledge and skill that this thesis promotes with the conceptualization and introduction on a newbh '*Phekolo: Mahlatsipa a Peto*' Model. This proposed model is essentially a transition framework that Western trained therapists

can use to decipher intimations about untreated African spiritual trauma and to initiate diagnosis as well as to facilitate treatment thereof.

6.4 'Phekolo: Mahlatsipa a Peto' Model

It is in the Africans' human disposition- in this case female rape survivors- to seek solace in their customary psycho-spiritual and cultural refuge when they are under threat, attack, or in harms' way (Edwards, 2011). Mpofu, 2002; Magesa, 1998 and Nwoye, 2017 assert that a disharmony with the spiritual cosmos and ancestors may result in misfortunes in an African person's life experience. During moments of disarray, pain and grief, most Africans embrace a firm belief that those are not just coincidences that individuals encounter but that they are spiritual, multi-dimensional and multi-generational aspects of life that need spiritual interventions (Mpofu, 2002).

For this reason, spiritual healing and wisdom are frequently sought by victims or survivors, as observed in this current study. In their search for spiritual healing, female rape survivors find themselves spiritually underserved. Sue et al, (2009) have found that ethnic groups tend to underutilize therapy services and more frequently terminate interventions prematurely because their culturally based human dimensions are not recognized and well served. The collaboration between a therapist and an African healer during the therapeutic process, especially when their spiritual healing need remains unmet, will necessitate a referral to appropriate healing systems. The need for integrating therapeutic systems for the benefit of an African Female survivor of rape is supported by African scholars such as Mokgobi (2014); Mutiso et al (2014) and Hopa et al (1998).

The implications of the results and findings in Chapter 5 are that it has become apparent that most African survivors do not have the vocabulary to express their unmet need for spiritual intervention. As a result, as opposed to prematurely terminating a therapy that an African rape survivor may be engaged in, there needs to be a systematic mechanism to provide a transition to a more effective specialized spiritual therapy to treat rape trauma and other human dimensions of African survivors. The *Phekolo: Mahlatsipa a Peto* Model has been specifically developed to provide a stepwise approach for therapists to acquire

cultural acumen to discern intimations, analyse, diagnose and appropriately refer survivors for unresolved spiritual rape trauma.

This thesis does not prescribe at which stage or phase in the process of therapy to initiate or activate the stepwise approach in The *Phekolo: Mahlatsipa a Peto* Model. Instead of prescribing a particular point of pausing in the conventional therapy process, *The Phekolo: Mahlatsipa a Peto* process will be prompted by any reference to spirituality, existentialism or any meta-physical concept, from a rape survivor during a therapeutic process. This implies that once a therapist discerns spiritual trauma in a client's language or demeanor, he/she will initiate the *Phekolo: Mahlatsipa a Peto* process. One of three intervention trajectories may be followed:

1. A therapist may terminate the current therapy process and refer a survivor to their preferred African healer, to bring the process to a full wholistic healing circle.
2. The current conventional process may be provisionally halted to allow for the African spiritual healing process to proceed. A client should be given an option to return to the therapist to deal with other issues and conclude the process.
3. A concurrent healing process by Western and African spiritual therapists implemented simultaneously. Alternatively, if a therapist is also gifted and trained in African healing modalities, they may choose to transition to a spiritual healing phase using *Phekolo: Mahlatsipa a Peto* Model. Future studies may further research this and establish its efficacy. In South Africa, there are a considerable number of Western-trained therapists who are also traditional healers and who could be considered for such a study and subsequent collaboration.

It is the therapist's responsibility to discern and explore any existential references from the rape survivor through the *Phekolo: Mahlatsipa a Peto* Model to facilitate a transition to an alternative spiritual healer. In this case, the survivor's spiritual inclination may be any other faith apart from African spirituality. For instance, female rape survivors could declare their faith as Christianity, Islam, Judaism etc., in which case, a therapist would activate the *Phekolo: Mahlatsipa a Peto* process for a referral to spiritual healing phase.

In all cases where a referral is required, it needs to be facilitated by a therapist to a rape survivor's choice of preferred spiritual healing method, a number of logical steps have to be taken and followed within the *Phekolo: Mahlatsipa a Peto* process. The integrated proposed steps (which combine Western and Africa facilitation modalities) are; Intimation, Probe, Analyse, Diagnose, Treat and/or Refer (IPADTR), illustrated graphically below.

