

BODY MAPPING AS AN EXPLORATORY TOOL TO ENHANCE DIALOGUE OF LIFE  
EXPERIENCES WITH ADOLESCENT BOYS IN A SPECIAL YOUTH CENTRE

by

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Submitted in accordance with the requirements

for the degree of

MASTER OF DIACONIOLOGY

(DIRECTION: PLAY THERAPY)

at the

UNIVERSITY OF SOUTH AFRICA

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November 2011

## **STATEMENT**

I hereby declare that

**BODY MAPPING AS AN EXPLORATORY TOOL TO ENHANCE DIALOGUE OF LIFE  
EXPERIENCES WITH ADOLESCENT BOYS IN A SPECIAL YOUTH CENTRE**

is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

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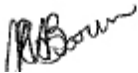
## LANGUAGE EDITING

20 October 2011

### To whom it may concern

I hereby confirm that I was responsible for editing the thesis “Body mapping as an exploratory tool to enhance dialogue of life experiences with adolescent boys in a Special Youth Centre” by Marinda Pienaar (student number 4335-270-7).

Please feel free to contact me for further information.



.....  
Margaret Rossouw

## ACKNOWLEDGEMENTS

My husband and family, for their patience and support. Without the example set by them, I would not have had the courage to continue throughout all the trials and errors.

My dear friend, Betsie Vlok, who helped and supported me in every possible way.

My study leader, Dr. Mariette van der Merwe, without whose guidance and help, this study would not have been possible. Her unconditional and unfailing support and help throughout the process has been an example to me.

Dr. Hannie Schoeman, whose belief and example in “living Gestalt”, has been an inspiration. For her input during all the stages of training as well as the workshops at Uylenvlei; taking her students to the beach, the mountain top to “experience” the sunrise, to “experience” throwing clay and playing drums around the fire at night, sharing herself and her wisdom, thank you. The appreciation also includes her husband, dr. Boet, who welcomes all the students at Uylenvlei. Both of you are an inspiration to me.

The lecturers at the Centre for Play Therapy and Training at Huguenot College who gave something of themselves while guiding me on the course.

All the children and adolescents who taught me to look behind the behaviour to find the person. To the participants who touched my life with their life stories, for the incredible resilience in adverse circumstances, I salute you! May you experience the joy of getting to know a Father who truly loves and cares for you.

An up and coming Kwaito group called Jojovu had a number one hit song in 2001. The group is comprised of young men who, not long ago, were themselves the 'dogs in the township' who robbed and stole for a living. They turned to music as a way of escaping gang life and now preach a message of peace through their popular brand of music. They are the rare exception. Most youngsters in South Africa who end up in the criminal underworld do not find a route out. At present, over 25000 young men between the ages of sixteen and twenty -five are serving prison sentences for their criminal activities (Segal, Pelo & Rampa, 2001: 95)

## ABSTRACT

This qualitative study explored the use of Body Mapping as a tool to enhance dialogue with sentenced adolescent boys in a Special Youth Centre. Their scars and tattoos were regarded as the key to unlocking their life stories. Body maps and unstructured interviews formed the main body of data. The paradigms of both Gestalt- and occupational therapy formed the basis of the conceptual framework and a literature control was done as “theory after” as well as a method of data triangulation. Themes extracted pointed to broken bonds and familial trauma which lead the adolescents to search for belonging and mastery in deviant peer groups and street- and Number-gangs. The tattoos provide graphic affirmation of identification and belonging to these groups. The mapping of their lesions and scars provided the opportunity to relate traumatic experiences. Conclusions were drawn and recommendations could be made as a result of the study.

### **Key terms**

Body Mapping

Lesions and Scars

Tattoos

Sentenced Adolescents

Circle of Courage

Unmet needs

Gestalt Play Therapy

Occupational Therapy

Bronfenbrenner's bioecological theory

Max Neef's Human Scale Development

## ADDITIONAL ASPECTS

Although the general guideline for research is that books and articles published during the past decade or even the past five years are valued for the purposes of a thesis, it should be noted that classical books used as references in this study have been reprinted several times, proving that they still have value and are necessary for inclusion. Some older publications have also been used due to their value as foundation theory. These books include the following classical Gestalt works:

Aronstam, M. 1989. Gestalt Therapy, in D.A. Louw, (ed). *South African Handbook of Abnormal Behaviour*. Johannesburg: Southern Press. 629-644.

Clarkson, P. & Mackewn, J. 1993. *Key figures in Counselling and Psychotherapy: Fritz Perls*. Reprinted, 2006.

Clarkson, P. 1989. *Gestalt Counselling in Action*. Reprinted 2002.

Perls, F.S., Hefferline, R.F & Goodman, P. 1951. *Gestalt Therapy: Excitement and Growth in the Human Personality*. Reprinted 2006.

Perls, F.S. 1947, 1969. *Ego, Hunger and Aggression*. (F.S. Perls). Reprinted 1992 (The Gestalt Journal Press).

Perls, F. S. 1969. *Gestalt Therapy Verbatim*. Reprinted 1992.

Perls, F. S. *The Gestalt Approach and Eye Witness to Therapy*. (This was Perl's final work before he died in 1970. He entrusted the material to Spitzer and the book was published in 1973.)

With reference to: Jordaan, W., & Jordaan, J., (no copyright date). *People in Context*. 3<sup>rd</sup> Ed. (fifth impression, 2005) Sandton: Heinemann. If the date of the impression cannot be given, it could appear as though the work does not comply to abovementioned standard as the third edition has been printed since 1998.

Concerning literature on Gestalt play therapy: Although the focus of the study is the adolescent, researcher will not be substituting all the references to the child with "adolescent", as this would not be true to the references. It should be noted that although most of the definitions and



references refer to the child, it is also applicable for adolescent as specified by Oaklander (2006) in her work “The Hidden Treasure”, with the inclusion of a chapter for the adolescent client. The therapist adapts the principles according to the developmental level of the child/adolescent client.

In the field of occupational therapy, references are made to works by well-known authors and the dates of their works are also pre 2000. In an attempt to find more recent publications, it was necessary to make secondary references to their work.

Reference is only made to the male child as the study only includes males, not due to gender bias.

In Gestalt, organism and organismic (after Goldstein) are the terms most frequently used to refer to the person. This is done to emphasize the dynamic nature of people as biological beings with animal, social and spiritual needs, systemically interdependent with the environment- a truly ecological approach (Clarkson, 1989:8).

This dissertation is of limited scope and the researcher had to narrow the focus of the study accordingly, with the resulting loss of rich data captured with the Body Mapping and unstructured interviews.

Joyce and Sills (2010:107) suggest using the term, “modifications to contact”. When references are made to the earlier work (prior to 2010), the term contact boundary disturbances or resistances will be used.

Although newspapers and magazines are not considered scientific, a few references were made to such articles. As a qualitative study, it incorporates different sources to give as thick a description as possible of the world / field in which the study is set.

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## **CHAPTER 1: INTRODUCTION TO THE STUDY**

### **1.1 INTRODUCTION**

Working at a Special Youth Centre as an occupational therapist and providing a service to sentenced adolescents with special needs revealed to the researcher that additional training was necessary in order for her to be better equipped for dealing with the emotional problems that underlie the behaviour of these learners. When taking their histories, it became apparent that learners had suffered a series of traumas during their short lives, and that they had generally not received any special help or counselling at the time of experiencing such trauma. The loss of a parent, or both, or suffering from trauma as a result of abuse and neglect, witnessing violence, having committed a murder or other serious crime while under the influence of alcohol or drugs, or having spent time in prison or other centres away from home are all circumstances with which they have to cope.

Gestalt play therapy provided the researcher, in her capacity as an occupational therapist, with a concrete and practical avenue for assisting adolescents with emotional problems. When a theme for the research study was sought, it followed that a method which was in line with the requirements of both occupational therapy and Gestalt play therapy had to be found. The involvement of the study leader in a community project on the Cape flats where body mapping is utilized with abused children led to the researcher's interest in exploring body mapping as a tool for the enhancement of dialogue with a group of boys who often find it difficult to express themselves. It provided a concrete and hands-on approach and also aligned the holistic and sensory approach of these two types of therapy.

The learners at the Special Youth Centre commonly experience delays in emotional-cognitive- and moral development. Some of the problems experienced as a result of these delays, are difficulty in expressing emotions verbally, due to a limited emotional vocabulary. Whereas teenagers generally enjoy expressing emotional content through poems (Taylor and Abell, 2005:146) lyrics (Taylor and Abell, 2005:150) or journaling, these learners have an even bigger impediment when it comes to reading and written work. They are therefore unable to use these creative techniques. The way in which traumatic memories are stored in an implicit, situationally accessible manner further impedes recalling and verbalising trauma (Van der Merwe, 2009:292). However, the trauma and unfinished business seek ways of being expressed and therefore comes to the fore as dreams, nightmares, flashbacks,

inappropriate behaviour and through contact boundary disturbances, now named modifications to contact by Joyce and Sills (2010:107). Some learners at the centre seemingly use retroflection as a way of coping with stressful situations; others deflect with angry outbursts and bouts of aggressive behaviour, and many learners project by blaming others and ascribing their own emotions to others. This behaviour impedes their ability to make use of the special programme at the centre which is geared towards developing their strong points or abilities. This research aimed to investigate to what extent the use of body mapping of their tattoos, scars and lesions could improve dialogue and open up discussion about the trauma suffered.

Body mapping provides the body-mind integration needed for releasing traumatic memories without the uncomfortable symptoms which might be experienced when verbal recalling elicits post-traumatic stress reactions. It was therefore considered an appropriate method to use as a concrete way of assisting the traumatized adolescents at the Special Youth Centre to express the content and emotions connected to their un-integrated life stories and memories.

This research process was conducted over a period of a year, from May 2010 to May 2011. The empirical study was completed during September 2010. The research focused on the utilisation of body mapping as an exploratory tool to enhance dialogue of life experiences with adolescent boys in a Special Youth Centre where the researcher has been employed as an occupational therapist since October 2002.

## **1.2 PRELIMINARY STUDY AND RATIONALE**

In the following paragraphs the researcher attends to two core tasks of the first research phase, namely explaining the interest and presenting the aims of the study (Mouton, 2001:48; Vithal & Jansen in Maree & Van der Westhuizen, 2007:28). While working at a Special Youth Centre as an occupational therapist, it came to the researcher's attention that many adolescents' behaviour did not improve, until ultimately they found themselves incarcerated in prison. This happens despite the implementation of a developmental, strength-based approach to young people at risk (Brendtro & Du Toit, 2005:41). A developmental assessment of strengths within the four quadrants (Belonging, Mastery, Independence and Generosity) of the Circle of Courage model is conducted, and an Individual Development

Plan is drawn up with the cooperation of the adolescent in order to improve resilience. This constitutes level 5 of the Western Cape Education Department's (WCED, 2004b) model of intervention for adolescents at risk, which is implemented at the Special Youth Centre. A support team provides the necessary support to adolescents at the centre. The 14 to 18 year old adolescents are institutionalized for education and training purposes after other, less severe methods to bring about change have failed. They are sentenced to spending time at the centre with offences ranging from the possession of drugs, housebreaking and theft to rape and murder.

While all efforts are geared towards developing their individual strengths, the deprivation, losses and trauma suffered during their developmental stages, as mentioned in background reports by the probation officers, are often not mentioned by the adolescents. Their behaviour provides evidence of the trauma experienced through symptoms such as emotional instability, acting out behaviour, drug dependence and gang-related and criminal activity. According to Brendtro and Du Toit (2005:3) the troubled behaviour of young people who are unable to express their emotions is "... a cry of pain, a call for help that often goes unheard". It is possible that the disturbed behaviour of many of the adolescents at the centre could be indicative of unexpressed emotional pain. Their failure at expressing trauma and pain verbally can probably be ascribed to barriers such as their developmental delays, poor school attendance and achievement and dysfunction due to foetal alcohol syndrome and chronic drug abuse.

Working from a Gestalt paradigm, the researcher proposes that being unaware of the level of trauma experienced, mechanisms such as dissociation or desensitization to minimise the pain, as well as a poor sense of self (Oaklander, 2006:6-7) could also contribute to the behavioural symptoms. This research study was aimed at establishing a way to overcome barriers to verbal expression in the unit of analysis, namely adolescent boys in a Special Youth Centre. The researcher was interested in exploring whether body mapping, utilized as a concrete means of expression, could elicit dialogue about traumatic memories, enable them to talk about their life experiences and express their emotions. This study explored the utilisation of body mapping of tattoos, lesions and scars, both as a qualitative research tool and as a tool to enhance dialogue.

Emotional instability can be indicated by various forms of self-injury, which could be a form of retroflection and an attempt to cope with emotional pain and/or anger (Oaklander, 2006:73). Self-injury ranges from severe nail biting, making derogatory tattoos and head banging to cutting, excessive body piercing and starving (Seller, 2009). Several of these symptoms were experienced through the years of working with these adolescents at the Centre. The type most often encountered is making tattoos. The researcher is of the opinion that the specific type of tattoos made by these adolescents can be seen as a form of self-mutilation due to the following facts:

- these are not examples of fashionable tattoos, considered as body art, made in tattoo parlours;
- the content portrays derogatory inscriptions referring to the police (“f... the police”, or “f... the cops”), and inscriptions are often spelt incorrectly (“sorry mam”);
- the areas of the body on which the tattoos are made (across the forehead or throat or in the face and on the hands);
- the unhealthy methods used (melting the black plastic sealing rings on cans, as well as any other available form of plastic and rubber and mixing it with solvents to make ink, or using the inside of black ballpoint pens);
- the tattooees often attempt to remove tattoos by burning the skin with plastic or hot condensed milk when they regret making it.
- Another type of tattoo portrays neighbourhood gang and/or prison gang (Number Gang) symbols and numbers as a heritage of time spent in prison or in places of safety. Later, they recognise and refer to the fact that these tattoos will have a negative influence on their integration back into mainstream schools or when seeking employment. When they partake in sports against mainstream schools without the cover of tracksuit tops and pants, the tattoos cause feelings of shame.

The bodies of many adolescents at the Special Youth Centre also have scars bearing witness of injuries and trauma inflicted by others, for example old knife or bullet wounds, lesions due to operations, fractured limbs or burns, or other injuries. The researcher wished to investigate to what extent body mapping could be an aid in opening up and stimulating discussion about

emotions and memories related to the self-inflicted scars or tattoos as well as scars inflicted by other people. This could start the process of awareness and ultimately integration, making better choices and taking responsibility, which are the main aims of Gestalt (play) therapy (Gouws, Louw, Meyer & Plug, 1987:343; Blom, 2006:19, 58; Oaklander, 2006:46). This would also benefit the process of reaching the main goal in occupational therapy, namely improving age-related occupation.

The researcher's background and experience as an occupational therapist, and recently as a Gestalt play therapist, have brought greater understanding of the close ties between body and mind due to the holistic nature of the organism (Kepner, 2008:39). By drawing the scars, lesions and tattoos onto the body map where they are actually situated, the senses of sight and touch as well as kinesthesia (sense of movement) and proprioception (sense of body position and the body's position in space) are all stimulated, thereby improving the mind-body integration. Both Oaklander (2006:36) and Schoeman (2006b:33) advocate using projections with the body as a tool for expressing emotions and characteristics.

Body mapping was investigated, firstly as a tool for eliciting dialogue and secondly as a suitable tool for research purposes. If a positive outcome was to be found, this technique could be advocated for use in therapeutic settings. The researcher could not find information pertaining to the use of body mapping with adolescents in conflict with the law for the purpose of providing a concrete way to express their life stories. Therefore, this study opens a new field of application of this technique. Body mapping has been implemented with success with traumatized tortured men (Meyburgh, 2006) and with traumatized primary and secondary school adolescents in a RAPCAN programme in Lavender Hill (Van der Merwe, 2010). In these instances, the technique is deemed successful in acquiring emotional release of trauma-related emotions and memories. Bell (2010:2) quotes the artist Groschattau-Pillips as saying that as an art therapy technique developed by the San, it is used as a "soft, non-judgemental, healing-releasing therapy."

In short, the aim of this study was to investigate the use of body mapping as a tool in opening up discussion, which could alleviate the blocked emotional responses and unfinished business of adolescents in the Special Youth Centre. Based on her experience at the youth centre, the researcher is of the opinion that neglecting to attend to emotional responses and unfinished business affects adolescents' ability to benefit from the programme provided. They are

seemingly blocking their own progress by making use of contact boundary disturbances, as described by Perls (in Clarkson & Mackewn, 1993:75-77). Oaklander (2006:7-11) explains how these disturbances are used to self-regulate and survive, preventing contact with the world and meeting needs. Oaklander (2007:58) further proposes that in adolescents these behaviours become exaggerated, or change into new ones, such as seductiveness, promiscuity, or excessive use of alcohol and drugs, “whilst beneath these attempts to cope there are always unmet needs that result in a lost sense of self”. If the proposed research could provide more insight into ways/tools beneficial for improving dialogue and expressing emotions, it could also prove beneficial for adolescents in mainstream schools and other contexts where similar problems are experienced.

### **1.3 PROBLEM FORMULATION AND FOCUS**

Adolescent boys at the Special Youth Centre experience barriers preventing the healthy expression of emotions. They need concrete avenues to explore the mind-body connection in order to enhance dialogue about their life histories, while also enhancing awareness. Aronstam (1989:635) is of the opinion that awareness brings the client into contact with his own needs and emotions and that he thereby learns to accept responsibility for who he is and what he is doing. This implies bringing the child or adolescent into contact with himself on cognitive, sensory and affective levels. It can thus be concluded that the expression of emotions would not serve a purpose on its own. Awareness has to accompany the expression of emotions in order for the adolescent to start taking responsibility for the choices he has in terms of finding ways to express emotions in a healthy way. The current occupational therapy programme at the Special Youth Centre does not provide concrete ways through which the mind-body connection is utilized for expression of emotions and unfinished business. This study was designed to expand knowledge on dialogue with this vulnerable target group and to explore the use of a concrete tool, i.e. body mapping.

If sentenced adolescent boys do not have an awareness of the impact of their life stories, traumatic events can remain unintegrated. Non-adaptive coping such as addiction, seeking an own identity and belonging in gangs and criminal behaviour can be some outcomes of unintegrated life stories. It is hoped that body mapping of scars, lesions and tattoos will

provide a key to not only unlock the facts of their life experiences but also appropriate emotion so as to enable adaptive and appropriate behaviour to emerge.

#### **1.4 RESEARCH QUESTION**

Knight and Holliday in Fouché and De Vos, (2011:89-90) point out that it is critical to formulate the research question carefully as the rest of the research process will be aimed at answering this question. Whittaker (2009:6) mentions that the research question will also influence the choice of research design and the focus of the literature review. Heppner and Heppner (2004:67, 71) view research hypotheses and questions as “... the motor that drives the study” by asking “... questions about constructs that are of most interest to the student/researcher”. Based on the inputs of these authors and the problem formulation (1.3) the research questions for this study were:

**What content will be generated by the application of body mapping of tattoos, scars and lesions in dialogue with sentenced adolescents at a Special Youth Centre and how will this facilitate the expression of emotions?**

A secondary question was focused on body mapping as a research tool:

**How can body mapping be used to generate research data pertaining to the problem statement and unit of analysis when applied in an unstructured interview format in a case study design?**

Body mapping has been utilized in action research (Ebersöhn, Eloff & Ferreira, 2007:138). In this study it was applied as a method of data collection in a case study design. If this method did generate relevant data, it would be significant to note that and to also make a contribution to research theory.

## **1.5 THEORETICAL FRAMEWORK, GOAL AND OBJECTIVES**

### **1.5.1 Theoretical framework and paradigms**

The Gestalt paradigm forms the basis of this study (Blom, 2006:17-19; Clarkson & Mackewn, 1993:33-45). The researcher is of the opinion that the paradigms of Gestalt and occupational therapy as applied in this study complement each other, as they share many of the underlying premises. Both sciences work intensively with the theory of holism (Aronstam, 1989:631; Clarkson & Mackewn, 1993:33-37, Blom, 2006:22; Ikiugu, 2007:79). In addition, both occupational therapy (Ikiugu, 2007:79; 92) and Gestalt (play) therapy (Schoeman, 2006b:3-13) place a high premium on the relationship with the client. In recent years, occupational therapy has placed more emphasis on the dignity of the person as well as his/her subjective experience (Ikiugu, 2007:33), which correlates well with Gestalt's phenomenological approach.

Adolescence, with its rapid physical changes, self-consciousness and need for peer approval (Newman and Newman, 2006:300), will be discussed from the stages of development viewpoint. Different views regarding models of development will also be highlighted in Chapter 2, with special attention to the Gestalt view on development as described by McConville and Wheeler (2001, 2002). In Chapter 2 a conceptual framework will be outlined. A literature control, or "theory after" (Delpont, Fouché & Schurink, 2011:306) followed after the collection and analysis of data and will be delineated in Chapter 4.

### **1.5.2 Research goal and objectives**

The formulation of the goal and objectives is based on the problem formulation, with the goal as the dream and the objectives as the steps taken within a certain timeframe to reach the dream (Fouché & De Vos, 2011:94). The **main goal** for this study was to ascertain how the technique of body mapping could be utilized to facilitate dialogue of life experiences connected to the scars, lesions and tattoos. If it was found that body maps enhance emotion-focused discussions, this would open avenues for therapeutic use which can be explored in further research.



According to Morgan as quoted by Meyburgh (2006:19), body maps have the potential to become “participatory qualitative research tools” leading to a **sub-goal** of this study, namely to explore the utilisation of body mapping as a research tool to generate data for this specific target group.