Treatment Model

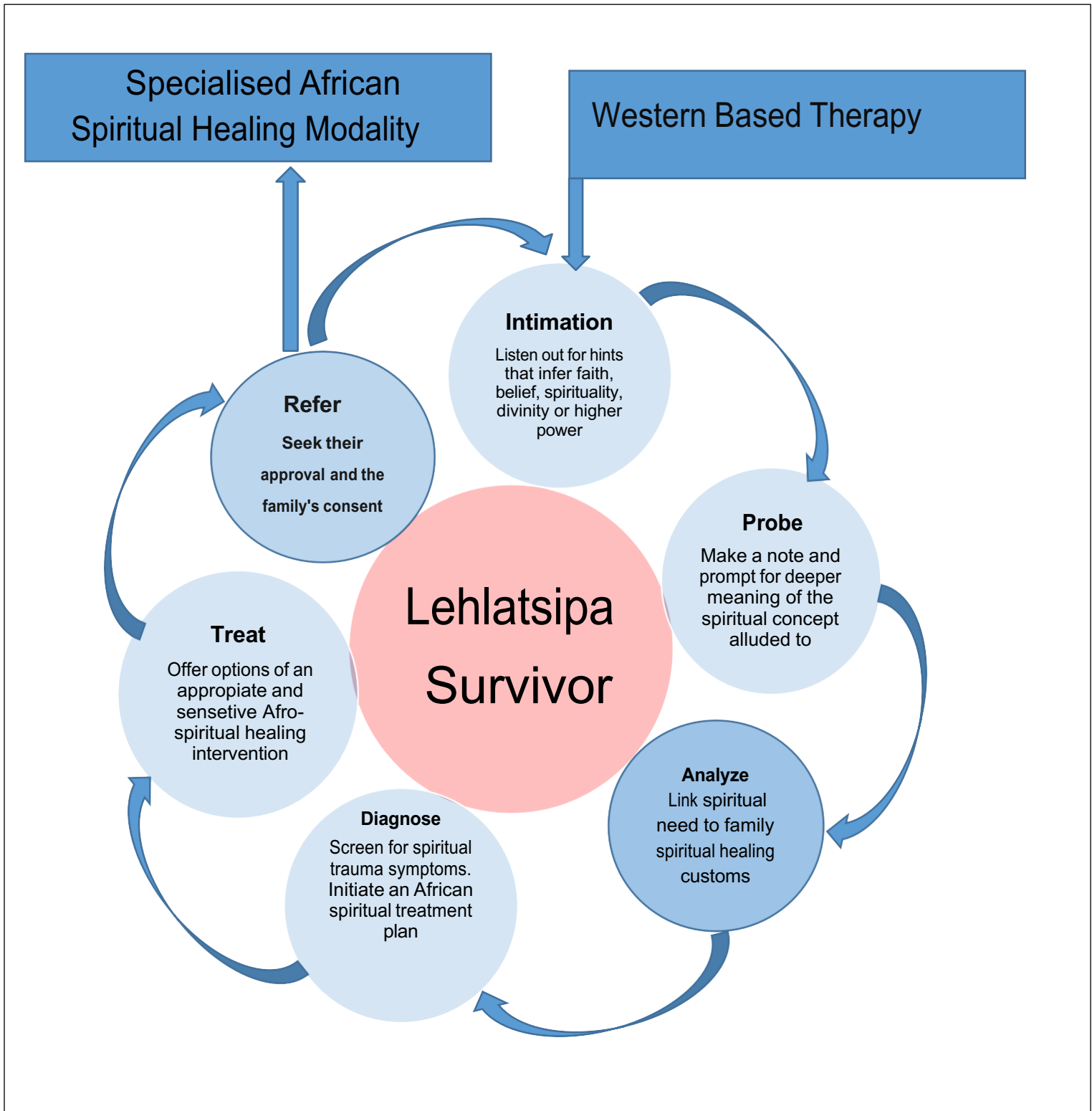


Figure 6.2: Phekolo: Mahlatsipa a Peto Model & Treatment Process (Palesa Mahlangu, 2020)

Employing '*Phekolo: Mahlatsipa a Peto*' Model facilitates a giant leap into the Wholistic and spiritually integrated healing process for the different dimension of female rape survivors. The process of implementing African spiritual healing can be initiated by Western-trained therapists at any of their interventions once reference to spiritual trauma is noted. Although it is not within the remit of this thesis to dictate when the '*Phekolo: Mahlatsipa a Peto*' process is initiated, it is preferable to initiate as early as possible in the conventional therapy process. Ideally, therapists and other practitioners who encounter African female rape survivors should preferably initiate the '*Phekolo: Mahlatsipa a Peto*' Model to refer clients directly to their chosen specialized African spiritual healers. This applies to all professionals who may include Doctors, Police, Social Workers and others, soon after the initial medico-legal process is done. In this case, practitioners and therapists will need supplementary training in a Continued Professional Development (CPD) format to acquire new skills on applying the '*Phekolo: Mahlatsipa a Peto*' Model; The objective is to;

- enable them to be culturally aware, sensitive and competent in working with female rape survivors of African descent.
- acquire network and collaborative skills, to refer for wholistic spiritual healing.

One of the unique benefits and services that are claimed by specialized African spiritual healers is protection from potential future rape attacks, vulnerability and re-victimisation (*Mokoma, 005*).

6.4.1 Vulnerability to Re-victimisation

Literature indicates that survivors of rape tend to have a greater risk of falling prey to re-victimization than average females in the general population (Castro et al., 2019; Godbout et al., 2019; Pereda et al., 2016; Sorenson et al., 1991 & Walker et al., 2017). Sorenson et al., (1991) show that two-thirds of female rape survivors have indicated that they have been raped on more than one occasion. These authors state that each re-victimised person reports an average of 3.2 subsequent attacks to the same or different

perpetrators. Walker et al (2017) reveal that the average prevalence rate of sexual re-victimization that was found in a number of studies was 47.9%, implying that nearly half of victims are prone to re-victimization by the same or any other rapist in the future. This evidence was supported by participating spiritual healers who stated that, firstly, rouge raping ancestors tend to be repeat offenders and secondly, survivors remain without cover until they have sought spiritual intervention. This implies that survivors remain vulnerable and susceptible to secondary victimisation.