**Objectives** towards reaching the goals were:

- To compile a conceptual framework on relevant Gestalt-, occupational therapy- and developmental theories;
- To conduct empirical research utilizing body mapping in semi-structured interviews as a research tool with selected participants;
- To analyse data and extract themes;
- To conduct a literature control study as a means of data triangulation;
- To compile a research report with conclusions and recommendations.

## **1.6 RESEARCH APPROACH, DESIGN AND TYPE OF RESEARCH**

### **1.6.1 Research**

**Qualitative research** (Babbie, 2010:393; Creswell, 2009:173; Whittaker, 2009:9-10; Fouché & De Vos, 2011:91) was the approach used, taking heed of Barber’s (2006:2) concern that a threat to qualitative research is that the researcher may substitute her own meaning for the meaning of the individuals studied, and thereby come to conclusions that are not valid (Kielhofner, 2006:23). This is one reason for postponing the main literature study until after data collection and the extraction of relevant themes. This is in line with Creswell’s (1998:87; Delport, Fouché & Schurink, 2011:306) approach, where the literature control study is done towards the end of the study, thus advancing a “theory after” perspective. When the research study commenced, the researcher already knew the target group well due to her work at the youth centre, and she had to bracket her own experience and previous knowledge to limit subjectivity.

This research was mainly **applied** (Welman, Kruger & Mitchell, 2005:25) and focused on solving specific problems in practice. However, the study was also partially based on **basic research** with the aim of investigating whether body mapping is an effective tool for the

purpose of generating evidence about some phenomenon (tattoos, lesions and scars). This is in line with Kielhofner's (2007:30) view that basic research aims at generating new knowledge. The secondary research question and the secondary research aim focused on the applicability of body mapping as a research tool, with the anticipation of adding to research literature. However, the researcher was mindful that such contribution will be within the confines of a research study of limited scope.

The research was **exploratory** and **descriptive** (Fouché & De Vos, 2011:95-96). Descriptive research "presents a picture of the specific details of a situation, social setting or relationship, and focuses on 'how' and 'why' questions" (Kreuger & Neuman in Fouché & De Vos, 2011:96). According to Rubin and Babbie (in Fouché & De Vos, 2011:96) descriptive research gives a more intensive examination of phenomena and their deeper meanings, leading to a thicker description, whereas exploratory research has the aim of "gaining more insight" (Blaikie in Fouché & De Vos, 2011:95), and it could arise from a lack of basic information on a new area of interest (as is the case in this study). Kreuger and Neuman in Fouché and De Vos (2011:95) added that it might be the first in a sequence of studies and Mouton (in Fouché & De Vos, 2011:95) points out that the answer to a "what" question would constitute an exploratory study.

### **1.6.2 Research design**

Nieuwenhuis (2007:71); Creswell (2009:13), and Whittaker (2009:11-16) mention various research designs to be used for data collection. This study utilises the instrumental **case study** "... to explore and describe a particular subject ... with the aim of gaining new knowledge, which may inform policy development" (Fouché & Schurink, 2011:322). Punch (2005:144) explains the case study as follows: "... the general objective being to develop as full an understanding of that case as possible", as with this research. The researcher was especially interested in exploring how body mapping could be used for data collection within the case study design.

## 1.7 RESEARCH PROCEDURE AND METHODS

### 1.7.1 Unit of analysis

The unit of analysis was **sentenced adolescent (14-18 year old)** boys in a Special Youth Centre. This Special Youth Centre only caters for boys.

**Universe:** Arkava and Lane in Strydom (2011:223) denote the universe as being all the potential subjects who possess the attributes in which the researcher is interested, i.e. all adolescent boys in Special Youth Centres in South Africa. (There were only three Special Youth Centres in South Africa when the study was executed.)

**Population:** Arkava and Lane in Strydom (2011:223) point out that “the population” is a term that sets boundaries on the study units by referring to individuals in the universe who possess specific characteristics. In this study the population refers to all adolescents in a Special Youth Centre in the Western Cape. They may differ from populations in other provinces due to differences in culture, language and socio-economic circumstances; therefore they cannot simply be described as a smaller portion of the universe.

**Sample:** Gravetter and Forzano in Strydom (2011:223) point out the fact that the sample always implies “the existence of a population or universe of which the sample is a smaller section or set of individuals selected from the population”. Sarantakos in Strydom and Delport (2011:391) describes sampling in qualitative research as being “relatively limited, based on saturation, not representative, the size not statistically determined, and involving low cost and less time”.

**Purposive sampling:** Punch (2005:187) proposes that this term means “sampling in a deliberate way, with some purpose or focus in mind”.

**Criterion sampling** (Creswell, 1998:118) was decided on. This implies that the participants are chosen on the grounds of meeting specific criteria. This was done for a practical reason. If a sampled adolescent should abscond or be absent, he could be substituted with someone else who meets the criteria.

**Sample size:** Five adolescents, alternatively, until saturation of information was reached.

### 1.7.2 Criteria for inclusion:

- Age 14-18 years
- Adolescents referred to the Special Youth Centre
- Afrikaans or English speaking
- Having lesions/scars and tattoos
- Being present at the centre when the empirical research is undertaken (Absconding as well as absence due to court appearances is a possibility.)
- Willingness to participate

The occupational therapy intake form with relevant information regarding the adolescents was used to identify adolescents who met the criteria for selection.

### 1.7.3 Data collection

**Multiple methods** of data collection were applied, with triangulation (Creswell, 2009:191) in order to increase reliability and validity, as suggested by Creswell (2009:175) and Henning (2004:93). This leads to **crystallisation**, which refers to the practice of comparing different sets of data in order to validate the findings and using “voices that differ” from the researcher’s opinion (Maree & Van der Westhuizen, 2007:40). After the unstructured interviews with participants, information from their profiles and probation reports were studied with crystallisation in mind. Data were collected from the following sources:

- Literature review for the conceptual framework.
- Body mapping, used during unstructured interviews with individual participants. Recordings of sessions and maps formed the main body of information. Creswell (1998:120) encourages the use of information which is not generally used for quantitative studies: “These unusual forms create reader interest in a proposal and can capture useful information that observations and interviews may miss” Creswell (2011:181). For this study the relatively unknown technique of body mapping was utilized with the following pattern of execution: A choice of art materials was presented for making the maps. Session one focused mainly on tattoos, session two on lesions and scars and in session three the focus was on an overview and discussion of the meaning found in the

experience as well as an in-depth discussion of one or two of the scars or tattoos of the participant's choice.

- Sessions were captured by a voice recorder as well as on video camera (with the adolescent's permission). Legal permission for using a video camera was obtained from the principal. Photos of body maps were taken, but due to confidentiality and the probability of recognising participants if these should be included in the thesis, they are included only partially.

#### **Data triangulation/crystallisation** (to confirm themes or not)

- Information from the adolescent's profile, a working document on the computer which is accessible to and updated by all staff members, providing information on adolescents' progress.
- Probation officer's report consisting of the pre-sentence report, the initial individual developmental plan and background information (providing the only detailed information concerning the adolescents' fields).
- Literature control study using various databases, books and scientific articles.

The aim of this research was not to structure data collection in such a way that findings could be generalised. As stated by Welman, Kruger and Mitchell (2005:25), the aim was to collect data to unpack the uniqueness of "... a particular case in all its complexity". Data were therefore collected about a particular aspect of the "single bounded system" which was the unit of analysis, namely a sample of adolescents in a Special Youth Centre in a rural area. As with all research, issues of credibility, transferability, dependability and conformability, as stipulated by Lincoln and Guba in Schurink, Fouché and De Vos (2011:419-421), were considered important. These constructs will be discussed in Chapters 3 and 4. However, there are also other qualitative researchers who question the four criteria, and have challenged the use of Lincoln and Guba's criteria to assess qualitative studies. Researchers have started to use strategies such as an auditing trail to promote quality in the research process (Schurink, Fouché & De Vos, 2011:421). This auditing trail is systematically maintained documentation of all decisions and actions taken during the entire research process. It not only reflects **what** was discovered, but also **how** it was discovered. Interpretations can therefore be better understood and validated by readers (Schurink, Fouché & De Vos, 2011:422). An inductive method was utilized for attaining the results, where the process started with the individual

case and expanded towards attaining theory, moving from specific to general (Welman & Kruger, 2005:34; Creswell, 2009:4).

#### **1.7.4 Process of qualitative data analysis**

Information was “analysed descriptively and interpretively” (Henning, 2004:32), extracting themes following the thematic data analysis process described by Whittaker (2009:92). The process of qualitative data analysis will be discussed in Chapter 3.

#### **1.7.5 Ethical aspects**

Strydom (2011:113) warns that ethical aspects are brought to the fore if human beings are the objects of study, since data should never be obtained at the expense of human beings. According to Strydom (2011:114) ethics in social sciences are increasingly regarded as imperative if the goal is successful practice and research. There are two categories of responsibility regarding ethics in research:

- i) responsibility towards both humans and non-humans who participate in a project, and
- ii) responsibility towards the discipline of science, i.e. to be honest and accurate when reporting research (Gravetter & Forzano in Strydom, 2011:114).

Ethical guidelines provide a set of moral principles which offer rules about the correct conduct towards experimental subjects and respondents (in this case participants), employers, sponsors, other researchers, assistants and students. These rules and behavioural expectations are also valuable in that it provides a guideline or standard against which the researcher can evaluate his or her conduct (Strydom, 2011:114). Strydom (2011:115) mentions that there are a host of ethical issues, of which he discusses those that he regards as important:

- **Avoidance of harm:** Respondents or participants should be protected from both emotional and physical harm (Strydom, 2011:115). According to Strydom the researcher should have firm scientific grounds for extracting sensitive and personal information. Recalling negative behaviour from the past can renew personal harassment or embarrassment. However, Strydom (2011:116) is of the opinion that the discomfort in the research situation is often minimal compared to that experienced in the real-life situation and there is also the possibility of the research having a positive

effect on respondents (Monette *et al* in Strydom, 2011:116). Nonetheless, the researcher should take every precaution and rather change the nature of the study than to expose respondents to “the faintest possibility of harm” (Strydom, 2011:116). Creswell (2009:89) also urges the researcher to be vigilant regarding populations that are vulnerable and not to put them at risk, while also attending to their special needs. Creswell names minors and prisoners as groups who are vulnerable, and both apply to this study.

- **Informed consent:** According to Hakim (in Strydom, 2011:117) “written informed consent becomes a necessary condition rather than a luxury or an impediment”. All the possible advantages, disadvantages and dangers to which respondents may be exposed need to be discussed with them and they need to be fully informed regarding the credibility of the researcher. Participation must always be voluntary, without any coercion in the form of financial gain or other favours. A consent form for participants is attached as Appendix 1.
- **Deception of subjects and/or respondents:** This entails withholding information or giving incorrect information in order to ensure the participation of subjects when they would otherwise possibly have refused it. Even if this happens unintentionally, respondents need to be informed as soon as the researcher becomes aware of the situation (Strydom, 2011:119).
- **Violation of privacy/anonymity and confidentiality:** Strydom (2011:119) is of the opinion that it is the individual’s right to decide when, where, to whom and to what extent information regarding his or her attitudes, beliefs, and behaviour is revealed. Individuals differ according to what they think privacy entails. Strydom (2011:120) mentions that sexual behaviour and illegal activities are two areas which almost everyone will consider private and subjects will expect researchers to protect their right to privacy. According to Babbie in Strydom (2011:120), confidentiality entails that only the researcher and possibly a few members of his/her staff should be aware of the identity of participants, and that his/her staff should have made a commitment to ensure confidentiality. Robinson in Strydom (2011:120) refers to this as privileged information. Anonymity means that no one should be able to identify any subject afterwards. It is therefore strongly advised that the cooperation of respondents should

be requested respectfully and the importance of the research should be explained carefully. Refusal must be accepted and respected.

- **Actions and competence of researchers:** Researchers are ethically obliged to ensure that they are competent and skilled (Walliman in Strydom, 2011:123) – even more so when sensitive investigation is involved. The professional researcher has the responsibility to stay objective and not make judgements on the basis of a personal value system. The customs, values and norms of the community should be researched beforehand and the researcher should respect the customs of the people in order to obtain their cooperation (Strydom, 2011:124). The researcher is of the opinion that the cultural aspects, gender and developmental phase of the participants were taken into account and that the fact that the researcher has been working at the centre for eight years ensured that she had pre-knowledge concerning the aforementioned.
- **Cooperation with contributors:** “Everybody that is involved in the research endeavour should be included in a properly written agreement between the parties involved” (Monette, Sullivan & De Jong in Strydom, 2011:124). A formal contract prevents misunderstandings at any stage of the project (Strydom, 2011:126).
- **Publication of the findings:** The findings of the study should be presented in clear, understandable, written form. Terms used should not reflect bias regarding sexual orientation, age, gender or culture. No one should be deceived by the findings of the study. Inclusion of other people’s work without giving recognition to them is plagiarism and is regarded as a serious ethical misconduct. The report should be compiled as accurately and objectively as possible, because the fabrication or falsification of data is a very serious issue in research (Bless *et al.*; Marlow in Strydom, 2011:126). The researcher should also mention the shortcomings of the study clearly in the report (Strydom, 2011:126).
- **Debriefing of respondents:** After the study, debriefing of subjects/participants might be necessary and can be achieved by discussing their feelings about the study (Salkind in Strydom, 2011:122) to minimize harm. Researchers should also rectify any misconceptions that arose during the study. Termination and withdrawal from the study should be done with sensitivity if respondents benefited from the therapeutic aspects of the research (Strydom, 2011:122).



A professional code of ethics has been formulated by different professional societies, and researchers should adhere to the code of ethics of their discipline. In the case of occupational therapists, this would be the ethical code of the Health Professions Council of South Africa.

With reference to this specific study, the researcher has taken the relevant aspects into consideration. As the unstructured interviews could bring trauma-related material into awareness, the researcher monitored all participants closely, kept contact with them after the completion of the empirical study and referred them to the social worker and/or psychologist at the centre as needed. An ethical form, which formed part of the research proposal, is attached as Appendix 2.

### **1.7.6 Limitations of the study**

The confidential nature of the information gained posed a problem with regard to the way in which this information could be presented in the dissertation without disclosing the identity of the participants. Photos of the total body maps were not included, as the arrangement of, and type of scars and tattoos would identify the participants. The different types of information about a participant will not be combined in a full profile as this would also increase the possibility that confidentiality might be breached.

Information on the participant's home environment is not always readily available and contact with parents, carers and substitute carers are limited as participants live far away. Carers do not always have access to telephones, and some parents are illiterate, which also limits communication. The probation officer's reports often reflect the same problem, being brief and sketchy regarding aspects such as the adolescent's school history, transitions between different carers, schools and places of residence. These reports do not represent many of the historical events of importance in order to construct a time line. The specification pertaining to the length of the dissertation posed a further limitation due to the fact that the "theory after" approach led to a wealth of information that could not be included in full in the literature control study.

## 1.8 IMPACT OF THE STUDY

This research study provided evidence that body mapping of lesions, scars and tattoos is a tool that promotes dialogue and healthy emotional expression. This subject can be expanded in further research. The benefits of mapping body “marks” as a concrete tool to facilitate dialogue could be beneficial to occupational therapists and Gestalt play therapists in other settings.

## 1.9 DEFINITION AND DESCRIPTION OF TERMS USED

**At risk:** Mc Whirter et al in Maree (2008:56): “a set of presumed cause-and-effect dynamics that place the child or adolescent in danger of negative future events” while Shaw and Tshiwula in Maree (2008:56) define it as “those children or young people whose circumstances, lifestyle and/or behaviour put them at risk of offending in future”.

**Awareness** “is the capacity to focus, to attend, and to be in touch with the present” (Thompson & Henderson, 2007:188).

**Body mapping:** An outline of the body is made on a large sheet of paper. Different types of information or details (physical or emotional) can be drawn onto this map. “It is a relatively new technique and has been used in South Africa with HIV positive women and traumatised children with the aim of providing a means through which the feelings of respondents can be expressed in a non-threatening way” (Meyburgh, 2006:19). Body mapping has also been used as a tool for data collection in action research (Ebersöhn, Eloff & Ferreira, 2007:138).

**Gestalt:** “A German term for a shape, form, pattern or whole; a configuration. This entity is much more than its parts” (Clarkson, 1989:1; Blom, 2006:18). “This may refer to physical structures, physiological and psychological functions, or symbolic units” (English & English cited in Schoeman, 2006a:51).

**Gestalt therapy:** “A form of counselling or psychotherapy, unconnected with Gestalt psychology, developed in the United States during the 1960’s by the German-born psychiatrist Fritz (Frederick) Perls (1893-1970), in which clients are encouraged to focus on the immediate present and to express their true feelings openly and honestly” (Colman, 2009:316).

**Gestalt play therapy:** Blom, (2004:5) provides the following definition:

Gestalt play therapy can be considered a psychotherapeutic technique that uses the principles of gestalt therapy during play therapy with the child. By developing a therapeutic relationship and contact and according to a specific process, children are given the opportunity to confirm their sense of self verbally and non-verbally, to express their thoughts and to nurture themselves. Various forms and techniques of play are used during the different stages.

**Holism** refers to the Greek word “holos”, meaning “complete”, “whole” or “totality”. It refers to the organism and environment being a whole, both influencing each other.

**Misbehaviour:** “Misbehaviour” will be the cover term for both criminal offences and status offences. It is the preferred term in South Africa. In Eurocentric countries, the term “juvenile delinquency” is used, which is regarded as a label implying criminal activities and guilt and can cause negative reaction from the community (Bezuidenhout, 2008:9).

**Criminal offence:** An unlawful act, meaning “in contrast with or against the law” (Bezuidenhout, 2008:10).

**Status offence:** Young people under the age of 18 may come in contact with the law because of behaviour that is not seen as unlawful for adults. A youth’s minority status implies that certain actions, which are not against the law for adults, can bring them into contact with the criminal justice system. Examples are rebelliousness, truancy, running away from home, sexual promiscuity and smoking (Bezuidenhout, 2008:9-11).

**The occupational therapy model:** “The therapeutic use of everyday activities (occupations) with individuals or groups for the purpose of participation in roles and situations at home, school, the workplace, in the community and in other settings. Occupational therapy services are provided for the purpose of promoting health and wellness to those who have or are at risk for developing an illness, injury, disease, disorder, condition, impairment, disability, activity limitation, or participation restriction. Occupational therapy addresses the physical, cognitive, psychosocial, sensory and other aspects of performance in a variety of contexts to support engagement in everyday life activities that affect health, well-being and quality of life” (American Occupational Therapy Association, 2004).

**Occupation** is defined as “groups of activities and tasks of everyday life, named, organized and given value and meaning by individuals and a culture. Occupation is everything people

do to occupy themselves, including looking after them selves (self care), enjoying life (leisure), and contributing to the social and economic fabric of their communities (productivity)” (C.A.O.T. 1997, in Rodger & Ziviani, 2006:72).

**Proprioception** is the body’s sense of where a part of, and/ or the whole body is situated in space. The information is received from the proprioceptors that are situated in muscles and joints.

**Gang tattoos:** Tattoos are something unique by which a gang and its members are identified. They often include one or more symbol, such as numbers or objects such as the sun, guns, crosses or a stack of dollars. The numbers are often written in Roman script.

**The Number Gangs:** Both Steinberg (2004) and Parker Lewis describe the Number Gangs as a form of a cult. According to Parker Lewis (2006:23) they themselves speak about it as “die geloof” which translates as “creed”, “faith”, “persuasion”, “trust” or “belief”. She further asserts that “ ‘The Number’ exists as an abnormal counter-culture within the prison system, ... that works in direct opposition to any meaningful rehabilitation efforts that would adversely influence the gangs’ performance in terms of running illicit drug syndicates in South African prisons” (Parker Lewis, 2006:22). The 26s, 27s and 28s gangs are related as they were “created” by the same man, Nongoloza (Parker Lewis, 2006:73; Jensen, 2008:83). The 26s and 28s are the predominant gangs.

**26s (Gang):** These men live to make money in jail (Cilliers, 2006:71). According to Parker Lewis (2006:22) the 26 s Gang specialises in robbery and smuggling (kroon / money) through acts of cunning. They are also referred to as “Sontop” (Parker Lewis, 2003:96), meaning “when the sun has risen”, as they work during the day. Their tattoo is half a sun with the rays pointing upwards.

**28s (Gang):** According to Parker Lewis (2006:22), the 28s They work after dark; therefore they are referred to as “Sontaf” or “Sun down”, their tattoo depicting half a sun with the rays pointing downwards. They are known for the sexual acts (gif / poison) that they commit as part of their ethos.

**Sabela:** This is a coded language, consisting of Afrikaans and African Nguni languages (Parker Lewis, 2006:27). It is used by prisoners and learners who had spent time in prison and joined the Number Gangs.

**Street gangs:** These gangs operate in a designated area in their neighbourhood and refer to this area as their “turf”. This area is often marked with graffiti and if other gang members enter this area, they are attacked (and killed). Examples of these gangs depicted in the tattoos of adolescents at the Special Youth Centre are the Playboys, Bad Boys, Young Americans and The Dog Pound. These gangs used to be the ones operating outside the prison, while the Number Gangs were “inside”. This has now changed as the Number Gangs are also operating outside the prison.

### **1.10 BODY MAPPING AS A TOOL IN STIMULATING DIALOGUE**

The technique of using an outline of the human form and filling it with information has been used in medicine for many ages. Doctors still use it to indicate where disfigurements and lesions are situated on the body. This is sometimes included in the medical report of learners admitted to the Special Youth Centre and depicts the fractures, wounds and tattoos present at the time of the medical examination. The technique of body mapping refers to making an outline or map of a person’s body with the help of a second person. Information of choice can then be drawn onto this map of the body. In a therapeutic setting “the client is involved in a process of exploring and experiencing aspects of themselves in relation to their body and it becomes the storybook of his experience” (Meyburg, 2006:25). Meyburgh draws attention to the fact that severe trauma often causes a disowning of the body or, as Oaklander (2006:6) describes it, “children who are emotionally disturbed due to some trauma, tend to cut themselves off in some way; they will anaesthetize their senses, restrict the body, block the emotions and close down their minds”. The aim of therapeutic body mapping is to reclaim the body, taking ownership of the body again. Due to the “body reclaiming work” done in this technique, the technique can be described as a combination of art, narrative and body process work.