Castro et al (2019) have reviewed a number of other studies such as Pereda et al., (2016); Godbout et al., (2019) which have reported that survivors of sexual abuse are three to five times more vulnerable to experiencing a further sexual trauma than non-victims. Three participants in this current study have reported suffering subsequent attacks in the hands of different perpetrators. *Lehlatsipa* (001) was raped by two different cousins in two separate incidents as she was growing up. *Lehlatsipa* (003) was attacked thrice on separate, unrelated incidents. One of them, (*Mokoma*, 000) a spiritual healer, survived the second attempt by invoking her attendant spirit.

“You invoke it, you summon it to take charge and fact is, I don’t remember what I said, was spirit taking charge” (Mokoma-000).

All rape survivor participants in this current study have stated that their post rape behaviour has changed and it is characterized by elevated risk awareness. Their personal alertness and suspicion levels are high for the purposes of preventing potential re-victimization. Davis et al (2006) show that female rape survivors become acutely aware of sexual assault risk factors and they actively gain skills managing risky situations based on their past rape experiences. The risk of a recurrent sexual assault is somewhat reduced due to avoidance of discernably dangerous circumstances. Davis et al (2006) argues that there is, however, no evidence that training and knowledge can eliminate re-victimization over time. It seems that the best efforts that survivors can take are limited to the perceptible environment with physical means only. However, African spiritual healers assert that they do not only heal survivors wholistically but, in some cases, they purge

survivors of the traumatic memories and thereafter spiritually prevent potential future attacks and revictimisation.

6.4.2 Spiritual Prevention from Re-victimisation

It is difficult to find literature (written) which indicates that African healers can spiritually prevent recurrent rape from happening to African female rape survivors. Nonetheless, anecdotal evidence that is passed down generationally through oral tradition has existed since the practice of spiritual rape prevention was initiated in African communities, but it has never been studied and published. This is due to; firstly, African history is passed down orally. Secondly, colonial oppressors did not recognise undocumented historical accounts of African spirituality, which was deemed illegal through the 1957 Suppression of Witchcraft Act (Ashforth, 2005).

However, in 1994 at the advent of democracy in South Africa, a majority of African members of parliament (MPs), initiated and endorsed a policy to officially institutionalize the practice of African Traditional Medicine (ATM) and Traditional Health Practices (THP). The THP draft policy asserts that traditional healers are spiritually competent in health and cultural norms and they are highly respected and utilized in their communities. Thus, one of the objectives of this study has therefore, set out to scientifically investigate claims of spiritual protection against repeated sexual re-victimization of survivors. Evidence that emerged from data collected during the *Seboka sa bakoma* indicate that rape is believed to be associated with evil spirits possessed perpetrators or punishment by angry ancestors, who were inhabited by raping ancestors;

'Ho silafetse sedimo sa victim ne. Setshilafaditswe ebe eba sedimo sa...he re nke hore perpetrator ke monna. Monna o, from emuva umkhulu wayereipa... ok...i'rape wayeyenza usiko lobesikhuluma ngalo lwase khaya. Lona ke manje... useyenza le ngaphandle, useyenz' isiko...useyenza le ngaphandle' (Mokoma, 001).

Translation:

'It's the victim's ancestors who have been defiled right? Defiled...then it is his Ancestors...let's assume the perpetrator is a man. This man's grandfather, from his lineage, was a rapist, ok ...he adopted rape as his family custom. Now, this one, does it out in the public...also adopts it as a custom) preys on the public.' (Mokoma, 001).

'Manje for me it's like there's a historical part la. Ukuthi la, icala khona lendaba yokuphinga, kwakukhona olungile nongalunganga. Ngiyibeka kahle? So, kwaba nalo ongalungile waqoshw' ekhaya. So, uma sikhuluma gomoya omubi, sikhuluma ngalo oqoshwe ekhaya... And then kwa...mangiloko ngifunda, ngiyezwa ukuthi imimoya mibili. Kukhona umoya omuhle kube nomoya omubi. Manje lo omubi hilo o ukwenzis' izinto ezimbi plus ukuphinga..uyabulala... wenza zonke lezozinto?' (Mokoma,003).

Translation:

'Now for me it's like there's a historical part here. That is, where the rape issue starts, there was a good and a bad spirit. Do I state it as it should be? So, there was a bad one who was ostracized from home? So, when we talk about a bad spirit, we're referring to the one who was ostracized from home? And then, as I read on, I hear that there are two spirits. There's a good one and there's a bad one. Now, this bad one is the one that...He makes you do bad things including rape?... it also kills...does all these bad things? Ok.' (Mokoma,003).