For this study, the participants drew their tattoos onto one body map and their scars and lesions on a second body map. After the mapping was done, the participant was invited to talk about the memories and emotions that were projected onto the map. This is referred to as the narrative or story which is locked up in the drawing. As the researcher has not been trained in narrative therapy, dialogue, which is such an integral part of Gestalt therapy, was the chosen method of therapeutic communication. Although this technique can stretch over a

number of sessions, provision was made for three sessions in the case of this study. A variety of art materials was provided for use, more as a form of sensory stimulation and to bring participants into contact with their emotions than from an arts point of view. For the purpose of the study, the emphasis was on bodywork rather than artwork.

### **1.11 THE SPECIAL YOUTH CENTRE – THE ORGANISATIONAL CONTEXT FOR THIS RESEARCH**

The Special Youth Centre resorts under the Western Cape Education Department as an ELSEN school (Education for Learners with Special Education Needs). The Centre provides education as well as institutional secure care for adolescents with severe anti-social behaviour. The WCED policy (WCED, 2004b) provides special education services for learners manifesting or at risk of experiencing emotional and/or behavioural difficulties and who can only benefit from training/education if they are temporarily contained. The first three levels of support provide for intervention in mainstream schools. Level 4 is provided at Youth Care and Education Centres and Level 5 at Special Youth Care and Education Centres. Minimum standards for service delivery in these institutions have been implemented (WCED, 2004b). One of these concerns the services rendered by the support team based at the school. The team consists of the psychologist, social worker, learning support teacher, school nurse and occupational therapist. Due to the complexity of the learners' problems, they need appropriate development and therapeutic programs as supplied by the support team, the residential educator and educator (Rossouw, 2009:2).

One of the prescribed tasks of the special team is to develop an Individual Development Plan (IDP) for each learner, based on a developmental assessment. These plans are based on the premise of resilience. Resilience is described as “the ability to rebound from adversity with greater strength to meet future challenges” (Brendtro & Du Toit, 2005:40). According to the developmental perspective and a strengths-based approach, learners' self-images should be enhanced by a focus on their strengths rather than on pathology. This contributes to a sense of belonging and mastery, greater independence, and a feeling of generosity (Brendtro, Brokenleg & Van Bockern 1990:45) In developing the IDP, barriers to learning at learner, educator, curriculum and institutional levels are identified and curtailed (WCED,2004). This is related to learning and developmental barriers in learners that manifest themselves in various forms that are usually associated with [physical,] psychological, emotional, social and

cognitive factors (Rossouw, 2009:2). The majority of learners have a history of poor school attendance, having absconded or having been expelled, drug and alcohol abuse from a young age, and poor socio-economic and social circumstances. These factors contribute to delays in many areas which affect their academic abilities. It leads to a discrepancy between age and the expected grade or phase in school. Referrals to the Special Youth Centres are currently in a process of change due to the new Children's Act. In future, the Children's Court will refer children and youths in terms of Section 50 of the Children's Act 38 of 2005 (RSA, 2005), as well as the Child Justice Act 75 of 2008 (RSA, 2008).

The centre where this study was conducted caters for 14 to 18 year old male adolescents. Their criminal acts include offences of a violent, sexual, economic and drug-related nature, with housebreaking and theft being the most common offence. At the centre, all efforts are geared towards helping the adolescents to change their behaviour in order to be able to return home as soon as possible. They are engaged in an adapted programme of academic and technical nature and special life skills programmes, which are supplemented with participation in sports and cultural as well as spiritual activities. Adolescents were referred to the Youth Care and Education Centres for a period of two years, but an earlier discharge was possible if their progress warranted it (Rossouw, 2009:1), or if they turned 18 before their two year term had been completed.

## **1.12 PRESENTATION OF RESEARCH REPORT**

**Chapter 1** presents information pertaining to the scientific requirements of a research study and includes aspects concerning qualitative research and the case study design, the type of sampling and the planned execution of the research study. The importance of the ethical considerations as well as the reliability and validity of the qualitative research study were emphasized. The core aspects of the study were described and defined.

**Chapter 2**, the conceptual framework, attends to the core principles of Gestalt and the Gestalt and occupational therapy paradigms on which the study is grounded. This chapter also includes an overview of the developmental phase of adolescence. Different views pertaining to child development is given.

**Chapter 3** presents an overview of the planning, execution and findings of the empirical study. The four themes that were extracted are: relationships, trauma in the family, other trauma, and the before and after reactions pertaining to tattoos.

**Chapter 4** combines the literature control study with the extracted themes to ensure the validity and reliability of the research study.

**Chapter 5** presents the conclusions and recommendations of the study.

### **1.13 CONCLUSION**

There is a Native American proverb saying, “Hurt people hurt people.” (Brendtro & Du Toit, 2005:10). This seems particularly true for the adolescents referred to the Special Youth Centre as a result of crime committed. During the assessment, the history of the adolescents usually gives an indication of the trauma suffered and delays in almost all areas of development. Research has disclosed that unmet needs and painful or harsh circumstances have a detrimental effect on the growing child and give rise to behavioural problems in children and adolescents. Brendtro and Du Toit (2005:11) state, “The pathway to violence usually starts with mistreatment or trauma in the early life of the child.” Some of the adolescents at the Special Youth Centre often persist with behaviour indicating emotional problems. Examples are non-conforming in the classroom, constant attention-seeking behaviour, self-choking, cutting, attempts at suicide, making derogatory tattoos such as “convict” across the forehead, absconding for dagga, housebreaking and theft and misconduct of a sexual nature. These behaviours may be indications of emotional instability or an attempt at self-regulation. The researcher was seeking a method to unlock the memories and emotions, buried as unfinished business, and was of the opinion that a method enhancing body-mind integration would be appropriate. Investigating the virtue of body mapping as a tool in enhancing dialogue about these life experiences was the main aim of the research. If a method that would unlock the pain of past trauma could be found, it could be applied in future therapy as a means to prevent the continuing inappropriate behaviour.



## **CHAPTER 2: CONCEPTUAL FRAMEWORK**

### **2.1 INTRODUCTION**

This chapter will be devoted to the conceptual framework, thereby highlighting the most important concepts in this study. The chapter will be divided into three sections, giving an explanation of:

- Gestalt theory, which forms the paradigm of the study and is the main body of information in the conceptual framework.
- Occupational therapy, with special reference to occupation, the occupational therapy paradigm and the role of the occupational therapist.
- The developmental phase of adolescence from the perspective of the stages theory of development and the Gestalt theory of the developing field, as well as an explanation of how developmental theory is applied in occupational therapy.

The serious emotional and anti-social behaviour presented by the adolescents referred to the Special Youth Centre (WCED, 2004b) “who can only benefit from training/education if they are temporarily contained” (Rossouw, 2009:1) highlights the need for therapeutic assistance in addition to the programme implemented at the centre. The main psychological intervention is provided by the psychologist and counseling with regard to integration into the community, placement during holidays as well as contact with the family is provided by the social worker. The role of the occupational therapist will be explained in the paragraphs dealing with the paradigm of occupational therapy, and the occupational therapy view on development.

The holistic nature of Gestalt and the emphasis on the client’s field makes Gestalt play therapy an ideal form of therapy to use in conjunction with occupational therapy. The two paradigms complement each other and provide a practical and holistic way of working with emotional problems. As the aim of this research study is not therapy, the application of Gestalt play therapy will not be discussed in detail. Dialogue and field theory will be highlighted, as the aim of the study is enhancing dialogue and the method of intervention includes unstructured interviews, based on the principles of dialogue. In addition, the occupational therapy paradigm is also based on holism and the importance of the field of the patient is emphasized in the following paragraphs. As the study sample consists of five

adolescent boys between the ages of fifteen and eighteen, the developmental phase of adolescence will form the third part of this chapter.

## **2.2 GESTALT THEORY**

### **2.2.1 Introduction to Gestalt theory**

The foundations of Gestalt therapy was developed by Fritz and Laura Perls and Goodman in the 1940's and 50's. For South Africans it is noteworthy that the Perls lived in Johannesburg for 12 years, where Fritz Perls worked as a psychoanalyst (Masquelier, 2006:21). Perls rebelled against the analytical approach of psychoanalysis, which he saw as “reductionist, deterministic and over-intellectualizing” (Clarkson 1989:2). He was influenced by a former South African statesman and philosopher, General Jan Smuts who wrote a book, *Holism and Evolution* (1926) (Meyer, Moore & Viljoen, 1997:365; Clarkson, 1989:8). According to Meyer, Moore and Viljoen (1997:366), the personality psychologists Kurt Goldstein (1878-1965) and Fritz Perls (1893-1970), are regarded as pioneers in the field of holistic theories. Perls gathered ideas on holism from different sources and combined them to the field of psychotherapy. He developed a holistic method of therapy that engages all aspects of the person (Clarkson & Mackewn, 1993:40). He was further influenced by Kurt Lewin, who was the founder of Field Theory in psychology, and Kurt Goldstein (Clarkson, 1989:8). Perls took the concept of gestalt formation and destruction, used in Gestalt psychology in the perception of visual and auditory stimuli, and applied it to the emotional perception as well as to the figure-ground formation of the person in his field (Aronstam, 1989:630). Perls learnt from Lewin to view relationships in terms of the surrounding field and this interrelationship between the person and the field in which he is embedded, is central to Gestalt therapy.

When asked who Fritz Perls was and what motivated him to develop this form of psychotherapy, which was new and revolutionary for its time, the answer comes as a surprise. Perls was born to a wealthy family in Berlin in 1893. He spent his childhood living in the Jewish suburb of Berlin. He was a rebellious child because he was not accepted. He was too liberal for the Jewish and too Jewish for the German. His father was in the wine trade, travelled a lot and was a social person who wanted to become assimilated into the German culture. His mother came from an orthodox Jewish family and loved theatre and opera. Fritz came to hate his father and developed a spirit of rebellion which never left. His parents quarreled a lot and he witnessed violent arguments. He ran away from home when he was 10

years old and stayed away for a few days. He was expelled from school and was accused of petty crimes. Then he discovered the theatre and was hired to become an extra, working with the producer Max Reinhardt. Reinhardt insisted on the importance of emotion, the right tone of voice and gesture in order “to ring true”. He directed in a totally new way, wanting the actors “to be more themselves”. Perls was said to be stunningly successful in the role of Mephistopheles in Goethe’s *Faust*. (Masquelier, 2006:15-16).

Interesting for this study is the similarities between Fritz Perl’s background and that of the participants to this study. The researcher also found links between the history of Fritz Perls and the Circle of Courage model (Brendtro & Du Toit, 2005:43). Perls came from a home typified by strife and tension, where he did not feel *belonging*, and did not achieve *mastery* at school. This had an influence on his *independence*. He became rebellious, made the wrong choices and, as a result, he showed little *generosity*. If it had not been for finding the theatre and the teacher Reinhardt, Friedrich Perls and the legacy he left might have been lost for society. Instead of applying his talents in a positive way, he might have continued on his way of petty crime until it spiraled out of control.

Perls’s mastery in the theatre helped to restore the balance and also his relationship with his parents at a vulnerable stage of his life (Masquelier, 2006:16). When adolescents feel rejected, or if they lack a sense of belonging at home, they seek this sense of belonging in the peer group. In the event of them also not feeling accepted by their legitimate peer group, as was the case with Perls (Masquelier, 2006:15), the danger exists that this will push them towards a peer group which has an antisocial value system, but provides the belonging that they need.

Experiences during both world wars gave him compassion for individual suffering. Masquelier (2006:24) describes him as “a gruff anarchist with a big heart”. After returning to New York from South Africa in 1946, he started writing his first book, *Ego, Hunger and Aggression* and at the age of 53, he started on this new course and became a friend of Paul Goodman. Both Perls and Goodman became increasingly interested in the mind-body connection and the effect of emotions on the musculature and body as a whole. According to his wife, Laura, it was Goodman who “gave form to Fritz’s intuitions” and she later declared that it was thanks to Goodman that a coherent form of psychotherapy developed (Masquelier,

2006:29). Goodman was also a co-author of *Gestalt Therapy*, written by Perls, Hefferline and Goodman (1951).

Perls was driven by a search for authenticity and the value of experimentation (Masquelier, 2006:18). He succeeded in developing Gestalt therapy out of theories from different fields and based it on three pillars, namely holism and field theory, phenomenology and dialogue. When Fritz Perls died at the age of 77, he died as he lived: rebellious. He had a difficult life full of challenging circumstances; however, he made the best of it as he “became aware” and then made changes in order to grow. When looking at the adolescents at the Special Youth Centre, one is hopeful in believing that they would also be able to succeed in overcoming the adversities of their lives, as Perls, who believed in the inherent growth potential of man. However, he also believed that it is necessary to be aware in order to make the necessary changes and thereby enabling growth. It is hoped that the use of the tool of body mapping in this study, will enhance dialogue, thereby preparing the participants for growth.

Masquelier (2006:45) finds it beneficial that Gestalt therapy was developed by three very different people and not by one charismatic personality, as with many other types of psychotherapy. Masquelier (2006:45) describes Gestalt as “a place of welcome” and continues by saying that it is a therapy for everyone and anyone – it does not only cater for certain problems or disabilities like many of the other therapies. Masquelier (2006:48) also maintains that in the Gestalt approach, “psychopathology is considered to be a rigidity which blocks the process of growth, a maladjustment to the environment, which is in a state of perpetual change”.

Today, Gestalt therapy is often referred to as a humanistic, process-orientated form of therapy (Blom, 2006:170; Oaklander, 2006:46), focusing on the healthy functioning of the total organism (O'Connor & Schaefer, 1994:230). The emphasis is on the client experiencing and gaining a better understanding of his needs and ways of attaining these needs. There is an inherent belief in the potential for growth and healing (Thompson & Henderson, 2007:185; Yontef & Jacobs, 2008:320). Clarkson (1982:2) describes Gestalt therapy as:

... an approach which emphasizes right hemispheric, non-linear thinking, not at the expense of other ways of knowing, but as a compliment to these. The Gestalt approach is characterized by the use of the metaphor, fantasy and imagery, working with body posture and movement,

enactment and visualisation, time distortion and the full expression of feelings involving the whole body in action.

This description provides insight into the multifaceted character of Gestalt therapy. Some of these facets are also incorporated in occupational therapy, for instance the emphasis on the sensory system in Gestalt play therapy and sensory integration in occupational therapy. Some of the techniques utilized in Gestalt play therapy show a resemblance to the activities used by occupational therapists. It needs to be stressed that they are not necessarily utilized from the same perspective. In occupational therapy, sensory integration is studied and applied from a neuro-physiological perspective, and with other outcomes in mind. However, children with sensory integration problems often have secondary emotional problems and vice versa, and it is therefore a bonus if the occupational therapist has adequate knowledge of the benefits of sensory work for the treatment of both sensorial and emotional problems.

Body mapping comprises many of the above-mentioned characteristics common to both Gestalt and occupational therapy, making it a suitable activity for both therapies. It should be mentioned that Gestalt therapy developed a reputation for its use of experiments as part of the phenomenological approach. These are used to facilitate the awareness process in the client and insight will be obtained through interaction with him. The sensory experience, polarities and the top-dog/under-dog dynamic are then explored further. Yontef (1993:130) addressed the controversy regarding the faulty belief that Gestalt therapy equals the use of experiments. He explains it as follows: “A Gestalt therapist may use any techniques or methods as long as (a) they are aimed toward increasing awareness, (b) they emerge out of dialogue and phenomenological work, (c) they are within the parameters of ethical practice”. Body mapping complies with these standards set by Yontef and is referred to as a “tool” in the context of this study, as it is applied with the explicit purpose of enhancing dialogue. One could almost compare it to a key which has to open the door to the unfinished business connected to the memories of life experiences of the sample unit.

### **2.2.2 Gestalt play therapy**

Gestalt play therapy is a psychotherapeutic technique for the child and adolescent client that applies the theoretical framework of Gestalt therapy (Oaklander, 2006:20, 93). Gestalt play therapy was developed by Oaklander (1978). Therapy follows a specific process,

which includes the Gestalt principles, but in a child-friendly way, by taking the developmental stage of the client into consideration. Although literature usually refers to “the child”, Oaklander (2006:93, 2007:291) used the techniques on adolescents as well, and she included a chapter on the application of play therapy with adolescents in her work *Hidden Treasure: a Map to the Child’s Inner Self* (2006:93-118).

Milgrom (2005:3) mentions that play therapy for adolescents is addressed increasingly in play therapy literature, for instance by Carroll (1998); Jernberg and Booth (1999) and Cerio (2000). According to Milgrom, play therapy is especially suitable for adolescents who are weary of authority figures and makes “working” on issues far less threatening than doing it verbally. Milgrom (2006:4) also asserts that providing joyful and fun activities within a caring relationship can create special memories and experiences for adolescents who may have had a lifetime of overwhelming pain and loss. It is the opinion of the researcher that this description fits the adolescents at the Special Youth Centre and Gestalt play therapy is therefore deemed particularly suitable for this setting. It should be stressed that the therapist has to attain the required skill of adapting the play therapy process to the client’s age and phase of development. This implies that the therapist should have an extensive knowledge of the developmental aspects of childhood and adolescence.

Oaklander’s (2006:46) process-oriented play therapy aims at making the client aware of his process. Oaklander believes that it is through this awareness of their own process, coupled with experiencing their actions in therapy, that change takes place. The researcher is of the opinion that the process of body mapping will not only enhance dialogue, but will also increase the participant’s awareness regarding his own body and how he experiences his body.

### **2.2.3 The three pillars of Gestalt**

A discussion of the three pillars on which Gestalt is founded follows.

**Holism and field theory, phenomenology and dialogue are known as the pillars on which Gestalt is founded.** Holism and field theory are interrelated in Gestalt theory (Yontef & Jacobs, 2008:319). Holism is the most important theoretical concept underlying Gestalt: “... *gestalt* means a whole that cannot be broken without destroying its nature” (Clarkson &

Mackewn, 1993:33). Perls was concerned about the holism of the human organism or person in his surroundings as “all things in nature coexist in a changing process of coordinated activity”. Perls postulated that the body and mind cannot be separated and any attempt at such separation would preserve neuroses and not cure it (Clarkson & Mackewn,1993:33).

**Holism** implies:

- That people are self-regulating in themselves, as well as growth oriented (Clarkson & Mackewn, 1993:38). They also have an urge to complete unfinished business. Perceptions are organized in meaningful wholes. If a whole is incomplete, it causes disease and a “nagging memory”. Only when the task is completed can we truly forget about it, which leads to Perls’ theory of unfinished business. Perls devised practical techniques which help people to surface unfinished situations and to resolve them in the present (Clarkson & Mackewn, 1993:39).
- People are part of the environment in which they function and their problems cannot be understood apart from their environment (Perls, 1969:6; Yontef & Jacobs, 2008:320).
- The organism is a whole and should not be divided into the separate entities of mind/spirit and body. Kepner (2008:xiv) explains that we live a life as embodied beings, followed by the explanation that the splitting of the mind and the body is artificial and leaves us without access to the whole sphere of our being.

Perls was influenced by Wilhelm Reich, who discovered that unresolved emotional conflicts are stored in the muscles, skeleton and internal organs, which later forms an “armour” or defense against the emotions (Clarkson, 1989:11). This interrelationship between the emotional and motor systems formed the basis of Perl’s way of working through experiments and his belief that the truth can be observed in the body and not the words that a person speaks. Reich (in Clarkson and Mackewn, 1993:40; Masquelier, 2006:16) explained that any emotion is accompanied by a physiological sensation and component; therefore, good contact entails a cooperation of sense, movement and emotion. The body reaction of clients can give an indication that there is not congruence between what they are saying and what they really feel by means of some form of movement or other reaction. Perls (1973:15) concludes this line of thought by saying, “... through his [the client’s] experience of himself on the three

levels of fantasizing, play-acting and doing, he will come to an understanding of himself.” It is thought that body mapping will enhance the participants’ ability to verbalize their hitherto unexpressed life stories. It is believed that this technique would assist the mind/body connection of the participants when drawing firstly their tattoos and secondly their scars and lesions. When connecting with the body, the memory of life experiences and the symbolism presented by the tattoos/scars might be expressed. The sensory experience during the process of mapping the body assists in unlocking memories stored in the amygdala. A process is activated whereby the memories which were stored as situationally accessible memories are shifted to the hippocampus and turned into verbally accessible memories (Van der Merwe, 2009:293).

According to Perls (1992:180), holism requires inner peace and therefore internal conflict is opposed to holism. Perls quoted Freud, who said that if two servants are quarrelling all day, no work is being done. If a split exists in the personality, for instance between the conscience and instincts, the personality cannot function effectively and the person becomes “neurotic”.

This split in the personality (also referred to as the top-dog and under-dog) leads to the client trying to accept only the one while the other is “clamouring for attention”. The emotional instability of the adolescents participating in this study points to the fact that they are not at peace with themselves and need help to integrate the polarities, such as the top-dog/under-dog split. However, such integration is not the aim of this research study.