The spiritual healers' evidence above indicate that rape has a spiritual origin and, as such, it is a socially manifested malady that can be treated spiritually. As shown above, (Mokoma, 000) believes that she warded off a potential rapist by uttering unintelligible words after invoking and summoning her attendant spiritual custodian. She is of the view that she managed to fend off a rape attack primarily because she performed the requisite rituals after the first rape episode. To this end, she is of the firm belief that she was sealed with an indispensable spiritual veil against prevalent rape.

Different spiritual healers, faith healers and other African diviners employ culturally-appropriate methods of conferring spiritual protection to female rape survivors, depending on their clients' African ancestral spiritual orientation. Rape prevention and protection forms part of the post rape wholistic therapy for African survivors. The process of applying it, is a matter for individual African spiritual practitioners and their clients who are not a homogenous group, and neither are their rape ordeals.

6.5 Reflections

The reflections and lessons learnt on the research journey led to the conceptualisation and formulation of *Liphuputso tse Akaretsang Batho* (People Involvement Research- PIR) methodology and the development of the '*Phekolo: Mahlatsipa a Peto*' Model. The incomprehensible disappearance of the first electronically recorded *puisano* (conversation) held with *Bakoma* (traditional healers) was very interesting. Initially, I understood the loss of information as a random experience. However, upon consultation and conversations that ensued from my interaction with *Bakoma*, it was revealed that this "loss" was a spiritual matter to which I had no control over. According to Mokgobi (2014) traditional healers for example, are regarded as *badiriswa*, agents of the ancestors. Traditional healers and prophets' work is, therefore, facilitated by the spiritual agency that is guided by a higher power. When *Bakoma* mentioned that one of the reasons for the inexplicable "loss" of data was that I did not pray and request for clear guidance or path from *badimo* (ancestors) before I embarked on the journey of gathering data. The "loss" was some form of meta-communication from the ancestral spirits, which indicated their dissatisfaction with me for not performing the required rituals as part of veneration. My data gathering process was not sanctioned by those who possess knowledge, the ancestors or God. This created a relational misalignment between me and the ancestral spirits (Edwards, 2011 & Mulambuzi, 1997). From an African spiritual conception of reality, the "loss" is a form of punishment meted out by the knowledge bearers.

Therefore, a crucial lesson that I took away from this current study is that it is possible and permissible for a researcher to access African spiritual knowledge for academic

purposes, albeit on particular conditions. These conditions are, however, not spelled out in a written format or document. Instead, they reside in the spiritual realm and can only be accessed through ancestral veneration, because ancestors are regarded as the source or conduit of spiritual knowledge. When a researcher intends to access African spiritual knowledge, he/she must adapt mainstream methodological techniques to indigenous procedures that are guided by the spirits. On this basis, I had to learn new African indigenous research rules and align regular academic conventions and personal customs to the African spiritual knowledge paradigm. I, therefore, had to engage in a pre- data collection induction session where my respondents orientated and introduced me to the dress, language, behaviour required when one conducts research in African indigenous contexts. It was from this journey that the PIR was conceived and applied as outlined in Chapter 4 of this current study. The idea of being guided by the participants is not consistent with Western-oriented research. From the Western research paradigm, the researcher is an expert and guides the research process.

The second reason given was that the *bakoma* who disclosed the names of the herbs did so without permission from their ancestors. This demonstrates the importance of respect and obedience to *badimo* (the ancestors). This was further demonstrated when *moporofeta* (001) had to adhere to the instructions on what colour clothing to wear during *lipuisano*. The sitting position as guided by *badimo* had to be adhere to. My humility and respect for *Modimo and badimo* (God and the ancestors) was renewed. I have learnt that from an African spiritual point of view, *Modimo le badimo* are directly involved in the day-to-day bio-psycho-social- spiritual aspects of African lives, including that of female rape survivors. It also became clear for me in this study that events in the physical realm are connected to and have a direct bearing on the spiritual realm, and vice versa. Therefore, research on African spiritual matters transcends mere logical and intellectual exercises, processes and methodologies that are espoused and prescribed by academic institutions. When conducting research in the African context with indigenous traditional knowledge bearers, researchers need to understand and respect the complementarity that exists between the physical and spiritual ontologies (Mokgobi, 2014 & Lebaka, 2018). There is

an inextricable relationship between the researcher, the research context, and the participants with whom one engages, which always need to be observed (Hindess, 1977).

6.6 Implications

6.6.1 The overlap between Western and African interventions in post-rape service provision

This current study has shown that *bakoma* and *baporofeta* attend to African female rape survivors who are in some instances, concurrently consulting Western medical professionals like psychiatrists and psychologists (Van Niekerk et al., 2014). Some of these survivors have undergone Western based psychological interventions like the POWA or ADAPT counselling programmes and then proceeded to seek African spiritual healing thereafter. In some cases, an African rape survivor might have to take pharmacological medication and herbs simultaneously as prescribed by a Western practitioner and an African spiritual practitioner, respectively (Yuan, 2016). This practice is not unique to this study and it is not confined to rape cases only. Literature indicates that this is a widely practiced health phenomenon in South Africa and on the African continent (Madu, 2005; Sodi et al., 2011; Hughes et al. 2013; Marais, Steenkamp & Du Plooy, 2015; Mothibe & Sibanda, 2019; Utas, 2009). This clearly demonstrates the dire need for collaboration between Western trained professionals and traditional African spiritual healers.