**Field theory** is one of the pillars on which Gestalt theory developed (Clarkson & Mackewn, 1993:42-43; Masquelier, 2006:68) and considers the organism and his environment as inseparable. Field theory is essential for understanding the Gestalt theory of change. It is a viewpoint of how the world is organized and how it works, how to observe this organization and how change occurs. The field is a whole in which the parts are in an immediate relationship and are responsive to each other and no part is uninfluenced by what goes on elsewhere in the field. The field approach in Gestalt therapy includes the emotions, body, mental abilities and spiritual and moral concerns (the internal field), and social interactions within relationships in small groups, large groups or within society and culture (external field) (Yontef, 1993:262). Perls was influenced by the writings of general Smuts, and how he took the idea from physics that everything has a field and is influenced by his field, and that



organisms are unintelligible if considered without these fields (Clarkson & Mackewn, 1993:47).

Together, the combined life spaces of therapist and client dynamically constitute the therapist/client field (O'Neill & Gaffney, 2008:228). The therapist can only get to know the field of the client by becoming part of it. Everything that takes place during therapy that was created by both the therapist and the client, called contact, is a creative process and thereby a shared field or “mitwelt” is created (Parlett, 2005:47-48). This factor will be kept in mind during the body mapping sessions, which may also help to bring the hitherto largely ignored home environment of the participant into focus if it is part of his unfinished business. Parlett (1991:69) describes the underlying and core principles of field theory, as developed by Lewin (1954), as:

- **Organization:** Everything is interconnected and the meaning is derived from the total situation. This implies that if we want to find meaning in a situation, we have to place it within its wider context. The more comprehensive this wider picture, the more fully and in depth we understand the fragment we are studying. Perls said that we cannot take notice of everything and that which we need to consider will come to the fore naturally (the figure ground process).
- **Contemporaneity:** This principle states that the past does not have an effect on us. We are affected by the memories of the past and the anticipation of events in the future. We can only make a difference now. The focus in Gestalt is not so much on how a person became the way he is now, but on how he keeps himself the way he is now. That gives the client the choice to make changes in his present field. The aspects of place and time also relates to four dimensions referred to as the “here and now”, the “there and now”, the “here and then” and the “there and then”.
- **Singularity:** This reminds us that every person and every experience and field is unique and circumstances can never be quite the same. What worked for one client may not work for another. This principle reminds us to be respectful, and we have the responsibility to view each client and his situation individually. The therapist and researcher should have a willingness to be tolerant of ambiguity and uncertainty (Parlett, 1991:73).
- **Changing process:** Change is inevitable. The change takes place in the field as a result of interactions between two individuals or in a group context. Our current situation is in flux, always presenting new information. Homeostasis and creativity goes hand in hand.

As the field is constantly changing, the individual has to react with creativity to achieve homeostasis. Zinker (1977) named this process creative adjustment.

- **Possible relevance:** All the factors in the field are potentially meaningful and nothing can be excluded as being unimportant or not having an impact.

Bronfenbrenner's bioecological theory (Papalia, Olds & Feldman, 2008:36) also emphasizes the bidirectional influence between the developing child/adolescent and the systems exerting a direct or indirect influence on the child, as well as the time aspect referred to in the principle of contemporaneity. Bronfenbrenner's theory upholds the principles of field theory and will be discussed further in Chapter 4 (4.2; 4.3).

**Phenomenology:** Gestalt therapy is phenomenological; the exclusive aim is awareness and the methodology is that of awareness (Blom 2006:17, Masquelier, 2006; Joyce and Sills 2010:17). The phenomenological approach means staying as close as possible to the client's experience in the here-and-now moment rather than interpreting his behaviour. Three rules are applied:

- **The rule of *epoche***, which implies that the therapist brackets (puts aside) all preconceptions while "staying with" what the client experiences (Yontef, 2005:94).
- **The rule of *description***, meaning that the therapist tracks and describes rather than interprets.
- **The rule of *horizontalization*** reminds us that all aspects of the field are equally important and potentially relevant.

Masquelier (2006:46) is of the opinion that as soon as one leaves the phenomenological approach, one starts to make judgments about other people. The aim is to make the client aware of how he is experiencing the world, and nothing matters except the discovery of his personal experience, the process of his experience (Yontef, 2008:321) and expressing this in his own words. Yontef explains that people only change when they are fully aware of who and what they currently are. Therapy therefore aims at creating situations or experiments "wherein the very core of a person's growth problem, restricted awareness, is the focus of attention" (Yontef, 1993:53). The focus is placed on making the client aware of his movement, posture, language, tone of voice, gestures and interactions. This is done through

specific techniques such as relaxation, breathing exercises, dance, expressive movement, drama, mirror work and projections by means of drawing, painting, making collages and techniques such as body mapping.

This viewpoint of the Gestaltists was applied during the body mapping sessions as the participants had the opportunity to tell their life experiences as they perceive them. Through the process of body mapping, sensory stimulation occurs via the visual, tactile, kinesthetic and proprioceptive senses (see 1.2; 1.11), thereby enhancing intrapersonal contact, which in turn improves awareness of their life experiences. It can thus be said that this study was conducted from a phenomenological perspective. Heppner and Heppner (2004:316) describe a phenomenological study as typically presenting "... the essence of the participants' lived experience through exhaustive descriptions". In this study the focus was on the participants' life experiences as unlocked by body mapping for the purpose of data collection.

## **Dialogue**

Dialogue can be described as a special form of contact which enables both the therapist and the client to create the therapeutic relationship. Crocker in Schoeman (2006b:5) explains this as follows: "The therapist is genuinely interested in the client as a unique person who has much to reveal."

The dialogic principle stems from the work done by Martin Buber, which he calls the I-thou relationship (Melnick & Nevis, 2005:110; Masquelier, 2006:49). It requires that the therapist should have a dialogic attitude, regardless of whether the client has the same attitude (Mackewn, 1997:82). Furthermore, it includes to 'hear' what is not spoken, and to 'see' what is not visible" (Hycner & Jacobs, 1995:xi) and recognises non-verbal forms of communication, such as body language and eye contact. The therapist has to pick up resistance and understand emotional expression in the form of projections.

This concept of dialogical relating was applied in the body mapping sessions with the participants. Their body language as well as their facial expressions, sighs and other sounds made by them were all regarded as signs of communication pertaining to content which the participant could find difficult to express. The researcher practiced the principles of dialogue, namely inclusion, presence, willingness to enter into dialogue, as well as the fact that dialogue is lived and active. This was illustrated by the dialogue expressed through the

participants' body maps. Everything on the maps were not expressed in words; much was said by the deftness or intensity of the strokes on paper, the presence or absence of colours, the features drawn and the detail added or left out. Sounds such as the loudness of a pen tapping on the desk while speaking, also gave an indication of unspoken content.

This “dialogic relating” (Joyce and Sills 2010:45) is what sets Gestalt apart from many other therapies, “which believes that interpretation, skilful interventions or behavioural retraining are the main keys to success”. The other important difference is that both the therapist and the client are changed by the dialogue, also referred to as the “between”. According to Houston (2003:21), the importance of this dialogue lies in the fact that it stems from the first interaction that the baby has with its mother and therefore can be referred to as an important form of relating with other people during this stage of development, as well as having a large influence on the way in which the client's personality was formed. Laura Perls, who is not often given recognition for her role in the development of Gestalt therapy, made major contributions to the development of Gestalt therapy as a dialogic therapy (Houston, 2003:20). Hycner (Hycner & Jacobs, 1995:5) is of the opinion that “perhaps the most essential healing component in therapy is the dialogic attitude of the therapist” (assuming some openness by the client). Stern (1985) in Mackewn (1997:75) postulated that people develop a huge range of aspects of self through ongoing relationship with others:

If the counselling or therapy environment is conducive to interpersonal learning and experimentation, clients who did not acquire a full spectrum of self functions because of impoverished or damaging interpersonal environments may develop new self functions and experiment with new styles of contact.

This is of special interest to the researcher, as the impoverished circumstances (pertaining to both material and psychological needs) of the learners at the Special Youth Centre are often described by the probation officer's reports. The adolescents have impoverished relationships with their families, peers and people in authoritative positions.

Dialogue includes two opposite poles, I-it (more objective) and I-thou (subjective) and both are essential. There has to be times of connectedness and times of separation. The I-thou experience is one of being as fully present as one can to another with little self-centered purpose or goal in mind. It is a mutual experience of “meeting”. Buber (in Masquelier,

2006:50) asserted that “once the moment of meeting has passed, a man does not emerge the same as when he entered”.

Researching a means to enhance dialogue is especially pertinent with this target group, as the researcher’s experience as employee at the Centre has showed that they find it difficult to give expression to emotional content through verbal communication and therefore use contact boundary disturbances / modifications to contact as a means of coping with unexpressed emotions and therefore unfinished business.

### **Principles of dialogue**

- **Inclusion:** Yontef (2005:95) postulated that inclusion implies to be able to place oneself as much as possible into the experience of the patient, even feeling it as if it were happening in the own body – without losing a sense of self. This implies that the researcher has to help the participant feel accepted for who he is. The differences in age, race, sex and culture have to be recognised and adaptations need to be made to accommodate these differences, for instance to communicate in an adolescent friendly way without reverting to their language. The therapist has to accept that although she might have the therapeutic knowledge, the adolescent is the expert on his “here and now”, his past and future. She has to be able to bracket her own perspective to be able to accept his reality.
- **Presence:** The researcher has to be fully present, giving all her attention, being authentic and true to herself and her values. According to Schoeman (2006b:3), the therapist “expresses herself to the client by sharing his perspective”. Yontef (1993:4) stated that “in Gestalt therapy the therapist does not use his presence to manipulate the client to conform to pre-established goals, but rather encourages the client to regulate themselves autonomously”(which would also be the goal of the researcher).

The use of body mapping could prove to be a valuable tool to practice the principles of inclusion and presence and is one of the reasons why the researcher decided to use unstructured interviews without taking field notes. The attention to the client’s non-verbal communication and giving him the researcher’s full attention – “being there” in a physical as well as in a mental capacity – is of the utmost importance if these two principles of dialogue are to be upheld.

- ***Commitment to dialogue:*** The researcher should be willing to continue working towards the I-thou relationship, even if the adolescent is only reciprocating with I-it. The most important thing she brings to the relationship is herself. She has to resist giving advice and should allow the adolescent the opportunity to discover what is important to him. The therapist should “meet the client and not aim” (Yontef, 2005:96).
- ***Dialogue is lived and full of energy:*** As mentioned before, verbal and non-verbal dialogue is equally important. Creative methods or techniques such as dancing, drama, working with clay, finger paint, etc. can evolve into an I-thou experience. In this study, the use of body mapping adds a new technique to the aforementioned list.
- ***Non-exploitation:*** The client is not merely an instrument in reaching a goal. At the same time, the therapist is not an agent of change and it is therefore important that the client feels as if he had grown and not been “changed” by the therapist.

In terms of the research study, it is important not to merely “use” the participants for the purpose of the therapist’s own interest, but to be honest and genuine during the empirical phase of the study. Central to the entire Gestalt therapy process is the dialogic relationship between therapist and client. The therapist’s task is to facilitate the process and to give support to the client as he learns to support himself in new ways of living. It is clear from the above why this theory is a core paradigm for this study. Body mapping was utilized within the dialogic relationship with participants to explore the applicability of this technique in unlocking information about their life histories, with the aim to collect data. If body mapping is effective as a technique to open discussions about difficult life experiences of the participants, further studies can focus on the use of body mapping to increase awareness and further the integration of such experiences.

#### **2.2.4 Gestalt concepts**

Masquelier (2006:9) described Gestalt therapy in the following words:

Gestalt therapy takes us from the age of photography to the age of cinema. Gestalt is concerned with process, and the constant adjustment between an organism and the environment which is also in a state of constant change. Gestalt therapy talks of the contact cycle, of creative adjustment and growth.

This quote describes the flowing process of Gestalt. The following concepts all form part of this flowing process and are only compartmentalized for the purpose of description.

### ***Organismic self-regulation***

Organismic self-regulation entails that the organism has the ability to constantly work towards attaining balance or homeostasis in order to keep healthy (Perls, 1973:4). This process regulates all the aspects of the organism, namely psychologically, emotionally, spiritually and physically. The body tells us when to eat, drink and rest. This implies that a person has to be aware of his sensations, perceptions, needs and beliefs. Furthermore, the person has to be able to satisfy these needs through contact with the environment in order to achieve balance or homeostasis. When a need is satisfied, balance is attained and closure is reached, and that figure (Gestalt) moves to the background, allowing new ones to emerge. If a need is not satisfied, dishomeostasis occurs and Gestalts are not completed, clamouring for attention.

From a Gestalt perspective, it is believed that all people, children included, have the resources for healthy self-regulation. According to Oaklander (2006:14), it is the organism striving to reach homeostasis that often leads to inappropriate behaviour. In terms of the adolescents under discussion, their inability to satisfy their basic needs in a regular, lawful way may lead to criminal ways of attaining needs. Tension created by the awareness of a need, for example of shoes and clothes, cannot be dispersed in the normal way; the tension remains and a situation known as unfinished business arises. If this situation arises continuously, the adolescent will find other ways of releasing the tension created. Different forms of modifications to contact may arise, according to the process of the adolescent. Reynolds, (2005:161) states: "Thus the behavioural choices of the child can range from conscious and aware choices that are creative, spontaneous adjustments, or unconscious and rigid patterns, what we refer to as "fixed gestalts". The creative adjustment to different circumstances is the healthy way of attaining needs, but remaining "stuck" to a pattern which was successful years ago is considered a fixed and unhealthy pattern. The adolescents appear to be stuck in patterns which may relieve the initial tension, but cause many other problems.

### ***Figure and ground***

This is a continuous process by which the organism perceives the environment as a total unit of meaning, responding to the whole that is seen (Perls in Clarkson & Mackewn, 1993:41).

This whole is composed of units or stimuli to which the organism attends (foreground), as well as those that he does not pay attention to (background) (Korb, Gorrel & Van de Riet, 2002:4). The focus of attention is determined by the need at that specific moment. A healthy person's perceptions will center on this foreground (clear) image and his behaviour will be directed toward satisfying that which he perceives as the dominant need at that moment in time, using the resources within himself or the environment (Clarkson & Mackewn, 1993:49). According to Perls, neurosis is the inability to focus on the foreground need. The dominant need is also determined by the developmental phase of the person. An example is the young child's need for security and safety, which determines the dominant need for his close proximity of the mother, whereas the adolescent wants greater independence and wishes for closer contact with his peers. During the developmental phase of adolescence the whole field changes with the adolescent. His needs are different from before and the ways in which he will satisfy his needs are also different. As his sexual identity is formed, and sexuality becomes the foreground, more and more attention is given to the opposite sex and social situations which include members of the opposite sex. His foreground needs also affect the people in the rest of his field and a change in one element of the field has an effect on the rest of the field.

### ***The cycle of Gestalt formation and destruction***

This process depends on the figure-ground relationships. A situation is constructed of an organism's awareness of self, of the environment and of the relationship between the two. This awareness forms a Gestalt, a meaningful pattern or configuration. The primary rule is that the most pressing need determines the clearest figure. Completed experiences fade into the background of a person's experience when something else that needs attention comes to the fore. When an experience is resolved in a successful or pleasing way the process of Gestalt formation functions smoothly. In order for Gestalten to form and dissolve naturally, a person has to function with full awareness (in the here and now). Any pattern of behaviour that has been held over from the past, or anticipated for the future, diminishes the amount of attention and energy that can be applied to the present Gestalt. This does not only imply that the organism will find it difficult to cope in the here and now, but that the present becomes coloured with behavioral patterns and concerns from the past, and this is referred to as unfinished business. This causes a slightly distorted experience of the present Gestalt (Korb *et al.*, 2002:5). This aspect is relevant to the adolescents at the Special Youth Centre as they



all have experiences of criminal involvement on different levels of intensity and many of them have histories of socio-economic and other forms of deprivation. These factors give rise to unmet needs and tension which do not dissipate, staying locked in the clients' bodies as unfinished business.

### ***Contact***

Contact is about being in touch with what happens or emerges in the here-and-now as each moment unfolds (Yontef & Jacobs, 2000:305). Kirchner (2001:1) is of the opinion that "contact is a creative and dynamic process in which the organism adjusts to the environment". Gestalt therapeutic methods are focused on improving a client's contact, both with himself and with other people, to help him have satisfying contact with the important people in his life. Intrapersonal contact refers to him knowing what is happening in his body, with his feelings, his needs and desires and between the two sides of a polarity, or different aspects of his personality. Interpersonal contact implies contact between him and his environment. The individual should be able to regulate the flow of contact and withdrawal in order to complete the Gestalt (Aronstam, 1989:634, 635; Korb *et al.*, 1989:39). This ensures a healthy, rhythmic flow of contact which enables organismic self-regulation and homeostasis (Blom, 2006:23). Oaklander (2006:5) postulates that most of the clients requiring therapy either have problems with making contact and/or have a poor sense of self.

### ***Contact boundary***

It is at the contact boundary that the psychological events take place. Our thoughts, actions, behaviour and emotions are our way of experiencing and meeting these boundary events. The way in which the adolescent is functioning in his environment reflects how he is experiencing the contact boundary between him and his environment.

If the relationship is mutually satisfying, the individual's behavior is what we call normal. If the relationship is one of conflict, the individual's behavior is described as abnormal... Our thoughts, our actions, our behavior and our emotions are our way of experiencing and meeting these boundary events (Perls 1973:15).

Contact is the way by which a person grows and develops. With every contact that the person has with his environment, he is expanding himself and his possibilities. According to Perls, Hefferline and Goodman (1951:373), contact occurs at the contact boundary between the self and others (interpersonal), and at the boundary between the "I" and the "not I"

(intrapersonal). The contact boundary has two functions: It can connect the organism with the environment (or with entities within himself), or it can form a separation between organism and environment (and between entities within the organism). This boundary should be penetrable to allow contact taking place. If it is too rigid, the organism has poor contact and remains isolated. If it is too penetrable, the organism will not be able to retain his own identity and will be in confluence with the environment (Aronstam 1989:634-635; Yontef, 1993:207; Blom, 2006:34). The learner in confluence does not show his own personality and does not voice his own opinion. He is easily indoctrinated by his peers and gang members and would repeat statements that he adopted from their doctrine. He does not question their legitimacy. On the other hand, the adolescent who has a rigid boundary and cannot make contact alienates himself from other people, but also alienates himself from being an integrated and a holistic person, as his intrapersonal contact is also lacking.

### ***Stages in the Cycle of Experience***

The process of Gestalt formation and destruction, or organismic self-regulation, occurs in different cyclical stages. Interruptions to contact, also called resistances or contact boundary disturbances, and most recently, modifications to contact, can occur at different stages, leading to different outcomes in terms of behaviour (Joyce & Sills, 2010:107). This is presented by some authors as the cycle of experience (Reynolds, 2005:159) and by others as the cycle of contact or the awareness continuum (Yontef, 1993:139). Its relevance for the unit of analysis in this study concerns the ways in which contact is interrupted and the stage of the cycle in which the interruption occurs, leading to different modifications to contact. It was hoped that the mapping of the respondents' tattoos and scars would shed light on this phenomenon in order to be able to deter behaviour which could be dangerous for the adolescent, for example those practiced during retroflexion. The researcher is referring to the practice of making tattoos as well as certain forms of self-mutilation, such as cutting.

#### Stage one: Sensation and awareness

The organism experiences a need (internal) or is disturbed by a stimulus from the environment (external). This need or stimulus becomes the figure if it is strong enough and the organism becomes aware of a sensation. An example could be the adolescent feeling a need to be loved and to belong somewhere. He has to be able to sort out this awareness from all the different internal and external stimuli.

### Stage two: Mobilization and choice of action

In this phase the energy to mobilize the desire or need towards action is developed. Choices are made as to the way in which the need will be satisfied. The adolescent could choose to try and make contact with his mother by making a phone call. If he has often had the experience that he does not get the love and attention that he is longing for when phoning home, he might choose to give in to the pressure from his peers who are trying to convince him to make a tattoo as a sign of belonging to the gang.

### Stage three: Action phase

This involves the ability to move toward interaction with something in the environment or within the self in order to satisfy the desire or need. The adolescent has made his choice and moves towards the room where he knows they are currently making tattoos.

### Stage four: Contact

This involves the act of interacting or making contact with the object, person or idea. Strong contact is based on clear awareness supported by ample emotional energy. The adolescent enters the room and indicates that he is ready to have the gang tattoo made, and the action of making the tattoo takes place.

### Stage five: Final contact/satisfaction or post-contact/resolution of one's experience of contact

This is the process of savouring, processing, and reflecting on the experience and draining one's energy away from the figure in order to move away from contact. The adolescent experiences the aftermath of the decision he had made. He hopes that it will dissipate the uncomfortable feeling of the unfinished business – the fact that he feels unloved and unappreciated by his family members. He had thought that he would feel better after having made the tattoo. He now realizes that it is going to worsen his relationship with his family, alienating him further as they are against tattoos. He has more unfinished business.

### Stage six: Withdrawal and organism at rest

This is the stage of completion of the contact, making space for the next cycle to begin. It is the stage where one returns to oneself in order to integrate what occurred. The adolescent resigns himself to the fact that he has at least achieved some recognition from the other members of the gang, which compensates for his doubts about his family.

### ***Modifications to contact***

Clients needing help have usually developed adaptive patterns of response to situations in which they had found themselves in earlier life where their needs had not been recognized or satisfied. Although these patterns had value at the time, they are currently out of date and usually prevent satisfying contact both intra- and interpersonally. These patterns have become second nature, i.e. habitual, and they function out of awareness. The result is that the client does not understand how he is contributing to what continuously goes wrong in his current life. If he does understand, he feels incapable of changing. A Gestalt therapist can aid the person in understanding how these patterns “live” in his present by bringing them into awareness where they can be explored. It was hoped that the body maps would help participants bring such fixed patterns, based on life experiences, into awareness by the exploration of the meaning of their tattoos, scars and lesions.

In the early days of Gestalt theory, these habitual patterns of contact were referred to as contact boundary disturbances, or resistance by some authors. They were seen as interruptions to the steady energetic flow in the process of contacting. This occurs during the different stages in the cycle of experience. Initially, Perls identified six such contact boundary disturbances, namely: introjection, projection, confluence, retroflexion, desensitization and egotism (Blom, 2006:31). Polster and Polster later added deflection in 1973. Joyce and Sills (2010:106) propose that the term “egotism” is misleading, and calls it “self-monitoring”. Joyce and Sills (2010) prefer the term “modifications to contact” to the term “contact boundary disturbances”. They revised the term as a result of their belief that contact cannot be described as either good or bad, as it depends on the meaning and needs as well as the field conditions at that specific moment in time. A healthy person is able to vary his response to adapt to new circumstances. Each modification to contact is seen as a continuum of responses with two opposite poles at either end of the continuum. According to the new viewpoint, response at either end or pole could be correct. An example of the continuum of confluence versus differentiating will be given: the adolescent, who needs increasing independence, moving away from his family towards closer contact with his peers, goes into confluence with them. As he develops his own identity, he starts voicing his own opinion. This is expected behaviour for his age group. However, if he reaches adulthood, it would be expected of him not to be in confluence with his peer group, but rather to differentiate from them.

Problems arise when the organism habitually responds with a modification at either end or pole, which is referred to as a hardened dichotomy (Yontef & Jacobs, 2007). These modifications to contact inhibit the individual's ability to function optimally and interfere with the process of attaining needs, thereby causing dishomeostasis or ill health (Blom, 2006:31-40). Joyce and Sills (2010:107) suggest the following explanation of modifications to contact

**Table 2.2.4**

MODIFICATIONS OF ENERGY AND STIMULI:	
Retroreflecting.....	Impulsivity
Deflecting.....	Accepting
Desensitizing.....	Over-sensitizing
MODIFICATIONS TO INTERPERSONAL CONTACT:	
Confluence.....	Differentiation
Introjecting.....	Rejecting
MODIFICATIONS OF SELF-PROCESS:	
Self-monitoring.....	Spontaneity
Projecting.....	Owning

According to Oaklander (2006:6), modifications to contact could be caused by trauma as well as developmental aspects during childhood and results in clients who “restrict, block and inhibit themselves”. Oaklander (2006:7) names the types of trauma that cause these interruptions of contact as abuse, divorce, rejection, abandonment and illness. The developmental causes could be a result of confluence and separation, egocentricity, introjects, not having needs satisfied, setting boundaries and limitations, the effect of a variety of systems (school, church, economic, political), cultural expectations and the parents’ responses to the child, particularly to anger.

In summary, it can be said that according to Gestalt theory, healthy or successful functioning can be considered as the ability of the organism to live in contact with the self and the environment in each unique situation in order to adapt to current field conditions. This implies that the organism is creative and aware and is able to modify contact, also referred to as creative adjustment.

Many learners at the Special Youth Centre experience the trauma of the loss of parents or substitute parents. They are often raised by their grandmothers. At the stage where the grandmother gets too old or becomes ill and dies, the adolescent has to live with his mother and her partner or his stepfather. He often does not feel accepted. This usually leads to battles between the stepfather and the adolescent. If the adolescent has an extroverted personality, he might retaliate with aggression and anger, shouting or swearing, i.e. voicing his anger (deflecting). The introverted adolescent who does not have the ability to express himself and is not in touch with his aggressive energy might retroflect his anger, turning it on himself. This could be the cause of psychosomatic symptoms such as headaches or stomach ache. The inability to make meaningful contact and resolve differences, causes the adolescent to leave his home and find belonging elsewhere, often in a peer group that is involved in drug abuse and criminal activities.

### ***Unfinished business***

Schoeman (1996:33) describes unfinished business as “unexpressed feelings or concerns and unsatisfied needs”. Latner in Schoeman (1996:55) refers to it as “organismic indigestion” and asserts that we “become clogged with this foreign matter”. This factor impedes relationships with other people and is one of the biggest problems that children and adolescents face. As a result of such unfinished business, they are unable to establish organismic self-regulation. At this point the child (adolescent) desperately tries to obtain balance, and the unfinished business is projected into his own body. This creates both physical and other symptoms, which represent expressions of unresolved conflicts. They may become “monsters” in the child’s life which are then carried through the next developmental stages (Schoeman, 1996:55).

Unfinished business keeps old, unfinished Gestalts alive, with a resulting loss of energy and vigour. When these Gestalts are completed, the release of energy restores a person with new vitality and a zest for life. This is the only time in Gestalt therapy where the past is brought into therapy, as it has an effect on the organisms functioning in the present, in the here and now (Schoeman, 2006b:33). This concept is one of the reasons for believing that body mapping would be suitable for the age group concerned. If contact is improved via the sensory stimulation provided by participation in body mapping, the mind-body connection would be activated and the participant would have the opportunity to relate to life experiences

such as the above-mentioned loss of his grandmother and the unsympathetic manner in which he is accepted in his mother's home. Telling the story would provide an opportunity to work towards finishing the unfinished Gestalt.

### ***Structure of the personality***

According to Perls (in Blom, 2006:42-46; Thompson & Henderson, 2007:187), the structure of the personality consists of five layers, indicating how people can fragment their life and, in doing so, not achieve success. These are the synthetic, phobic, impasse, implosive and explosive layers. Although these layers denote at which level an adolescent is functioning, it also gives direction to therapy, as the process towards health can be followed through the layers till termination, when the explosive layer is reached. According to Oaklander (2006:47), therapy is also stopped when the child stays stuck in the impasse. Perls (1973:63) calls a person whose difficulties make his present life unsuccessful a neurotic. He describes a neurotic as:

A person who chronically engages in self-interruption, who has an inadequate sense of identity (and thus cannot distinguish properly between himself and the rest of the world), who has an inadequate means of self-support, whose psychological homeostasis is out of order, and whose behaviour arises from misguided efforts in the direction of achieving balance. ... The neurotic finds it difficult to participate fully in the present – his past unfinished business gets in his way.

Many of the factors named by Perls are present in the adolescents who are referred to the Special Youth Centre due to their criminal activities. They use “misguided ways” to achieve homeostasis when they try to satisfy their needs through criminal activities. Many learners are still in the synthetic layer of the personality. This layer is characterised by playing roles and trying to please others, not being true to himself. Behaviour is mainly motivated by introjects and by what the environment expects. Others are in the phobic layer, where they experience fear as a result of being aware of the roles they are playing. Despite being aware of the fact that they should move on, they are too afraid to. In the impasse, external support is not forthcoming, and they believe that they cannot support themselves. Many of the learners at the Centre have had intervention before, and have had numerous court appearances and mothers who have to take leave from their jobs to appear in court. The awareness of the effect that crime has on their own and others' lives might have been there. This stage is

characterised by the fact that even though the awareness is there, and they want to change, the impasse makes it difficult to muster enough energy to break free from the habitual pattern of satisfying their needs. They have an inadequate sense of identity and experience problems with unfinished business. They do not feel ready to handle the pain associated therewith (Blom, 2004:37). When they move on to the implosive layer, they become aware of the need to change. However, the energy necessary to accomplish this, cannot be mustered. As they move on to the explosive layer, they start taking responsibility for their own behaviour and emotions and become aware of the process. (Blom, 2004:40).

The above is relevant to the target group of this study, as the participants are currently not aware or, if aware, are still caught up in the stage of impasse. Contact should be improved in order to lead to the steps of growth by following the layers of the neurotic personality. Oaklander's (2006:20-49) play therapy process would be the ideal way of addressing their problems. For this research study, the process of body mapping would be the first step in the direction of healing if it was found to enhance dialogue. Although therapy was not the aim of this study, the paradigm on which the study is based is Gestalt and the process followed when therapy was practiced is that of Gestalt play therapy. This process is relevant for this study as dialogue is an integral part of the Gestalt process and therefore the principles of dialogue would be applied during the execution of body mapping and unstructured interview sessions, aimed at data collection.

### **2.3 OCCUPATIONAL THERAPY**

Occupational therapy has many different fields of interest as well as very specialized areas of practice, dictated by the specific needs, age and level of disability of the client. Occupational therapy is applied to any age group and encompasses most occupations. Enabling participation is the objective of occupational therapy (American Occupational Therapy Association (A.O.T.A.), 2002; Canadian Association of Occupational Therapists (C.A.O.T.), 1997; Law, 2002 cited in Rodger & Ziviani, 2006:79). In order to achieve this goal, occupational therapists have to maximize the person-environment-occupation relations. The process as well as the outcome of participation within the environmental and cultural contexts in which these activities occur, have to be studied (Roger& Ziviani, 2006:79, 80).



**2.3.1 The occupational therapy paradigm** has shifted since the 1980s from the biomedical to the biopsychosocial and has been placing an increasing value on the dignity of the person as well as on his subjective experience (Ikiugu, 2007:33). According to Detweiler and Peyton (in Ikiugu, 2007:37), the new paradigm “links physiological function, psychological processes, and human agency”, or what they call the “psychological narrative” genre and is therefore very similar to the stance from which the Gestalt philosophy of holism developed. The interaction between person and environment for development, health and well-being is now recognised. According to the new paradigm, the nature of occupational therapy is “client centered, occupation based, collaborative, therapeutic intervention, with the goal of facilitating engagement in meaningful occupations for effective participation in life” (Ikiugu, 2007:80). This new paradigm has resulted in occupational therapists taking the view of the client as well as his family into consideration (Ross & Deverell, 2004:12; CAOT, 1997 in Rodger & Ziviani, 2006:123) and the families now have the responsibility to make the decisions previously made for them by the occupational therapist. Occupational therapists see their clients in their daily environments of home, school, community and workplace, as they recognise the importance of the interaction between person and environment during their day to day occupation. The American Occupational Therapy Association’s Practice Framework (AOTA, 2002) includes cultural, physical, social, spiritual, personal, temporal and virtual contexts for the therapist to consider during assessment and when planning intervention strategies (Ikiugu, 2007:11, 12). Ikiugu (2007:34) highlights the fact that “this paradigm allows the occupational therapists to “study occupation, not only as an objective phenomenon, but also as a subjectively felt experience of a person engaged in a dynamic interaction with the environment”. In Gestalt terms, this implies the incorporation of phenomenology (subjective experience), dialogue and field theory, thereby further supporting the unison between Gestalt theory and occupational therapy. According to the PEO Model intervention by the occupational therapist is aimed at optimising the client’s occupational performance by maximising the fit between the client, the environment and occupation (Law, Missiuna, Pollock & Stewart, 2005:67; Rodger & Ziviani, 2006:82, 84, 86). According to Kemp, Whittaker and Tracy (cited in Rodger & Ziviani, 2006:82) person-environment practice encompasses work with individuals, families, groups and neighbourhoods within two distinctive fields of practice, namely the micro- and macro-level. Micro-level practice involves individuals in their immediate environment while the macro-level includes work at community level as well as involvement in social policy, planning and action.

It has been found that therapists do not necessarily have the same perspective as the parents concerning the most important need of the child at a specific stage. An example could be an adolescent who has been sentenced to the Special Youth Centre as a result of committing a serious crime. The therapist might be aiming for attaining the level of moral development and life skills considered normal for that developmental stage, whereas the parents are desperate to have the adolescent accepted in a rehabilitation programme for his drug abuse and resulting uncontrollable behaviour when he is at home. Furthermore, addressing the emotional- and behavioural responses of the adolescent might be of greater importance to the parents. This stresses the need for a collaborative approach where the adolescent, the parents and the therapist can find the “best fit” when planning the intervention. Rodger and Ziviani (2006:30) refer to the practice of incorporating the parents as family-centred practice (FCP). Although this is the ideal situation, it is difficult to obtain in the setting of the Special Youth Centre.

Gutman, McCreedy and Heisler (2004:11, 12) also regard the therapeutic relationship as a crucial component in occupational therapy to ensure a safe, non-threatening environment for the adolescent. They also state that many children “... are in hiding and attempt to maintain the secrecy of their problems, particularly psychosocial problems”. As discussed in Chapter 1, the rationale for this study had evolved from a need to solve this very real problem.

With this shift in the **paradigm** of occupational therapy from the medical- to the psychosocial/ecological model, more emphasis is placed on the preventative role of the therapist in the community. According to Neistadt and Crepeau (2002:636), “occupational therapy practitioners have a responsibility to be knowledgeable about issues on child abuse and neglect, their legal and ethical responsibilities and their role in providing appropriate therapeutic interventions”. This implies a greater knowledge and understanding of children’s and adolescents’ emotional issues as well as practical ways to intervene, as there are an ever increasing number of children who need this type of help. It is envisaged that this study will be of advantage to the field of occupational therapy as it provides an alternative method for the occupational therapist working with adolescents with emotional problems. Body mapping could provide a method of opening up dialogue about emotional issues on different terrains, for instance physical abuse, sexual abuse, and where the child’s body is affected by a specific disability or illness.

### **2.3.2 Occupation**

Day to day activities are referred to as occupation, which serves many purposes: It provides pleasure and personal meaning, can ensure survival and necessities to people and can change according to life situations and circumstances. Therefore the occupation that is important to a person can change over time. Reilly in Cole and Tufano (2008:90) emphasized that occupational behaviour is developed according to a developmental continuum and includes the child's need to explore, achieve and reach competency. According to Reilly's Occupational Behaviour Model, normal development influences the process of occupational behaviour, which develops along a continuum from play in childhood to work in adulthood. In childhood, children engage in occupations for exploration; this evolves in the desire to learn and gain a sense of competence. Finally, this process culminates in the urge to master and achieve tasks such as work and productive activities in adulthood. Persons who experience disruption of childhood play experiences are likely to show disruption in adult occupations.

This is evident in the adolescents at the Special Youth Centre. Their deprived environment and lack of preschool education and stimulation place them at a disadvantage from their first year at school. They drop out of school during the intermediate phase or at the start of the secondary school phase and therefore do not learn the skills that they will need later on in order to find a suitable occupation. According to Reilly in Cole and Tufano (2008:90), humans have a psychological need for an occupation and when they lack this, they suffer. An occupation is the main way in which people firstly occupy time, secondly find meaning, and thirdly establish the ability to contribute productively to society through life roles. Christiansen (in Rodger & Ziviani, 2006:ix) asserts that "engagement in occupations leads to the development of skills and mastery necessary for competent role performance and identity formation". During the researcher's years of practice at the Special Youth Centre, it has become clear that these adolescents seldom engage in the roles described as "normal" for this age group. With the exception of a few, they often drop out of school at a young age, and seldom regard themselves as scholars. Their role as a child in the family is often also disrupted or non-existent, depending on their level of engagement in gang- as well as criminal activities and normal roles are displaced by anti-social roles such as being gang members or street children.

### **2.3.3 The role of the occupational therapist**

At the Special Youth Centre the occupational therapist has the primary role of facilitating occupational performance by providing opportunities for engagement in appropriate occupation, providing education/counseling in life skills as well as facilitating groupwork for rehabilitation or educational purposes. The role of the occupational therapist is conceptualised by American Occupational Therapy Association in the Occupational Therapy Practice Framework (2002:609) and emphasizes “the use of the self, or what is known as the therapeutic relationship” (Kramer & Hinojosa, 1999:28). It also emphasizes client-centered (CAOT, 1997; Law, 1998 in Rodger & Ziviani, 2006:119), collaborative therapeutic interventions, referring to the relationship between the client and therapist. The self-choice and motivation of the client makes the occupations meaningful to him.

### **2.3.4 Research in occupational therapy**

New understandings and beliefs about the environment and person-environment relations are promoting the development of practice models that incorporate a social view of health and disability. Occupational therapists are increasingly trying to be more in touch with the environment of the people with whom they work, and this reflects in assessment and treatment. Rodger and Ziviani (2006:80) postulate that “there is emerging consensus that health related research and interventions should be based on ecological models”. Ecological models are concerned with the inter-relationships between individuals and their socio-physical environments. According to aforementioned authors, children [adolescents] vary in their abilities to shape, adapt and make use of their everyday environments. Attention to the fit between children [adolescents], their activities and environments is important for ensuring that children [adolescents] who need them will have the social and environmental supports necessary to participate in desired or requisite activities. Researchers are using qualitative methods as well as the participation of clients to obtain information regarding complex issues of health and disability and to reach a greater understanding regarding the relationship between person, occupation and environment (Letts, Rigby & Stewart, 2008:10-13). It is therefore clear that the choice of qualitative research of a holistic nature is congruent with both the paradigms of occupational therapy and Gestalt play therapy.

## **2.4 THE DEVELOPMENTAL PHASE OF ADOLESCENCE**

Adolescence is the stage of development between the middle childhood years and adulthood. This stage could span a few years in privileged communities where adolescents prepare for their vocation through secondary school and tertiary studies to acquire the necessary skills for adult life and vocation. In the underprivileged communities and third world countries, few adolescents have the luxury of these years of study. Adolescents who do not partake in studies or start with a career have too much leisure time on their hands, which can lead to risk-taking behaviour. Erikson (1950), cited by Taylor & Abell, (2005:144) described the specific tasks of adolescence as separation, individuation and developing an own identity. According to Papalia *et al.* (2008:40), adolescence is full of opportunities for growth, but also risks to healthy development. They classify risk behaviour as drinking alcohol, abusing drugs, engaging in sexual and gang activity and using firearms. This risk-taking behaviour is usually established in early adolescence. A characteristic of the target group for this study is risk-taking behaviour to such an extent that the participants became involved in criminal activities.

### **2.4.1 The stages approach to development**

#### ***Emotional development***

McMahon (2009:30) asserts that

The strong emotions of childhood surface again in adolescence. The way in which earlier developmental tasks were dealt with is reflected in behaviour. Issues of trust, attachment and separation, containment and non-containment, autonomy and shame and doubt, initiative and guilt, all re-emerge in the adolescent's task of establishing a sense of identity.

According to Newman and Newman (2006:315) adolescents are often described in terms of their emotional variability and moodiness, leading to emotional outbursts. "However, evidence suggests that this is also a time of increased emotional complexity, with new capacities to identify, understand, and express a wider range of emotions" (Kang and Schaefer in Newman & Newman, 2006:315). There is a strong interdependence between emotion and cognition and the reasoning about the consequences of expressing emotions may lead to better control or management of emotional expression (Hoeksma, Oosterlaan &

Schipper in Newman & Newman, 2006:315). It is therefore postulated by O'Brien and Weissberg (in Newman & Newman, 2006:315) that a major task during this time is to gain insight into one's own emotionality, and to expand one's capacity for empathy with the emotional state of others. Children who are taught through example and allowed to naturally and responsibly express emotions are better able to constructively and creatively use them throughout life. Hannaford (2005:66) asserts that talking about feelings is of particular benefit as we engage thought and reasoning processes to comprehend and verbalize the important emotion-cognition link. She continues explaining that when people are given no outlet for emotional expression, they may start to doubt their personal value. The suppressed emotions lose their links with conscious awareness and this state of denial becomes linked with the survival centres. As a result, the emotion is then connected to fear and self-doubt. When emotions are finally expressed, they can often emerge in a violent, explosive outburst. If they remain suppressed or denied, they precipitate a chronic release of adrenalin and depress learning, memory and the immune system, which can possibly lead to life-threatening cancers and heart disease. Encouraging children to express emotions in humane ways allows them to connect safely and honestly with each other. This safe connection is paramount to learning, and is also important to longevity and health.

Newman and Newman (2006:315) name delinquency as an example of externalizing problems in contrast with, for instance, eating disorders, which are an example of internalizing emotional problems. To understand the emotional response of the typical adolescent at the Special Youth Centre, it is necessary to revert back to the initial stages of emotional development of the infant and specifically to the theory regarding attachment and attachment disorders, or as recently described, as disorganised attachment. It appears as though the emotional development of many of these adolescents have suffered impoverishment since they were born. The factors impacting on their cognitive development and ability to abstract reasoning, further affect their ability to manage their emotions according to the aforementioned description.

### ***Physical development***

Adolescence is a phase of major changes, both physically and mentally (Louw & Edwards, 1998:476; Papalia, *et al.*, 2008:414-415). The adolescent's body undergoes changes, but not only in length and mass as in previous stages, but also by sexual development, which brings

about metamorphic changes. This development is activated by hormonal changes that start in puberty and lead to reproduction maturity. Although the young adolescent's body is physically capable to reproduce, the accompanying emotional maturity and mental capability for the responsibility of parenthood is only attained towards late adolescence. According to Papalia *et al.* (2008:419), physicians are seeing puberty and its changes before the age of ten in Western societies, while adolescence is regarded as the stage between the ages of 13 and 19 or 20. Sound mental, emotional and social skills are needed to enable the adolescent to make good choices regarding his new-found sexual maturity and to develop a future occupation which will provide the financial stability necessary for sustaining a family in the next developmental phase.

### ***Cognitive development***

Piaget's Model of Cognitive Development (1962) (Louw & Edwards, 1998:464-465; Papalia *et al.*, 2008:33-34) postulates that the capacity for abstract reasoning develops in adolescence and named this the formal operational stage. This development depends on the genetic endowment (nature) as well as the opportunity to learn and develop (nurture) and the successful completion of previous developmental phases.

### ***Psychosocial development and identity formation***

According to Erikson's Model of Psychosocial Development (Louw & Edwards, 1998:472; Wait, Loxton & Meyer, 2005; Papalia *et al.*, 2008:26, 29-30), the child's identity is formed as the child passes through eight different stages of development. These stages are designated by approximate ages, and each stage has a crisis that has to be resolved. These crises are challenges posed by important people, social groups, culture and the environment to which the child has to adapt. These stages have a set of ego conflicts which have to be resolved in order to master each stage successfully. According to the epigenetic principle, development occurs when the psychosocial challenges of the current as well as the previous developmental stages are met (Wait *et al.*, 2005:15). The psychosocial goal which has to be attained by the adolescent is developing an identity, including a sexual identity, in order not to experience identity and role confusion in later life. Identity formation also includes a socio-cultural identity, a vocational identity and an own value system.