There appears to be no conclusive evidence that the combined use of traditional indigenous intervention and Western medication has had adverse effects on patients or survivors. In a study conducted by Puoane et al., (2012), HIV positive patients, one of which was an African rape survivor, were taking a combination of ARV's and traditional medicine but reported no adverse effects.

In the same study, Western medical professionals raised concerns about the toxicity of traditional medicament but offered no evidence. More specific research that pertains to a combination of Western pharmaceutical therapeutics and traditional medication for African female rape survivors needs to be conducted to determine the effects on patients.

Evidence from this current study showed that *bakoma* and *baporofeta* use African herbal medication to treat psychosomatic effects of rape. As observed in this study, it must be borne in mind that African spiritual healing is a wholistic healing intervention that treats the physical and the non-physical dimensions of an African personhood (Mokgobi, 2014). This study does not necessarily encourage the simultaneous and combined use of the two approaches. Further research in this regard is necessary. This medical dimension does not form part of this study and will be deferred.

A range of techniques are employed in African spiritual healing to treat female rape survivors. Some of the non-physical and symbolic techniques which imply the application of healing without the use of ornaments, objects, chemicals or equipment. Symbolic healing techniques include prophetic healing, ritual dancing, praying through candles, appeasing ancestors thorough sacrifice, counselling, education as outlined in chapter 5 by *bakoma* and highlighted in literature (Anderson, 2009; Hammond-Tooke, 1989; Mokgobi, 2014 & Van Wyk, 2018).

The implication is that a large percentage of post rape wholistic healing and rape prevention cases are not correctly attributed to the African spiritual healing space. It would also seem that the epidemiology of untreated post rape spiritual trauma is unknown and potentially high. This could be a disadvantage to the African female rape survivors because they may be unaware of available specialised indigenous healing services, their benefits, as well as ways to access them. Therefore, the impact of the overlap and concurrent Western and African post-rape service provision needs further research that will produce evidence to inform policy on rape prevention and healing interventions.

6.6.2 Implications for African traditional and spiritual healers' regulations

South Africa, in particular, and the African continent, in general, are hosts to many widely-varied African spiritual healers and practitioners. It is a well-established fact that these healers' training is predicated on the broader African worldview and cultural value system. Historically, the African indigenous healing system has been marginalized by the

dominant Western “scientific” healing sector (Mokgobi, 2013). This has thus unjustly and unjustifiably presented the African spiritual healing systems as less professional, unscientific and ‘barbaric’ (Hopa et al, 1998). The exclusion of the African spiritual healing systems has deprived African rape victims and survivors of alternative methods of healing. The media has, in the past, also played a significant role in highlighting several malpractices in the African traditional healing space in a biased manner (Rautenbach, 2007). This is so because the media is mainly controlled by people whose worldview and orientation is premised on the Western paradigm, and benefit materially for projecting the indigenous African healing systems as unscientific, ‘barbaric’ and dangerous. There is, therefore, skewed economic politics in favour of the Western-oriented medical and psychological healing system. This study’s findings clearly demonstrated the efficiency of traditional healing interventions on African female rape survivors.

African female rape survivors, just like medical patients in South Africa, seek healing services from practitioners and structures in which they hope their basic human rights will be protected (Tauber, 2005). Once they are violated, female rape survivors are in an even more vulnerable state than before.

According to Nevhutalu (2016), the medical sector is relatively well regulated, and patients are treated in a protected, legal environment. The South African government uses several acts and legal instruments to protect medical patients and practitioners. These acts include the Constitution of South Africa enacted in 1996, National Health Act (61) of 2003, the National Patients’ Rights Charter of 1999 and the Batho Pele Principles of 1997. However, it does not mean that Western practitioners do not abuse patients or are not found guilty of malpractice. The above assertion by Nevhutalu (2016) does not consider how the very South African constitution does not support and protect traditional healers and their practice.

This implies that the state ought to strengthen the Traditional Health Practitioners Act of 2007 to integrate patients’ rights and align it with other suitable patients’ legislation. In the researcher’s view, the strengthening of the Traditional and African healing system regulations will have at least the following threefold benefits:

- It will protect African female rape survivors and the sector from fake imposters and unscrupulous practitioners. Every practitioner will have to be vetted and regulated by peers and the state through some regulatory statutory body.
- The regulatory body to be transformed to reflect the African worldviews and experiences as the basis of its training philosophy.
- It will further recognise and elevate the African spiritual healing systems to the level of other world healing systems, and thus challenge the misinformation and bias emanating from decades of Western subjugation and denigration of the African thought and practices. The wealth of that is embedded in the African indigenous knowledge, skills and efficacy that forms part of the health service practice and benefit African female rape survivors in particular.
- In this way, health funders, employers, researchers, and other knowledge producers and training institutions such as universities will have to recognise and partner with the African healing organisations to form an integrated and wholistic health system in South Africa.