According to Erikson, this stage can be completed either successfully or not. Some adolescents move through this phase without undue stress or behavioural manifestations, knowing who they are, what their values are, and what they want. Other adolescents find this developmental stage taxing. They question the values with which they grew up, and try to find their answers through experimentation. Erikson regarded this process of searching for answers and experimenting to form own values and an own identity as healthy. The unhealthy alternatives are either forming a negative identity with a low self-esteem, an uncertainty about values and no clear goals, or attaining an identity without questioning. They might adopt their parents' value system (Louw & Edwards, 1998:488) or, worse, the value system of their peers and the neighbourhood gang. This could be the result of parents who do not establish a good and caring relationship with their children, or who do not mirror the values which they expect from their adolescent child.

### ***Moral development***

Moral development is concerned with the development of values relevant to how we treat other people and how we get treated. The behaviour of children and young people are regulated by their ability to grasp and manage moral issues in their social world. In the first eight years of life, children develop a network of social relationships with people – their family, other adults and children. They develop different relationships based on their expectations and the constraints of different settings and different people.

During adolescence, the improved cognitive reasoning skills also enable more complex reasoning about moral issues, and the adolescent is capable of altruistic and empathetic feelings towards other people. This can be described as pro-social behaviour and these skills lead to higher levels of moral development. Moral development was described by Kohlberg as following a specific order or a fixed developmental sequence, which implies that moral development would show clear parallels irrespective of social, religious and cultural factors. He reasoned that it develops in phases which coordinate roughly with developmental stages and ages (Louw & Edwards, 1998:484; Jordaan & Jordaan, 2005:494; Papalia *et al.*, 2008:452-3). Kohlberg described the stage reached during adolescence (10-13 or beyond) as the conventional stage, saying that only a minority of adults reach the post-conventional level.



Kohlberg's theory is based on his premise that moral development is based on a developing sense of justice as well as growing cognitive abilities. His stages depict the progress from externalized control to internalized societal standards to personal principled moral codes (Papalia *et al.*, 2008:464). This implies that the younger adolescent is complying to the rules due to external factors such as punishment or in order to receive some form of reward; he has not made them part of his own moral code yet. In Gestalt terms one could say that this is an introject. When internal control is being practised, he has thought about a rule, judged it and decided that it fits with his moral codes, accepted it and therefore it has become part of him and what he believes. In the case of the adolescents being studied (the unit of analysis), they might still be at the pre-conventional level, where they believe that they should be obedient in order to avoid punishment. They seem to believe that as long as they have not been caught, their behaviour is not wrong. They also believe that if they give some of the money that they had stolen to their mother, everything is all right.

Kohlberg's theory of moral development is criticized due to the fact that he used mainly boys for his studies, as well as his failure to credit the roles of emotion, socialization and parental guidance and the applicability of his system to people in non-Western cultures (Papalia *et al.*, 2008:464). Gilligan's research provided insight into the fact that women tend to base their morality on care and compassion whereas males base theirs on justice and fairness (Jordaan & Jordaan, 2005:494). In a South African study at the University of Witwatersrand, Kohlberg's moral dilemmas were presented to the students and it was found that these students had reached level 5 sooner than their American counterparts. In addition, black students who had a lower socio-economic status than white students nevertheless had reached higher levels of moral reasoning (Todin, Straker & Mendolsohn in Louw, 1998:486). This is ascribed to the fact that moral and ethical issues might have been discussed in black households more often due to the social-political issues in South Africa. It was also found that a greater percentage of the respondents switched back to phase 2 (the conventional level) when they were confronted with issues which they regard as threatening, and this was seen as a response in self-defence (Louw & Edwards, 1998: 486). In the complex South African context, it could be found that black adolescents function at a higher level of moral development at times, but at a lower level when they are confronted with typical issues in many black communities, where the threat of violence can lead to a response in self-defence. The last statement might be explained if the neuro-physiological response of the brain under

situations of stress is taken into account. When under stress, the hormones secreted give rise to a stress response of fight or flight, cutting out the higher brain functions so that functioning is at a lower and more primitive level where abstract thinking is not available (Hannaford, 2005:175-177). The same effect is triggered when severe trauma was experienced, or when traumatic memories are triggered (Giarratano in Van der Merwe, 2010:8).

However, moral development is not the only determinant of moral behaviour (Mamwenda, 1992 in Louw 1998:485), as is proved by the fact that if an adolescent has many friends using drugs, his behaviour would not follow his own moral code, but might follow the example of his friends. Mamwenda found that conformity with the peer group, obedience to authority and identification with group ideology are factors that can influence an adolescent's moral behaviour. There are three factors that can aid the moral development of adolescents:

- Adolescents should be encouraged to develop self-control and to postpone the satisfaction of needs – or to set long-term goals. Individuals who are successful in this area develop a greater social responsibility, are academically more successful and more productive (Funder & Block in Louw, 1998:486). This is not evident in the sample unit's behaviour. They generally live from day to day with little planning for the future. One of the areas of concern is the fact that these adolescents often become fathers while still detained at the centre, sometimes even of a second child.
- As adolescents copy the behaviour of their parents and adult role models, it is important that those adults should set a good example. This is sadly lacking in many of the adolescents' upbringing, as many of their older brothers, fathers or uncles are involved in illegal practices such as selling dagga, are gang members or imprisoned or demonstrate abusive relationships at home.
- Adolescents should be given the opportunity to discuss and reflect on moral dilemmas. Studies have found that this does promote higher levels of moral development but, once again, if this is not demonstrated at home, it would not have the same effect as it would remain an introject.

The models of Piaget, Erikson and Kohlberg all have the notion of developing in stages. A stages approach is not favourable in terms of the Gestalt view of development, as it places too

much emphasis on the development of the individual as a result of a pre-determined biological process. It does not take the field into account and does not recognise individual and cultural differences. The Gestalt view on development is described in terms of a cyclical process. However, as with many other theories in the past, it would be detrimental to automatically discard the previously mentioned models of development. Their virtue for the occupational therapist is that they do present guidelines as to the expected level of development for a specific phase. Without these general guidelines, it would be very difficult to assess an adolescent and plan a form of intervention. The researcher is of the opinion that such guidelines are beneficial if used with caution and as guidelines for a phase of development and not for a specific age. The adolescent's field and disadvantages should also be taken into consideration.

#### **2.4.2 A Gestalt perspective on development: A developing field**

Yontef (2005:56). proposed that human development is a function of biological maturation and environmental influence, as well as interaction between the individual and the environment This implies that development of the human aspect cannot be viewed in isolation from the field in which development is taking place. Wheeler (2002:37) as well as other Gestaltists expressed their concern about the traditional, mainly stage-type developmental theories that fail to take this interaction into account:

The environment that is integrated in the child's evolving self-process must itself evolve over time, in some organized harmony with the biological and experiential growth of the child. The parents that the four year-old needs are "different parents" from the ones that the infant needed, or that the 20 year old will need later. Parents themselves have to develop.

McConville (1995, 2002) studied the development of children and adolescents. He was of the opinion that the environmental field, called the "life-space" by Lewin, is in motion and in a process of becoming. When the situation changes, the organism has to adapt with changed behaviour. Big changes demand support from the environment (Woldt & Toman, 2005:57). This supports the Gestalt view that organism and environment function as a whole and, as the field theory describes, the elements of the field influence each other and are constantly in flux. The implication for this study is that it would be unrealistic to compare the development of these adolescents with, for instance, a Hispanic or an English group of adolescents at risk. It would be

unwise to apply the results of a study done on them, expecting the study to be applicable in our context. It is also clear that the programme developed especially for these adolescents is not as efficient as it could have been if their fields were also taken into account.

Recent research in the neuro-sciences, reveal how difficult it is to separate the different aspects of development, as they develop interdependently. The holistic view held by Perls is substantiated by research which has proven that body, thought and emotion are intimately bound together through intricate networks, and function as a whole unit to enrich our knowing (Hannaford, 2005:56). Research in the neurosciences, as executed by Damasio, helps to explain how and why rich emotional development is essential for understanding relationships, rational thought, imagination, creativity and even the health of the body (Hannaford 2005:57). According to Hannaford (2005:62), “insecurity and fear can bring learning to a screeching halt by shutting down higher brain connections”. The emotional environment is therefore critical for the development of the child’s ability to learn and grow. Hannaford (2005:62) further states that:

“Developmental experts agree that the only factor shown to optimize children’s intellectual potential is a secure, trusting relationship with their parents and/or caregivers. Time spent cuddling, playing, being fully present and consciously communicating with children establishes a bond with them”.

Similar findings are reported by Waldegrave and Waldegrave (2009:23). Izard (1991) and Thompson (1998) in Waldegrave and Waldegrave, (2009:24) assert: “Where the caregiver fails to be involved in teaching the moderation and regulation of emotions in a reliable and timely fashion, the child misses the development of a deeply ingrained pathway to self-discipline”. Cozolino, in Waldegrave and Walegrave, (2009:13) further emphasize attachment by saying “If attachments are jeopardized in early childhood, or if the child is not helped to reduce stress through a comforting caregiver, they can become vulnerable to various psychopathologies which can impact on their lives during childhood and into adulthood”.

### **2.4.3 The developmental perspective in occupational therapy**

As described earlier in this chapter, the occupational therapist is interested in the functioning of a client in his environment in order to promote the “goodness of fit” between the individual, his

occupation and the environment. Therefore, the perspective of occupational therapists is broader and more unique than a perspective that is merely concerned with basic development (Hinojosa & Kramer, 1999:5). Their perspective centres on how the child [adolescent] performs meaningful occupations within the context of the developmental foundation and the child's [adolescent's] ability to translate development into action. These abilities consist of many different skills, which are all considered when assessing the child's developmental level. As the occupational therapist is concerned with the whole child, these skills include motor and physical, neurological, sensory, social and psychological functioning.

## **2.5 CONCLUSION**

The conceptual framework covered the paradigms of Gestalt theory as well as that of occupational therapy. It was proved that they are congruent with each other as both disciplines view the relationship and the field or environment of the client as important. It is therefore clear that the qualitative research method chosen for this study would complement both the fields of Gestalt play therapy and occupational therapy and would not subscribe to conflicting interests.

Whereas Gestalt views development as a “developing field”, occupational therapists are concerned with the functional application of development within the adolescent's occupation in this “developing field”. However, it should be mentioned that occupational therapists use the stages model as a parameter or guide for assessing whether children and adolescents are within a “normal” range in their phase of development. As development follows a specific sequence, an occupational therapist aims at stimulating development with her choice of activities and techniques when there is a lag in development. In terms of emotional responses, both the cycle of experience as well as the layers of the personality can be used to assess where the problem areas are and how they can be addressed.

The conceptual framework provided the researcher with the basic knowledge concerning the theoretical background of the two disciplines of Gestalt and occupational therapy, as well as the phase of adolescence. As dialogue and field theory form such an integral part of the research study, they have been discussed in detail in order to provide the basis for the empirical phase of the study. The researcher is of the opinion that she prepared the field for the execution of the qualitative case study. The purpose was to research body mapping as an exploratory tool to enhance dialogue of life experiences with adolescent boys in a Special Youth Centre. In the

following chapter the empirical phase of the study will be presented.

## **CHAPTER 3: EMPIRICAL DATA**

### **3.1 INTRODUCTION**

In this chapter the empirical phase of the research study is presented. Firstly, a short description is given of how the planned research described in Chapter 1 was implemented. Thereafter, a brief overview of the execution of the empirical research and procedures for data analysis follows, and the third section presents the results of the empirical study.

### **3.2 IMPLEMENTATION OF THE RESEARCH GOAL AND OBJECTIVES**

#### **3.2.1 Goals and objectives**

- The **main goal** of this study was to investigate the use of body mapping as a tool in enhancing dialogue of life experiences of adolescent boys in a Special Youth Centre, with the view of opening up and expressing emotional content connected to their scars, lesions and tattoos. It was reasoned that if it was found that body maps enhance emotion-focused discussions; this could open avenues for therapeutic use. The long term aim is to promote integration of life experiences, leading to adaptive and appropriate behaviour.
- The **sub-goal** of this study was to explore the utilisation of body mapping as a research tool to generate data for this specific target group.

The **objectives** relevant to this chapter were: execution of the empirical study, analysing the data and reporting on the findings of the study.

#### **3.2.2 Research approach and design**

A qualitative research approach, aimed at researching and describing social behaviour within its context, was followed. To fulfil this aim, the full picture has to be researched and it is often referred to as a “thick description” (Punch, 2005:186). Nieuwenhuis (2007:99) explains that qualitative data analysis “is aimed at examining meaningful and symbolic content of qualitative data”. This is achieved through inductive analysis of the data. The main aim is to search for frequent, dominant or significant themes inherent in raw data. This would not be achieved when the more structured method of quantitative research methodology is followed (Nieuwenhuis, 2007:99).

The case study was chosen as the research design. Yin in Nieuwenhuis (2007:75) states that a characteristic of the case study is:

To open up the possibility of giving a voice to the powerless and voiceless, like children or marginalised groups. This is essential for researchers to come to a deeper understanding of the dynamics of the situation, and this aspect is a salient feature of many case studies.

This definition aptly describes what the researcher intended, namely giving a voice to the repressed, retroflected or projected emotions while listening to the life stories of a group of marginalized adolescents.

Punch (2005:195) maintains that a complete account of the way in which the research has been planned, structured and executed is demanded and should be provided and explained by the researcher.

### **3.3 PROCEDURE AND METHOD OF RESEARCH**

#### **3.3.1 Unit of analysis and sample size**

Five **sentenced adolescent boys (14-18 years old)** in a Special Youth Centre in the Western Cape were chosen from the **population** consisting of all adolescents in the Special Youth Centre. The researcher planned to include more participants but found that themes started to repeat and data saturation was reached with the five participants. Rich data was gathered and as this is research of limited scope no more participants were selected. The criteria were that these boys had to have scars and tattoos, had to be willing to participate in the study and had to have the ability to communicate in Afrikaans or English.

#### **3.3.2 Ethical aspects**

The participants to the study were fully informed according to the specifications of the Huguenot College consent form, and the research procedure was explained to them. They were informed that they could decide not to continue at any point and that this would not be



held against them. An English and Afrikaans copy of the consent form for the participants is enclosed as Appendix 1. All the stipulations as set out in the ethical forms were discussed. Both English and Afrikaans versions were available and they were translated into a learner friendly language in order for them to understand the content. They were all willing to participate in the study without any secondary gain.

As the use of body mapping could bring trauma-related material into awareness, the researcher obtained permission from the psychologist to refer participants in the event of their needing extra emotional support or intervention during or after the sessions. The head psychologist for the circuit was also informed about the study as he attends to learners in the absence of the team psychologist. The researcher kept contact with the participants after completion of the empirical study, and a participant whose emotional response caused concern was referred to the psychologist. The researcher also asked her supervisor for advice. A referral was made to the social worker for the investigation of the participant's home circumstances. His name was also included on a list for future inclusion in a Gestalt play therapy programme after conclusion of the research.

### **3.3.3 Legal aspects**

Permission for execution of the study was obtained from the Western Cape Education Department, the principal of the Centre, the head of the support team (psychologist) as well as from the social worker at the Centre. Advice and information regarding the legal aspects of the referral/sentence to the Centre was obtained from the social worker. Copies of these consent forms are enclosed as Appendix 1.

### **3.3.4 Method of data collection**

Body mapping combined with unstructured interviews of individual participants formed the main method of data collection. Kvale in Greeff (2005:287) defines qualitative interviews as “attempts to understand the world from the participant's point of view, to unfold the meaning of people's experiences, [and] to uncover their lived world prior to scientific explanations”.

**Triangulation** is achieved by using multi-method research. This leads to **crystallisation** (Chapter 4), which refers to the practice of comparing different sets of data in order to validate the findings and using “voices that differ” from the researcher's opinion (Maree & Van der Westhuizen, 2007:40). By employing different methods of data collection in a single project, it is possible to compensate for the limitations of each to some extent (Mouton,

1996:157). The technique of body mapping combined with unstructured interviews constituted the main body of information and provided the emotional content connected to the adolescents' life experiences. This was supplemented by information obtained from the learner profiles, the probation officer's reports as well as the occupational therapy intake forms. Information obtained from these additional sources provided the factual information regarding the adolescents' life experiences and is presented in the form of a table in order to prevent recognition of the specific learners when combining their personal details with the dialogue. After completion of the sessions, photos were taken of the maps in order to have physical evidence of the information obtained through the body maps.

### **3.3.5 The quality of qualitative research**

According to Schurink, Fouché and De Vos (2011:419), qualitative researchers generally regard the constructs of validity, as used by quantitative researchers, as inappropriate for establishing the "truth value" of qualitative research. Lincoln and Guba in Schurink, Fouché and De Vos (2011:419) suggest using four constructs that reflect the quality of the qualitative paradigm, namely credibility, transferability, dependability and confirmability.

*Credibility / authenticity* is considered to be the most important. Lincoln and Guba in Schurink, Fouché and De Vos (2011:419) assert that "credibility is the alternative to internal validity and the goal is to demonstrate that the inquiry was conducted in such a manner as to ensure that the subject has been accurately identified and described". The researcher should therefore "accurately describe the parameters, thereby placing boundaries around the study". One of the methods to ensure credibility is the use of the triangulation of different methods (Lincoln and Guba in Schurink, Fouché and De Vos, 2011:420).

*Dependability.* The researcher should ensure that the research process is logical, well documented and audited (Schurink, Fouché and De Vos, 2011:420). The qualitative assumption is that 'the world is always being constructed' [which is directly in line with Gestalt field theory], which implies that changes can take place during a study. In this study, the researcher made adjustments in terms of changing the form of interview from semi-structured to unstructured. Another change was introduced on the grounds of the information received during the body mapping and unstructured interviews, when it became evident that

the literature control had to veer more towards adolescents' gang affiliation and gang-related research than towards retroflection and practices of self-harm, as had been anticipated initially.

***Transferability.*** According to Schurink, Fouché and De Vos (2011:420) this refers to being able to transfer the findings to another case or situation. Lincoln and Guba suggested it as the alternative to external validity or generalisability. However, this could be problematic in qualitative research and therefore it is important that the researcher would state the theoretical parameters very clearly. Other researchers can then determine whether the cases described can be generalised for new research policy and transferred to other settings. In this regard, the use of multi methods of data-gathering, or triangulation, is advocated. Creswell (2009:191) is of opinion that if themes are developed on the converging several sources of data or perspectives from participants, then it improves the validity of the study. This is endorsed by Schurink, Fouché and De Vos (2011:420) as they are of opinion that triangulation can “greatly strengthen the study’s usefulness for other settings”.

Qualitative researchers have differences of opinion regarding Lincoln and Guba’s constructs (Chapter 1.7.3) and the use of an auditing trail is advocated as the alternative to these constructs (Schurink, Fouché & De Vos, (2011:421-22).

***Ensuring anonymity.*** Schuman and Presser in Mouton (1996:157) postulate that respondents tend to be reluctant to provide interviewers with information on sensitive matters. This phenomenon is also found in studies of sexual behaviour and so-called deviant behaviour. One possible strategy to reduce the effect of such responses would be to emphasize the anonymity of responses and observations where possible (Mouton, 1996:157). Due to the ethical aspects regarding anonymity, the photos of the total body map could not be placed due to the risk of participants being recognized. Partial sections of maps are included as evidence and are not combined with the actual respondent’s number in order to prevent recognition. (They are numbered as in 3.7). Another factor which necessitated the need to ensure anonymity was the fact that gang-related activities are prohibited at the centre. P2 openly discussed this part of his life which is usually kept secret and P1 alluded to it. Participants voiced emotional content regarding these activities to a lesser or greater degree.

***Establishing rapport.*** According to Mouton (1996:157), this could be time consuming, but a strong interpersonal relationship neutralizes distrust. As four of the participants had not been

at the centre long enough to establish such a relationship with the researcher, it was all the more of essence to apply the principles of dialogue in order to provide a safe place for each participant to express painful memories and emotions.

**Training.** Adequate training is a precondition of any research. As the researcher worked independently, preparation in the form of discussions with her supervisor as well as studying material concerning the research was done prior to the execution of the empirical study (Mouton, 1996:159).

**Characteristics of fieldworkers [researcher].** Mouton (1996:160) postulates that the perceived distance between the researcher and the participants plays a role in the “researcher’s effect”. He advocates that characteristics such as gender, race, age and style of dress have some of the most important effects in this area. According to these factors, the researcher is at a disadvantage concerning all the characteristics named. A climate of inclusion, presence, commitment towards dialogue and not wanting to exploit, as well as the characteristics of the technique of body mapping, were sufficient to stimulate dialogue.

### **3.4 EXECUTION OF DATA COLLECTION**

**Multiple methods** of data collection were applied, and data were collected from the following sources:

#### **3.4.1 Execution of body mapping with unstructured interviews**

**Unstructured interviews:** This method was chosen in order to follow the principles of dialogue. The researcher “stayed with” the participant, merely responding to his statements, and asked the minimum questions that could lead to resistance. Both voice and video recordings were made to capture the expression of feelings and the participants’ history of life experiences. The recordings and maps formed the main body of information. The study included three sessions for four of the respondents and two sessions for the fifth respondent, as it was felt that he did not have anything additional to add to the two sessions. A choice of materials was presented for mapping: black and coloured Koki pens, paintbrushes and paint, as well as pastels. Two wall charts depicting faces with emotional expressions were used to evaluate whether the respondents knew the basic emotions of being happy, sad, angry and

scared, as well as secondary emotions if needed. This provided a concrete form to the abstract concept of emotions as many of the adolescents at the centre present with delays in cognitive development, and therefore find abstract concepts difficult to master. They tend to describe their feelings as either “nice” (“lekker”) or “bad” (“sleg”).

***Preparation for body mapping:*** Two large sheets of newsprint were taped to the wall with a sheet of carbon paper sandwiched in-between, in order to save time by receiving a copy with the original map. The participant was asked to stand against the wall with his back against the paper, and permission was obtained to draw around his body. (The outline of the body was made in this way as it seemed less invasive to do it in a vertical plane.) The maps were removed from the wall and before the actual mapping was executed, the participant was asked to look at two emotion charts and name the emotions that he could recognize. This prepared the researcher for the emotional knowledge and vocabulary that the respondent was capable of and also prepared the participant by “tuning in” to his emotions.

The body mapping sessions consisted of:

Session 1: Mapping of tattoos

Session 2: Mapping of lesions and scars

Session 3: A recapping session with an overview and discussion of the meaning that the participants found in the experience of the previous two body mapping sessions.

### ***Execution of body mapping and unstructured interviews***

**Session one: Mapping tattoos:** The participant was introduced to the art materials and invited to outline the body, correcting wobbly lines and adding detail like hair and facial features. When this was completed, he was invited to draw the tattoos of his choice onto the map. Invariably, they all chose the black Koki pen and were not interested in using colours to depict emotions, feelings or other information. One or two of the participants moved to the mirror and removed their shirt or adjusted their clothing to see their tattoos and where they were situated. Some became confused with the mirror image and drew tattoos situated on the left arm on the right arm and vice versa. One of the participants touched each tattoo on his body as if he had to localize its position before he could find the location for it on the map.

Only one participant chose to colour his body map with brown paint after he completed his drawings of tattoos and lesions.

After completing the drawings of the tattoos, the participants were invited to talk about the tattoo of their choice, to name the emotions they had experienced when they had made the tattoo, whether they could link it to a preceding experience, and how they feel about it now. As each participant reacted differently, the questions asked were not standard as in semi-structured and structured interviews. A sense of the type of reaction to certain questions was acquired with each participant and questions were not pursued if the researcher thought that they would lead to resistance and jeopardize dialogue. The researcher is of the opinion that asking specific questions would have resulted in not getting as much information as they were willing to give of their own accord. However, participant P2 was so open with his responses regarding his affiliation to the gangs that the researcher felt freer to ask more questions than with participant 1, who found it difficult to express his emotions verbally. The researcher gave feedback in the form of “mms” most of the time in order to prevent giving the participant the idea that his behaviour was being judged.

**Session two** (a few days after session 1): **Mapping of lesions:** The second outline of the body was placed on the table and the same procedure followed. The participant was asked to draw one or two visible scars or lesions of his choice. (These were explained to the participant as being scars of normal hurts and accidents as well as fractures, surgical scars, scars from burns, knife wounds, bullet wounds etc.). After completing the drawing, a discussion of the emotions connected to these scars as well as an explanation on how they were acquired followed. They were asked to explain how they felt at the time of the incident which caused the scar, as well as how they feel about it now. They preferred drawing all their scars and also talked about most of them.

**Session three** (a few days after session 2): This session served as a summary of the previous two sessions. Participants were asked whether anything “cropped up” after the sessions, whether they remembered something they had previously forgotten to talk about, and whether anything was bothering them (as an explanation in their terms for unfinished business). The maps drawn during the previous two sessions were opened on the table and the participant was asked to first choose one map, and to tell which emotions regarding any of the drawings made were still experienced; after this the second map was treated in the same way. It came

across as though they found it difficult to talk without having had the experience of drawing something concrete to talk about. Directly after the map was made, they were “in touch” with the memory of the occasion, as well as with the emotions experienced at the time. Generally speaking, this session did not generate much more information, but the researcher also felt that it was a way of getting closure and making sure that there were no issues with unfinished business. The researcher therefore tried to finalize each session in such a way that the participant did not leave with unfinished business (2.2.2.xv) and that closure had been reached. The participants were asked whether they felt that they had finished saying all that they wanted to say and whether they felt ready to end the session, whether they needed an opportunity to express emotions physically and, in the case of P4, whether he needed to speak to someone else. Although he declined, the researcher felt that it was necessary to inform the psychologist about his distress, as he previously spoke about an attempt to commit suicide. The researcher also discussed the issue with her supervisor and asked her for advice.

### **3.4.2 Capturing the data**

Both video and voice recordings were made as the sound quality of the video recorder was poor, and by doing both the researcher had a back-up if one of the systems should fail. Photos were taken of the completed body maps, but due to confidentiality and the probability of recognising participants, these would only be included in such a way that they would not compromise a participant’s anonymity.

The recordings made during the sessions were transferred to a personal computer and transcribed soon after. Copies of the transcriptions as well as the recordings were made and marked with the number of the participant concerned. These copies were locked for safekeeping and will be kept for a period of five years. Participants’ names were not written on the body maps, the photos or the transcribed notes. Participants chose pseudonyms, but the researcher chose the numbers one to five, to make the written work uniform.

## **3.5 DATA TRANSCRIPTION**

The data gathered by means of the body mapping and recording of the unstructured interview were transcribed, as explained by Whittaker (2009:90), in double spacing, numbering each line and leaving a wide margin for comments and codes. Studying the body maps provided

information regarding the type of tattoo, whilst listening to the recording gave an indication of the emotional component. The sounds and gestures made by the participants were also recorded.

Whilst the researcher did not have specific knowledge regarding the Number Gang tattoos, and could not make decisions regarding the coding without this knowledge, the advice of a converted former gangster was sought. The first person contacted said that he would gladly help, but that he thought the risk was too big as there could be consequences for him if it was discovered that he had shared this knowledge with an “outsider”. The second person was willing, even after the researcher specified that he should only consider doing this if he felt that it was safe for him to do so. The second reason for the researcher’s quest for the interpretation of the Number tattoos was the fact that two of the participants felt safe enough to own their allegiance to the Number Gangs, while another participant denied allegiance, saying that he had seen other boys with those tattoos and had also wanted them. Within the Gestalt framework, interpretations of clients’ projections are not made by the therapist. Their perception is what is important, even if it is not necessarily the way something is perceived by others. The participant who did not admit ownership of his Number tattoos had more resistance and felt that he still needed that protection. In Gestalt, resistance is not seen as something negative, but as a sign that a client has a sufficient sense of self to protect him self and is respected as such (Blom, 2006:61).

### **3.6 PROCESS OF QUALITATIVE DATA ANALYSIS**

Data analysis is a core task of research. Whittaker (2009:88) states the following in this regard: “Data analysis is the process of making sense of the information you have collected and searching for what lies below the surface content.” Whittaker (2009:89) further mentions that “data analysis is about identifying patterns and understanding meanings”. Themes and categories had to be found in the rich information gained from the participants in this study.

The process of analysing the qualitative data can present problems in terms of validity if the process followed is not recorded and described scrupulously. Strydom (2011:339) warns that validity can be a major problem as researchers are forced to rely almost solely on their own



perceptions. Subjectivity and prejudices can therefore influence the outcome of the study (3.3.4). The “truth” value of the study has to be established by providing answers to questions regarding the credibility, transferability, dependability and confirmability of the study.

The steps followed during the process of analysis are described by Nieuwenhuis (2007:99) as being a non-linear or iterative process. The collection, processing, analysis and reporting of data are intertwined. This process is also described as a “spiral of extracting themes”, as with Creswell’s data analysis spiral (Creswell, 1998:142; Schurink, Fouché & De Vos, 2011:403), to enhance credibility, validity and trustworthiness. Henning (2004:32) refers to this process as analysing data descriptively and interpretively. Punch (2005:195) stresses the importance of providing a complete account of the way in which the research was planned, structured and executed. Babbie (2010:394) emphasises the continuing interplay between literature or theory content and data collection. Babbie (2010:393) therefore proposes that:

Qualitative data analysis is the non-numerical assessment of observations made through participant observation, content analysis, in-depth interviews, and other qualitative research techniques. Although qualitative analysis is as much an art as a science, it has its own logic and techniques....

A process of thematic data analysis was followed, described by Whittaker (2009:92) as “a method for identifying, analysing and reporting patterns (themes) within data”. Whittaker (2009:91) proposes the use of this six-stage model of thematic analysis by Braun and Clarke, as it is a flexible approach compatible with different epistemological approaches. The following steps or phases as described by Whittaker (2009:92-97) were followed and executed.

### **3.6.1 Becoming familiar with the data**

Reading all the transcriptions in one session gave an overall picture of the whole set of data. Reading was done actively.

### **3.6.2 Creating initial codes** (the most basic building block of raw data):

Codes were marked with colour-coded labels. Decisions on possible codes were made while reading and a list of codes were made later.

### **3.6.3 Searching for themes**

Codes were grouped into potential themes and the relation between the themes were found: “Themes are broader than codes and represent a higher level of abstraction and captures something important about data in relation to the research question” (Braun & Clark in Whittaker, 2009:95). This has to be done consistently and transparently. Codes were written on sticker notes and pasted on a large sheet of newsprint next to a schematic presentation of Bronfenbrenner’s bioecological theory (Bronfenbrenner & Ceci. 1994:568-586), the Circle of Courage model (Brendtro, Brokenleg & Van Bockern, 2011:1), and Max-Neef’s fundamental needs theory (Max-Neef, 1991) while searching for the themes. The researcher chose these models based on her knowledge of the fact that needs drive behaviour (Gestalt theory 2.1), and if needs are not met, the behaviour of the adolescent will be affected in his quest to find balance or homeostasis (Oaklander, 2006:12).

### **3.6.4 Reviewing themes**

a) This involves “analysing data within a theme, or going back and forth between different stages in a recursive process”, reading all the transcripts coded within the theme and “evaluating whether there is sufficient data and whether it is sufficiently similar” (Whittaker, 2009:96). The data within themes should relate to the latter and should differ significantly from other themes.

b) All the transcripts were also read to check whether the themes reflect the total data set, asking whether they generally reflect what participants had said.

### **3.6.5 Defining and naming themes**

Each theme has to be named according to the core meaning of that theme while reviewing the data from which it was extracted. The key features have to be identified. Each theme should be analysed and the researcher should decide how it fits in with the overall structure of the data. The Miles and Huberman Framework for qualitative data analysis (Punch, 2005:198) advocates displaying the data visually and looking at it continually in order to conceptualize the themes: “You know what you display.” This was helpful to organize the jumble of data, ideas, thoughts and concepts in order to start organizing the data and codes into themes. The codes which were assigned to specific bits of information and pasted onto large sheets of newsprint were now organized into groups while the researcher looked for themes. At the same time a mental picture of the tattoos and lesions were kept in mind, and the researcher

also kept going back to the maps, looking at them again in order to add emphasis to some of the themes. The researcher found this process the most difficult and time consuming.

The basic premise from which the study was undertaken is Gestalt, with its information and theory, especially the theory concerning modifications to contact. The other premise is that of occupational therapy, being even wider and encompassing the normal occupations of the adolescent. Bronfenbrenner's bioecological theory was found to be the one which provides a better understanding of the field of the child/adolescent as well as the different systems which have an influence on a developing adolescent. Furthermore, there is the model which is used at the centre, as prescribed by WCED, namely the Circle of Courage model. Although only one of the participants spoke and cried about his unmet needs, needs are the driving force in human behaviour in the quest to maintain homeostasis and self-regulate (2.2.2.vi). Needs give rise to contact with the environment in order to satisfy them and, if unmet, lead to modifications in contact and so-called "acting-out behaviour". It was therefore important to identify themes which reflect the needs as well as the tendency to acting-out behaviour used by the "at risk" adolescent (1.2, par. 7).

### **3.6.6 Producing the report**

This stage was only reached when the themes had been completed into a final set within a thematic map. As the report should be "coherent, convincing and interesting" (Whittaker, 2009:97), this stage seemed to take more time than any of the other steps and also proved to be the most taxing. The reason for this was the amount of abstraction and comparison that needed to be done (Punch, 2005:202-204).

Miles and Huberman (in Punch, 2005:198) place further emphasis on displaying data throughout the process, incorporating different methods such as graphs, charts, networks and different types of diagrams. The researcher therefore incorporated flowcharts into Chapter 3 as a visual presentation of the themes and subthemes found within the rich data collected by means of the body mapping and unstructured interviews.

One of the steps that Nieuwenhuis (2007:103) proposes in order to complete the process successfully is that the sample should be described. This is added to Whittaker's process (2009:88-97) to give a better understanding of the cohort from which the sample was chosen, and is presented in the following paragraph. In summary, it can be stated that although the

six-step process of thematic analysis of Braun and Clark (in Whittaker, 2009:88-97) was followed, attention was also given to the Miles and Huberman model and recommendations by Punch (2005:195-204) and Nieuwenhuis (2007:99-111) to finalize this step in a professional and scientific way.

### 3.6.7 Description of participants

A description of the personal particulars of the participants in random order in tabular form gives an indication of the profile of the five learners included in the study.

**Table 3.1 Basic and alternative care, as well as time spent in prison**

<b>PRISON</b>	<b>PRIMARY CAREGIVERS</b>	<b>ALTERNATIVE CARE</b>
3 months	Mother, no father	None
1 year	Mother and stepfather	Lived with grandparents for a while
6 weeks	Parents both died while in middle-childhood	Grandparents, kids' shelter, lived on the street, and informally with two families
None	Both parents (father abuses alcohol, mother sometimes)	Placed in a children's home for two years due to being in need of care
None	Mother (poor relationship)	Shuttled between relatives and street life

Age: 15, 16, 16, 17, 18

Academic level: Grade: 2, 3, 5, 8, 8

Race: three coloured, two black (white learners did not have a combination of lesions and tattoos)

### 3.6.8 Information obtained from additional sources

After the data concerning the body mapping sessions were transcribed and analysed, the researcher also read other documents to verify and expand on this information. The following sources were perused: the learner profiles, the probation officer's report as well as the

occupational therapy intake forms. These sources provided the factual information regarding the adolescents' life experiences, which was much less than the information obtained from the participants themselves. As the main aim of the study was to investigate whether the tool of body mapping could be an aid in opening up and stimulating dialogue about emotions and memories related to both the self-inflicted scars (or tattoos) and those acquired, the information from other sources will not be given before Chapter 4, in an attempt to answer the research question adequately.

### **3.7 INTRODUCTION TO THE EMPIRICAL REPORT**

The aim of this study was to investigate to what extent dialogue of the emotions of life experiences could be stimulated through the use of the technique of body mapping. Although it is not possible to quantify the amount and quality of dialogue achieved, the main heading is “dialogue”, to indicate that everything that followed was achieved through the dialogical, unstructured interviews during the body mapping sessions. The findings of the empirical study are presented under the headings of the themes found in the empirical data. Flowcharts will provide a visual overview of themes and subthemes.

Note: The participants are referred to as P1, P2, P3, P4 and P5. As four of the five participants gave their responses in Afrikaans, and one in both Afrikaans and English, the translated responses are first given in English, followed by their own words in Afrikaans. To enable easy distinction between researcher's and participants' voices, the participants' dialogue is printed in italics. A summary of the participants' comments over the three sessions is given, namely two sessions with body mapping of tattoos and lesions as well as a third, recapping session. The researcher decided to eliminate all references made to her, as these appeared a few times in every sentence, for instance: *“It was a long time ago[Miss.] – if I could see him now, then I'll feel all right [Miss].”* (*“Dit was lankal [Juffrou.] – as ek hom nou sien, dan sal ek orraait voel [Juffrou].”*)

### **3.7.1 DIALOGUE OF EMOTIONAL RESPONSES WITH REGARD TO PARTICIPANTS' LIFE EXPERIENCES**

The following themes were extracted, as also set out in Figures 3.1, 3.2, 3.3:

Theme 1: Emotional responses with regard to RELATIONSHIPS

Theme 2: Emotional responses and reactions to FAMILIAL TRAUMA

Theme 3: Emotional responses and reactions to OTHER TRAUMA

Theme 4: Pre- and post-emotional responses with regard to TATTOOS

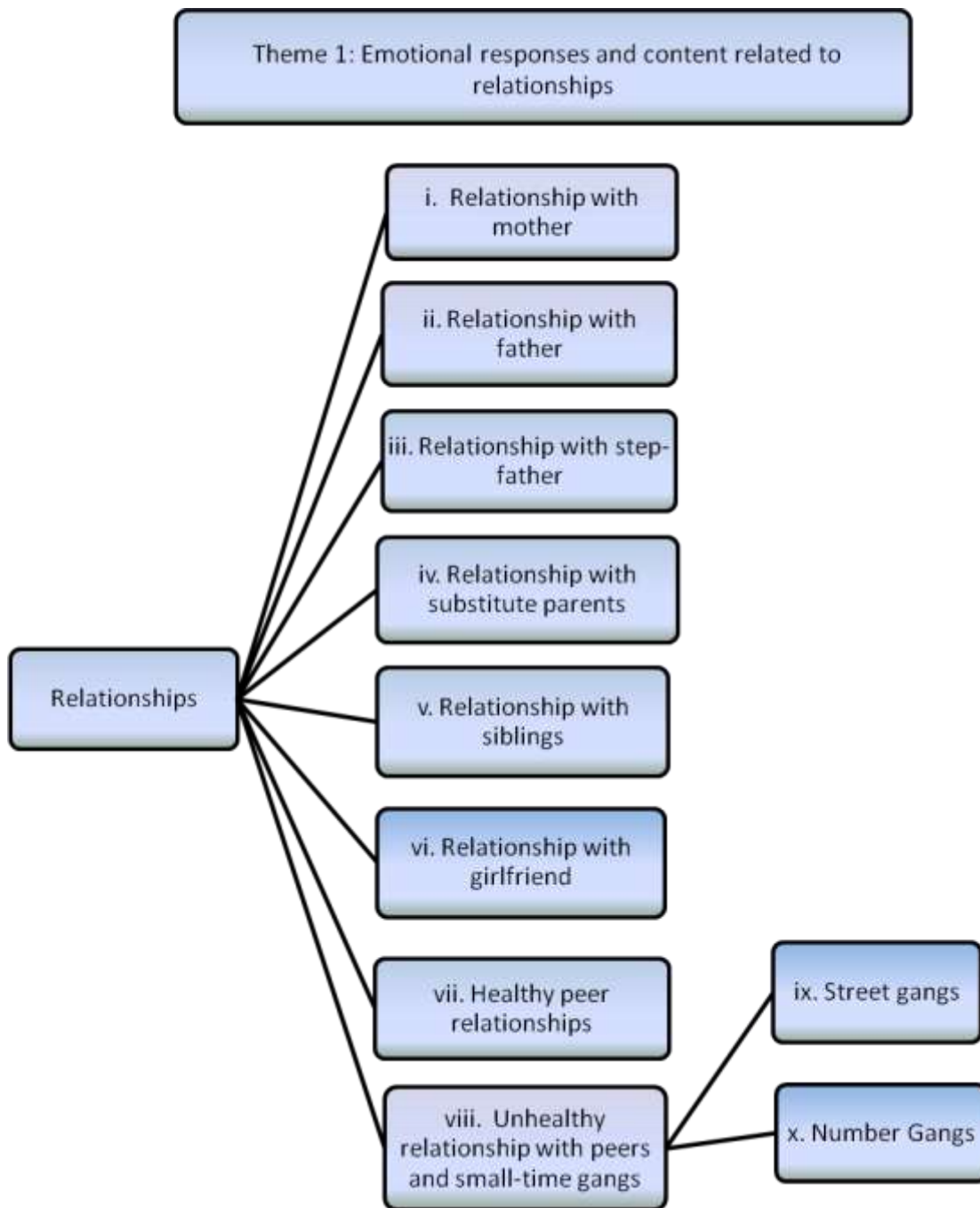


Figure 3.1 Emotional responses and content related to relationships

Following the discussion of each theme, a brief summary is included, highlighting the main tendencies in the theme, not with the aim of generalizing, but to lay the foundation for the “theory after” connection that is made in Chapter 4.

### 3.7.2 Theme 1: Emotional content with regard to relationships

Note: The relationship theme was quite extensive and gave a better overview of each participant’s relational field when the subthemes were grouped together. The summary is given per theme as the following themes are presented.

#### Participant 1

##### *i. Relationship with mother:*

P1 found it difficult to talk and name or express emotions. Comments included:

- He **missed his mother** while he was in prison and in another centre.
- He **feels misunderstood**, that his “people” (mother and older brother) do not understand him as they thought he was guilty of a crime which he had not committed.
- Future plans: He said that he wanted to work for his mother – thus feelings of wanting to **provide** for her.

##### *ii. Relationship with father:*

He does not know his biological father.

##### *iii. Relationship with stepfather:*

He was physically abused by the man who had been his stepfather, but who is no longer with his mother. He **hates** the man and thinks of **revenge**.

##### *iv. Relationship with siblings:*

He feels **unhappy** about the fact that his older brother disciplines him harshly by hitting him with a belt.

##### *v. Unhealthy relationship with peers:*



P1 did not mention peers of his age, but he had engaged in housebreaking with young men older than himself.

## Participant 2

### *i. Relationship with mother:*

P2's mother tried various ways to prevent him from becoming entrenched in the gang culture like his father, who is a member of the 26s Gang, as "*she did not raise me to be a gangster*".