The integration of a spiritual element into the dominant bio-psychological counselling and therapy models, requires further exploration (Edwards, 2011; Ngubane, 1977& Nwoye, 2015b). This will necessitate the adoption, application and integration of the traditional healing system into the South African health system to create a truly wholistic healing system that takes all realities of health care users into account.

6.6.3 Adaption and Application of *Phekolo: Mahlatsipa a Peto* Model in other healing contexts

This research is specifically designed to investigate for spiritually based wholistic healing for African female rape survivors. Most of the African female rape survivors have a spiritual orientation which is based on the African worldview. The wholistic African spiritual healing principles and the specific 'stepwise' approach that has been developed

in this current study may be useful if it is also adapted for female rape survivors of non-African descent, particularly if they believe in spirituality. The belief in spirituality is not only limited to the African people. The stepwise approach that is made up of Intimation, Probe, Analyse, Diagnose, Treat and/or Refer (IPADTR) can be used as a guideline in South Africa to all forms of spirituality-related challenges.

However, the outlook and outcomes beyond the (IPADTR) process is dependent on two main variables, i.e. the type of spirituality and the trauma suffered. Equally, the referral system should consider the credibility of regulated spiritual and legal stakeholders who have been vetted and pre-approved by their traditional organisations, clinicians, therapists and their professional associations. The suggested collaboration is key to the success and effective implementation of this culturally appropriate model.

International research shows that several communities that are deeply entrenched in culture and belief systems throughout the world, have toiled with the concept of healing female rape survivors beyond the body and soul (Bryant-Davis, 2013; Knapik et al., 2008; Landry, 2001; Sigmund, 2003 & Utas, 2009). The (IPADTR) model is worth exploring further for adaptation with culture and context specific variables of different countries.

This current study is exploratory research of an effective spiritual intervention that can be used in areas that have been left to the limited devices of Western treatment modalities and methodologies. This study does not claim to have explored all the nuances of spiritual healing for female rape survivors. Its scope is limited to the South African context with several limitations that are discussed below. It has, however, tapped on a latent subject that was subdued for decades due to imposed Western epistemologies.

6.6.4 Implications on methodology

The development of the People Involvement Research (PIR) plugs a gaping hole that existed in research methodology up to this point. PIR has positive implications in indigenous knowledge exploration, examination and enquiry where the stewards of

African spirituality are drawn in to actively participate as co-creators of the healing knowledge.

6.6.5 Level of Practice

The PIR methodology is designed in such a way that it will be a reference point from the conception of a research project, leading up to the report stage. The reason for this is that, it needs to incorporate 'people' who are the conduits of spiritual knowledge from the planning stage. Additionally, PIR will be employed at the therapeutic level where prevention of repeated rapes through rituals is applied. PIR facilitates treatment modalities that are wholistic and which include *Bakoma*. This means that psychologists and rehabilitation centres need to collaborate with *Bakoma* at a professional level, using information that would have been collected through PIR.

6.6.6 Policy

PIR as a tool is designed to provide a solution to an existing knowledge deficit in South Africa. For this reason, it needs to be mainstreamed and utilised in academia, indigenous and Western health, as well as in government to inform interventions. Therefore, it is essential that lobbying and advocacy efforts be made to influence policy and regulations for the incorporation and use of this knowledge tool in all strategic and operational spheres of society. More importantly, to enhance policy development to work in consultation with indigenous associations.

6.6.7 Training

PIR needs to be incorporated as a component of Indigenous knowledge Systems (IKS) to be included in the curriculum to train and enhance the capacity of therapists for awareness, sensitivity and competency to address the spiritual needs of *mahlatsipa*. The theories that are taught in universities and professional institutions will be more relevant and effective when integrated with indigenous thinking that incorporates PIR.

6.7 Limitations of the Study

1. The sample population in this study was relatively small and constituted mainly of Gauteng based traditional healers, with an exception of one Mokoma (000). Therefore, it lacked diversity.
2. Although none of the survivors shared identical biographical traits or similar experiences, they do not represent all the experiences that many African female rape survivors could have offered to the study, if the study population was larger. More diverse ethnic backgrounds, age ranges, faiths, or other variables would have brought out more nuanced aspects to the subject at hand.
3. A closer exploration of the literature on African spiritual healing of female rape survivors reveals many gaps which indicate that there is much research that still needs to be done. For instance, all the respondents were victims of common crimes as it often occurs in Gauteng. Literature shows that other, African female rape survivors that this study did not reach may have been victims of war, broader Gender Based Violence (GBV) such as spousal or date rape, affected due to alcohol, disability, or other varying factors.
4. The subject of African spirituality in post rape therapy has been poorly addressed by researchers previously because of the centuries long feud between spirituality and science which continues to be debated in academic circles (De Cruz, 2017). This creates a serious limitation in the practice of psychology, especially in the South African context where the majority of people believe in spirituality.
5. Although much work has been done politically in Africa to demystify the relevance of spirituality in health; some influential, academic, financial and cultural institutions still dominate the research environment and narratives which make research in spirituality less attractive for psychologists (Alem, 2019). Accessing research respondents is still difficult due to stigma, shame and awkwardness that shrouds African spirituality and healing practices. There is a need for a concerted paradigm

shift that this study and the works of some scholars such as Mkhize, (2004), Mkhize & Nobles (2020), Nwoye (2015, 2017, 2020.), Sodi et al (2020), Baloyi & Ramose (2016), Nobles, et al (2016), Baloyi (2020a, 2020b) have consistently argued for.

6.8 Recommendations

1. This thesis explored a largely untapped research area due to multiple factors. Among them are the chasm between spirituality and science mentioned above; centuries of systematic colonial academic imperialism; cultural and epistemological subjugation and Western religious domination. Therefore, due to the limited scope of this research, all other associated facets will require further exploration through subsequent research. Future studies and investigations are necessary to validate the findings of this study.
2. There is evidence which confirms that African rape victims have opted to consult traditional therapists and faith healers to remove what they consider as 'bad spirits' associated with rape. This implies that they are fully cognizant of the spiritual attributes of rape and how it impacts them beyond the rape episode. This area of study is crucial as it has a bearing on preventing rape in the first place, averting recurrent rape of survivors, and ridding perpetrators of spiritually-attributed rape dispositions. This research is not only beneficial for vulnerable women and dealing with the scourge of gender-based violence in South Africa, but it might also facilitate the delivery of justice on the judicial system in South Africa.
3. Although this study focuses on African spirituality and rape in South Africa, its slant, methodology and the *Phekolo: Mahlatsipa a Peto* Model can be used to provide the basis for further research on other forms of spiritual interventions on other forms of personal and social trauma like violence, accidents and bereavement.

4. Properly considered, the model *Phekolo: Mahlatsipa a Peto* may be useful in, for example, the judiciary process where both the Western trained therapist and the African spiritual or traditional healer's observations may be collaboratively viewed by a culturally sensitive judicial system and be admissible as evidence to assist the judicial process in making informed decisions.

Secondly, most traditional healers and faith healers who were interviewed indicated that they have cleansed several offenders which saw the rate of recidivism declining in their communities. Spiritual treatment of rapists and would-be rapists will be beneficial to avert potential rape of vulnerable women and further prevent revictimisation of female rape survivors. This intervention will also serve to enhance the rehabilitation of current rapists in the justice system, for the benefit of all women especially female rape survivors. In this way, interventions with female rape survivors would be relevant wholistically because they would be based on local worldviews and cultural experiences (Okere, 2005a). This process has already been studied in several African countries as demonstrated in a study conducted in Northern Uganda by a PhD candidate (Adibo, 2017) at the University of KwaZulu-Natal. Further research is needed in this regard.

5. The *Phekolo: Mahlatsipa a Peto* Model provides new knowledge, expertise, skill and competency that all practising Psychologists, Psychiatrists, Social Workers and an array of Mental Health Practitioners need to learn and apply in their respective professional settings. It is a bio-psycho-cultural-spiritual approach that professionals can assimilate into their current therapies through training. For this reason, there is a need to research and develop training programmes that can be integrated into current professional psychology curricula in institutions of higher learning.

Additionally, a supplementary training programme needs to be developed and Offered as a certificate or diploma course for professionals who are already in practice. This can also be offered as a series of Continued Professional

Development (CPD) courses to equip professionals with this new orientation, knowledge and competency.

6.9 Summary

This study has contributed new insights into the existing, but limited, body of knowledge relating specifically to the healing of female rape survivors' human spiritual dimension. The main aim of this study was to develop a pathway to spiritual healing modalities for African survivors of rape. Exposition of literature has shown that for many female rape survivors of African descent, spiritual healing is a fundamental aspect of wholistic healing/therapy that covers a full circle of healing with African rape survivors. Furthermore, African academics on the continent and in the diaspora have illustrated that Africans are multi-dimensional in their being. Therefore, any experience of rape trauma in one area of their lives, has a ripple impact on all dimensions and will require a multifaceted intervention to achieve healing of the whole being.

Evidence has indicated that a socio-cultural spiritual reality of African beings is derived from a cosmology that transcends time and the perceptible world. However, the discipline of psychological counseling has been intransigent and incompetent in acknowledging the need to address the spiritual dimension that remains 'raped', disfigured and mutilated and cannot be fully treated by the application of Western therapeutic modalities.

The amalgamation of IKS and qualitative research methods has proven effective and pertinent to advance the development of Afrocentric modalities of therapy on the continent in general, and South Africa, in particular. Afrocentric research methods, particularly the data collection aspect, has been enriched by the conceptualisation of the collaborative PIR process which facilitates the unearthing of previously inaccessible spiritual knowledge.

An integration of an African spiritual healing modality to conventional therapies is essential because rape has been shown by African traditional and faith healers, to be spiritual in its origins, attributes and effects. The development of a *Phekolo: Mahlatsipa a Peto* Model is a crucial advancement in knowledge that will facilitate a transition, in all credible Western psychological therapies, to the initiation and application of spiritual healing for African female rape survivors. This academic work will most likely contribute to the wholistic healing gap that had perpetually left many African female rape survivors spiritually morbid.

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ANNEXURES

ANNEXURE A: Conversational guide for *Puisano* (dialogue) with Traditional Healers

A.1: English Version

1. Give your perspective on African Spiritual healing?
2. Based on the African perspective, why does rape occur?
3. In your experience as a traditional healer practitioner, how do rape victims present?
4. How would you help a rape victim (method)?
5. Is it possible to prevent a rape victim from experiencing further rape incidents?
5b. If yes, how?

A.3: Sesotho Version

Puisano le baalafi ba Setho (baporofeta le bakoma)

1. Fana ka moelelo oa hao ka tsa kalafi ea semoya.
2. Ho ea ka tsebo ea Setho, peto e bakoa ke eng?
3. Ho ea ka tsebo ea hao ea kalafi ea semoya, mahlatsipa a peto a iponahatsa joang?
4. O ka le thusa joang lehlatsipa le peto?
5. Na o ka thibela lehlatsipa la peto hore le se ke la hlekefetsoa ka peto hape?
5a. Ha e be karabo ke ee. Joang?

A.3: IsiZulu Version

1. Uthini umbono wakho ngokupholisa ngokwesinthu?
2. Ngolwazi lwesinthu, ukudlwenqula kubanqwa yini?
3. Ngolwazi lwakho njenqomtu olapha ngokomoya, umuntu odlwenguliwe ubonakela kanjani?
4. Ungamceda kanjani umuntu odlwenguliwe?

5. Kukhona yini ukuvikela umuntu odlwenguliwe ukuthi kungamphindi?

5a. Uma impendulo ngu yebo, kanjani?

ANNEXURE B: Conversational guide for *Seboka* (Survivor group)

B.1: English Version

1. Let's talk about the experience of what you went through?
2. How do you understand what you went through?
3. In your understanding and experience, what could have led to this?
4. How did you deal with the experience?
5. What emotional or behavioural changes have you noticed in you after the incident/
ordeal occurred?

B.2: Sesotho Version

1. Ha re bue ka seo se ho hlahetseng
2. Kutluisiso ea hao ke eng ke se sehlahileng?
3. Ka kutluisiso ea hao, ekaba sena se bakiloe ke eng?
4. O ile oa etsa eng ka morao ho ketsahalo ena?
5. Ke eng se lleng sa fetoha ka oena, boleng ba hao kapa maikutlong, ka morao ho
ketsahalo ena?

B.3: isiZulu Version

1. Asekhulume ngalokhu okukwenzakalele?
2. Uyizwisisa kanjani lento ekuvelele?
3. Ngokucabanga kwakho, ingaba yini impangela ya lokhu?
4. Uyewenzanjeni emuva kwalesi senzakalo?
5. Yini ewuyi qaphela ngawe? Umzekalo, ngokwase moyeni noma ngokuziphatha?

ANNEXURE C: Participant Consent Form

PhD Research on:

The Development of Psychotherapeutic Interventions for Female Rape Trauma Clients

Consent to take part in research

- I... .. voluntarily agree to participate in this research study.
- I understand that even if I agree to participate now, I can withdraw at any time or refuse to answer any question without any consequences of any kind.
- I understand that I can withdraw permission to use data from my interview within two weeks after the interview, in which case the material will be deleted.
- I have had the purpose and nature of the study explained to me and I have had the opportunity to ask questions about the study.
- I understand that participation involves answering questions about my healing techniques, beliefs, values, experiences and related practices in relation to African rape survivors.
- I understand that I will not benefit financially, directly from participating in this research.
- I agree to my interview being audio-recorded and safely stored for research purposes
- I understand that all information I provide for this study will be treated confidentially.
- I understand that in any report on the results of this research my identity will remain anonymous. This will be done by changing my name and disguising any details of my interview, which may reveal my identity or the identity of people I speak about.

- I understand that disguised extracts from my interview may be quoted in the final thesis publication and any other derivative thereof. Alternatively, data and results may be presented in academic conferences for the benefit of my fellow African survivors,
- I understand that signed consent forms and original audio recordings will be retained by the researcher at the University of South Africa.
- I understand that a transcript of my interview in which all identifying information has been removed will be retained for at least five years, in accordance with the POPI Act of South Africa.
- I understand that under freedom of information legalisation I am entitled to access the information I have provided at any time while it is in storage as specified above.
- I understand that I am free to contact any of the people involved in the research to seek further clarification and information such as names, degrees, affiliations and contact details of researchers (and academic supervisors if relevant at all.)

Name, Surname and Signature (Research Participant)

Date

I, the Researcher, believe that the participant is giving informed consent to voluntarily participate in this study.

Name, Surname and Signature (Researcher)

Date

ANNEXURE D: Turn-It-In Report

The screenshot shows the Turn-It-In interface. The document title is "The Development of Psychotherapeutic Interventions for Female Rape Trauma Clients: An African Perspective" by PALESA MAHLANGU. The document is for a "DOCTOR OF PHILOSOPHY" degree. A match rate of 25% is displayed. The sources are listed as follows:

| Match | Source | Percentage |
|-------|---|------------|
| 1 | uir.unisa.ac.za Internet Source | 1% |
| 2 | journals.ukzn.ac.za Internet Source | 1% |
| 3 | hdl.handle.net Internet Source | 1% |
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| 5 | journals.sagepub.com Internet Source | 1% |

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