- P2 has a scar on his arm where his mother had removed his first gang tattoo by burning the skin with hot condensed milk.
- P2 explained that he had felt proud when he had made the 26s Number tattoos, as he had earned them. It seemed as if this had not been an effort to gain recognition in order to compensate for a lack of recognition in the home environment. He stated that he had been praised much at home. He himself implied that he was **ungrateful**: "*They [the parents] gave me everything. Then I abused everything that they had given me.*" ("*En vir my was alles gegee gewees. Toe het ek misbruik gemaak van alles wat my ma-hulle vir my gegee het.*") It sounds as though his mother had played a part in fostering his resentment towards his father. He mentioned that "*she always says he wasn't there for me*" (**reproach**).

### *ii. Relationship with father:*

P2's father had been imprisoned when P2 was three years old. His mother then married his stepfather, who was there for him over the past 11 years.

- His father currently lives in the same neighbourhood and has a new wife.
- His father, who is a member of the 26s Gang, is also a "merchant". Although P2 did not mention drugs, he did say that he was not motivated to do crime for drugs, as he could get those for free. He has a strong **ambivalent relationship** with his father, on the one hand feeling **angry** about his father for "*not being there for him*" and **not respecting** his father as a father and, on the other hand, trying to be what his father is.

- He **yearns** for his father's **love**. His father gave him an expensive watch, which he "threw into the fire" because: *"I'm not looking for those things. If he can't give me love, then I don't want anything."* (*"Ek soek nie daai goete nie. As hy nie vir my kan liefde gee nie, dan wil ek niks hê nie."*)
- He acknowledged that his father's membership of the 26s Gang had a profound influence on him. P2 became the youngest member of the 26s Gang (according to him) when he wanted to *"see what it was like inside the prison"*.
- He **wants his father to be proud of him**, but the irony is that his father was not proud of him when he joined the 26s. They are almost like brothers in the gang culture as they fight in the same group, but **he does not acknowledge** this role of his father.
- He acknowledges that he is angry with his father and says that his father had **never been an example** to him. He then says that he knows that his father cares for and loves him as he does not want P2 to be involved in gangsterism, but he wants his father to be *"there for him"*: *"He is never there for me; I'm not going to be told by him."* (*"Hy is nooit daar vir my nie; ek gaan my nie van hom laat sê nie."*)
- It seems as if his behaviour may be partially aimed at getting back at his father for not being there for him: *"Why, I want him to feel – I tell him (his voice changes into a snarling tone and he uses slang), 'If you had been there for me, then I wouldn't have been like this'". (reproach).* (*"Hoekom, ek wil hê hy moet voel – ek sê hom sommer: (sy stem verander en hy praat in 'n smalende, beskuldigende toon) 'As d jy da gewies het vi my, dan sal ek nie soe gewies het nie.'"*)

### **iii. Relationship with stepfather:**

He said that he **respected** his stepfather, but he did mention that his stepfather made him **angry** when he *"went on about the things that I had done"*. *"He asks me, 'Why do you do all these things? We give you everything; you don't have to carry on like this?'"* (*"Hy vra vir my: 'Hoekom doen jy al die goete? Ons gee dan vir jou alles; jy hoef mos nie so aan te gaan nie?'"*)

- After he had been shot through the thigh, his stepfather **wanted to take revenge on his behalf**: *"He wanted to go and take revenge, but I said it wouldn't do any good – I*

*must fight my own battles.” (“Hy wil ook gaan wraak vat het, maar ek sê dit gaan niks in die sak bring nie – ek moet my eie battles gaan fight.”)*

***iv. Relationship with siblings:***

P2 has an older sister, who is working. Apparently he **resents** her telling him off when he did something wrong and says that when he is drugged, he does not speak nicely (respectfully) to her. He feels **protective** towards his two younger stepbrothers and had fetched the youngest from the crèche when he had been at home. P2 said that he wants to change his ways – not for his mother or father’s sake, but for his two younger brothers.

***v. Healthy relationship with peers:***

P2 says that he does have a few girlfriends (platonic) who **encourage** him to leave the gangster life and invite him to go to church and youth groups with them.

***vi. Unhealthy relationship with members of the Number Gang:***

P2 was very involved with gangsterism, first with the Bad Boys, later the Young Americans and lastly the 26s Number Gang. He spoke of how his friends had killed the boy who had shot him (P2). He has four firm friends, but only one had visited him with his parents when he had been at a centre before. He does not blame his friends for his involvement in crime and gangsterism – he says it was a choice that he had made.

***vii. Unhealthy relationship with girlfriends:***

P2 related more than one incident where he had sustained scars as a result of his relationship with girls. He described how he had been led into a “trap” by a girl and was stabbed in the lung. He also spoke about the fact that he did not like it when his girlfriend “played with him” by hitting him in the face – that he became **angry** and **hit** her.

**Participant 3**

***i. Relationship with mother:***

- P3 had not been home when his mother had died, as he had been afraid of going home after he and his friends *“had made a mess at home, and took food”*.
- He **spoke with reverence** of the things that his mother had taught him. Speaking the truth is one of them. She had also taught him first aid with herbal remedies and he applied this after he had been stabbed in the arm: *“My mother told me, when you have wounds, then you take those flowers and pack it on the wound, and then you take a bandage and cover it with the bandage.”* (*“My ma het mos vir my gesê as jy seerplekke het, dan moet jy dié blommetjie vat en hom pak en dan vat jy die bandage en rol vir hom op.”*)
- After he had had an accident with a bicycle, she told him to throw the bicycle away, which he did (**obedient**). She had not always given him sound and moral advice, as she told him to stab a boy who had stabbed him, but he did not, as he felt that his father had not taught him to fight with knives. He did not mention that he found it strange that she could encourage him to do something that was wrong.

*ii. Relationship with father:*

His father had died. (He cannot give an indication when, but according to other information, this happened early in his middle childhood). The only comment was that his father had taught him not to fight with knives, and he sounded **proud** when he said that his father had taught him to box.

*iii. Relationship with substitute carer and grandparents:*

- P3 lived with his grandparents for a while after his parents had died, but he left due to their alcohol abuse and because he felt that **they did not pay attention to his needs**.
- P3 is **anxious** about acquiring an Identity document, but he needs his grandmother’s assistance, as his birth certificate had been destroyed in a fire. He says that his grandmother would not accompany him to the office of the Department of Home Affairs, as she “drinks too much”.
- He plans to go back to his grandfather in order for his grandfather to “take him to the bush” for his initiation. It seems as though he has more **trust** in his grandfather. He also mentioned that his grandfather had warned him to stay away from the friends with whom he had started doing crime, but he had not listened.

*iv. Relationship with siblings:*

P3 has an older brother, who is in prison for committing four murders, but whom he would like to see again. He feels protective towards his younger brother and would like to have his own home in order to **take care** of his brother.

*v. Unhealthy relationship with peers:*

His grandfather had warned him about his peers and their influence, but he did not heed this warning.

**Participant 4**

*i. Relationship with mother:*

- P4's mother is physically abused by his father when last named is intoxicated. P4 **does not criticize his mother's role in accepting the abuse** and for also drinking.
- He does not give any sign that he finds the way his mother disciplines him strange or abusive. He has a scar next to the corner of his eye where he was hit with a knife which she threw at him. He **laughs** when he says that she did it because she gets very upset when he and his brother only come home to eat when they have the "munchies" (insatiable hunger for bread) after smoking dagga.
- He takes on the role of **caring** for his mother after abusive attacks by his father: "*And my mother was lying there, covered in blood and I started cleaning the house* (voice sounds light; takes a deep breath); *I had my mother washed, doctored my mother, took my mother to the clinic, and came back.*" ("*En my ma het daar gelê onder bloed en ek het die huis begin skoonmaak* (stemtoon lig; haal diep asem); *ek het vir my ma laat was, my ma gedokter, my ma kliniek toe gevat, en teruggekom.*")
- P4 also **feels responsible** for his younger brother, but says that he sometimes just **wants to opt out** and stop looking after him, so that he is free to also drink and use drugs (which P4 does).

*ii. Relationship with father:*

- P4 **hates** his father for abusing his mother, for his addiction to alcohol and for not providing for him. He describes his father as a pig: “*And then I told him he had to stop hitting my mother, and then I told him that I hate him and he is a pig.*” (“*Toe sê ek vir hom hy moet ophou om vir my ma te slaan, en toe het ek vir hom gesê dat ek hom haat en hy is ’n vark.*”)
- He came home and found his mother with a fractured arm and wanted to burn his father with boiling water, but his mother stopped him.
- **Ambivalent feelings:** When his father and uncle fought, he gave his father a weapon to hit his uncle. He says that he does not know why he did that.
- The abusive behaviour of his father towards his mother caused him to become **abusive** too, and he threw a porcelain chamber pot at his father, which broke and injured his father.
- He feels **neglected** and feels that he is **compelled to steal in order to meet his needs:** “*From the time that I can remember, my father has never bought me a pair of shoes or pants or a thing – I had to go and steal clothes.*” (“*... het my pa my nog nooit ’n paar skoene of ’n broek of ’n ding gekoop nie – ek moet vir my klere gaan steel het.*”)

### *iii. Relationship with substitute carers:*

He was sent to a children’s home as he had been found to be in need of care, and the following year his older brother was also placed there. However, they absconded regularly. He was always **worried about his mother** and had a dream that his father had killed her. When he absconded and returned home, he found her with a fractured arm.

### *iv. Relationship with siblings:*

He has two older brothers, but mentions one in particular, with whom he  **fights**. This brother threw a stone at him and hit him on the cheek. He was very **angry** and says that he would have killed him if he could get hold of him. He feels **protective** towards **his younger brother**, whom he calls his “baby brother” although he is twelve years old, and begged his parents to stop drinking and send his brother back to school.

**v. Unhealthy relationship with peers:**

- The “small-time” gang (which he refers to as a “group”) that he joined had girls as members who were also his cousins. He speaks of friends being girls rather than boys and refers to one cousin in particular, who cried when he tried to commit suicide, begging him not to do it and telling him that she loved him: “‘P4, but I love you,’ and *I mustn’t do it, and just to hear that someone loves me – I decided not to do it and I jumped off the tracks in time.*” (“‘P4, maar ek is lief vir jou,’ en ek moet dit nie doen nie, en om te hoor dat iemand vir my liefhet, het ek besluit ek gaan dit nie doen nie en ek het afgespring van die treinspoor.”)
- The “small-time gang” also had a detrimental effect on him, as they abused alcohol and drugs together, did crime together and put pressure on him to have their gang **tattoo** made, which he eventually **did to please them**.

**Participant 5**

**i. Relationship with mother:**

- P5 did not make any affectionate comments pertaining to his mother.
- He was **anxious** and **worried** that she would not have him for the December holidays after he had used drugs again during the previous holiday.
- It seems as though he does not have a secure attachment to his mother as she had sent him away to his aunt and his father, saying that she cannot “control” him.

**ii. Relationship with father:**

- P5 only met his father at the age of fourteen, when he was sent to him in Durban.
- He had to look after his father’s cattle and when he returned home without one, he was severely whipped by his father, which left a scar on his ribs. He left as his father did not want him to live there any longer and lived on the streets instead.
- He was **upset when** his father died while he was in a place of safety and wanted to attend the funeral. The social worker informed him later that his mother had gone to the funeral without him.

*iii. Relationship with substitute carer:*

P5 was shuttled to and fro between his mother, an aunt, his father and centres for secure care.

*iv. Relationship with siblings:*

- P5’s older sister seems to be on his mother’s side and he **hardly mentions** first named.
- Two of his scars were caused by his brother, who stabbed him because P5 had eaten his food. P5 was so **angry** that he took a knife and **wanted to kill** his brother, but his mother spoke to him and advised him to lay a charge against his brother, which he did.

*v. Relationship with peers:*

**P5 blames** his friends for getting into trouble during the previous holiday. He tried to stay at home and not use drugs and all went well for the first few days, but then he met them and started using drugs again.

**Table 3.2 The combination of participants’ relationships**

<p><i>i. Relationship with mother</i></p>	<p><b>Summary:</b> The participants gave the impression that they had good relationships with their mothers, but the probation report gives a harsher version of reality. P2 <b>tended to laugh about feelings that he had in encounters with his mother</b>, as though he wanted to play down the effect that it had on him. P4 also laughed when he said that his mother threw a knife at him, which hit him next to his eye. <b>It might be too difficult for them to own the fact that their mothers are also not in touch with their most basic needs.</b> It therefore appears to the researcher that the primary relationship and attachment between the participants and their mothers are also poor, resulting in poor <i>belonging</i>.</p>
<p><i>ii. Relationship with father</i></p>	<p><b>Summary:</b> <b>Their relationships with their fathers are either poor and abusive, or the biological father is totally absent.</b> This amounts to the “absent father”. The longing for a relationship with a father is strong enough to make a boy go “mad” (in P5’s own words), after P5’s father’s death, leaving no possibility for a reconciliation in future. It also seemed</p>

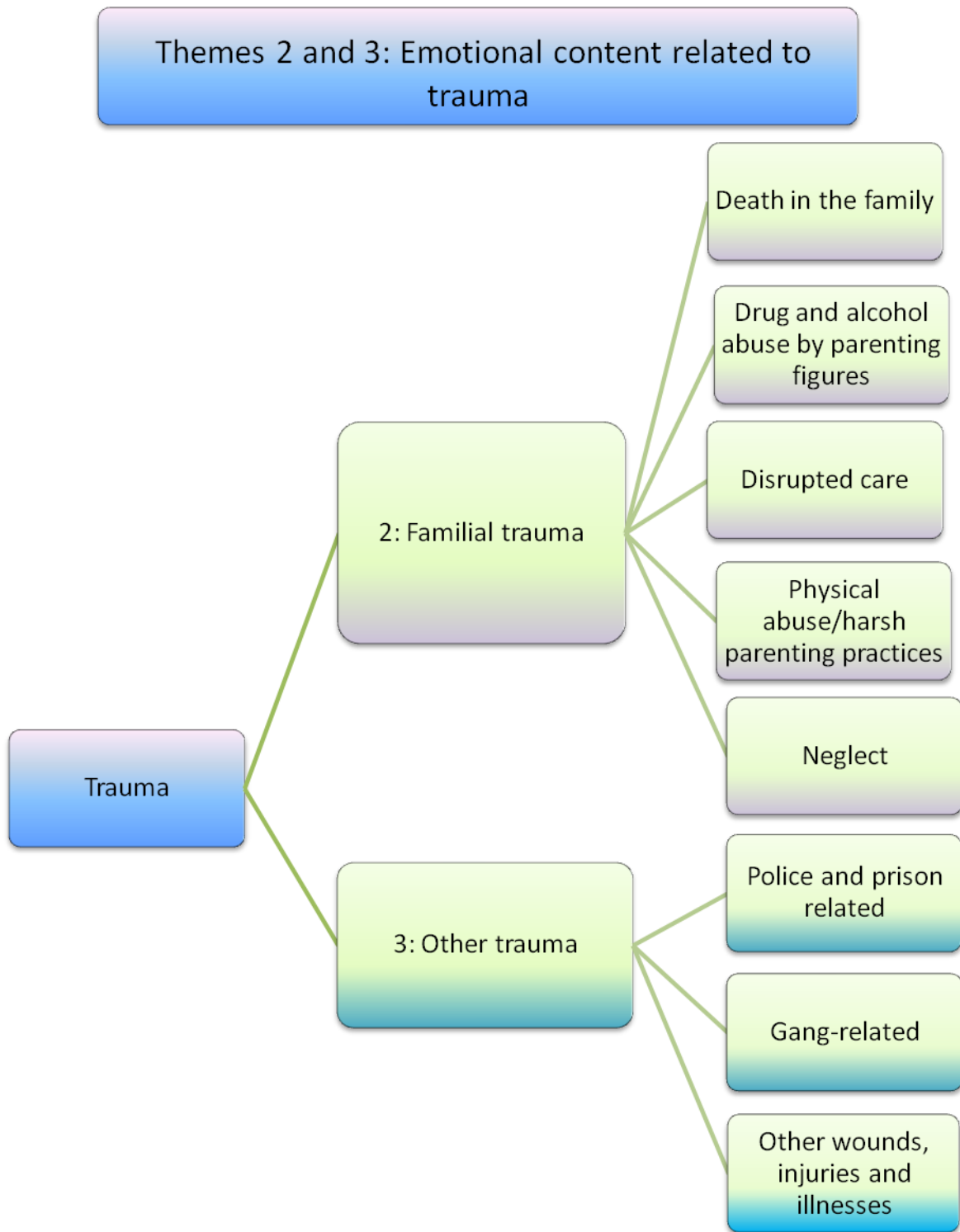


	to have caused P2's involvement in gangsterism and his wish to be sent to jail "to see for myself what it is like". The task of adolescence, namely resolving the crisis of identity versus role confusion (2.4.1.3), will be difficult to attain if they do not have appropriate male role models.
<i>iii. Relationship with stepfather</i>	<b>Summary:</b> Generally, the relationships between participants and their stepfathers are poor, as is clear from the account given by P1 that his stepfather abused his mother and severely injured him. He expressed hate towards his stepfather and an inability to forgive him. P5 never mentioned his stepfather and, according to the probation officer's report, P2 did not get along with his stepfather. The implications are that the adolescents do not have an internal model of the father role, as both their own fathers and stepfathers are inadequate, and this would therefore perpetuate the cycle of the inadequate or "absent father" with regard to their own children.
<i>iv. Relationship with substitute carer</i>	<b>Summary:</b> Participants lived with their grandparents, other substitute carers or in a children's home. These relationships <b>did not provide the attachment and belonging which they sought</b> – not always due to any shortcomings on the carers' side, but due to earlier trauma and poor attachments. This led to further impairment in relationship-building skills, and a perpetuation of poor belonging, leaving a yearning for the fulfilment of unmet needs.
<i>v. Relationship with siblings</i>	<b>Summary: Relationships with older siblings are generally poor, but they feel protective towards the younger ones.</b> They resent the parenting attitude and discipline imposed by the older siblings. In some instances the older siblings are physically abusive towards participants.
<i>vi. Healthy relationship with peers</i>	P2 mentioned girlfriends who <b>encourage him to leave gangsterism and attend church groups with them.</b> They were still attending school, which seems to have a positive effect on the adolescents. When they drop out of school, they generally join antisocial groups and the amount of free time also leads to negative behaviour.
<i>vii. Relationship with girlfriends</i>	<b>Summary: Sexual relationships from a young age are common</b> among these adolescents and, as a result, the adolescents at the centre often have

	<p>a child, and sometimes a second is “on the way” after spending a holiday at home. Three of the participants had already become fathers before the age of eighteen. However, there was no mention of true and lasting love relationships. Physical abuse between partners are also mentioned in an indirect way, e.g. in group discussions. P2 owned that he hit his girlfriend and was quick to give a reason for this.</p>
<p><i>viii. Unhealthy relationship with peers; small-time gangs</i></p>	<p><b>Summary: Relationships with peers are mostly with negative peer groups and gangs.</b> No healthy same-sex friendship relationships were mentioned by the participants, and this is echoed by the cohort from which the sample was taken. It appears as if the communities from which the adolescents hail are all affected to such an extent that cohesive and supportive families with healthy parent-child and sibling relationships are scarce. If the relationships within families are poor, this would also reflect in peer relationships. When adolescents return home for holidays and are questioned about the possibility of relating with “healthy” peers, they usually indicate that they lose their “healthy” peers when they drop out of school.</p>
<p><i>ix. Relationship with the Number Gang:</i></p>	<p><b>Summary: When youths are incarcerated, it does not seem to have any positive effects, as they usually become involved in the Number Gangs.</b> After joining, they see no way out and although they know that it is detrimental for their own development and future, they follow the code of behaviour prescribed by the gang. This leads to sexual malpractices, attacks on other adolescents and a subversive lifestyle and personality change which does not allow them to benefit from the programme at the centre. They tend to shun religion if involved in the Number Gangs, which impacts negatively on their “emptiness”, their lack of belonging and the feeling that they are not important to anyone.</p>

**Summary:** Enough evidence was obtained from the dialogue to conclude that the relationships of participants are generally not healthy, and that there are broken bonds with parents as well as with siblings. These broken bonds lead to emotional as well as physical and spiritual needs. Physical needs arise when there is no food, clothes or financial support for

them. This has a negative impact on their schooling career. On an emotional level, it is difficult for children who experience trauma and do not receive counselling to concentrate and function in school. If the need for belonging, mastery, independence and generosity is not found at school within supporting relationships, the lure of devious forms of satisfying these needs become stronger. These needs are then met in distorted ways by belonging to unhealthy peer groups, small-time gangs, street gangs and Number Gangs. It became clear through the participants' dialogue that the physically and emotionally "absent father" and the alcoholic and abusive father or substitute parent play a major role in the dysfunctional relationships. The researcher also found it strange that the participants did not mention their mothers' poor parenting skills and shortcomings and was surprised when she read about a particular participant's mother's destitute state which he had never mentioned.



**Figure 3.2 Themes 2 and 3: Emotional content related to trauma**

Note: From here onwards, the participants will be grouped within a specific theme in order to get an impression of the relative influence of that theme on the participants' lives.

### 3.7.3 Theme 2: Familial trauma

**Table 3.3** Combination of the participants' familial trauma

*i. Death in the family*

<b>P3</b>	Both parents died (not simultaneously).
<b>P4</b>	He cared for his blind grandfather, who later died.
<b>P5</b>	His father died after P5 came back to Cape Town. He could not attend the funeral. He only knew his father for a short while and had been ill-treated by him, but was nonetheless <b>shocked and angry</b> at not being able to attend the funeral: <i>“Jeez, that stress was something else. I was going mad that day,”</i> ( <i>“Jis, dis ander stress daai. Ek was mal daai dag.”</i> )

*ii. The effects of drug and alcohol abuse by parenting figures*

<b>P1</b>	His stepfather abused alcohol and became physically abusive towards his mother, and he was severely injured by his stepfather.
<b>P3</b>	He left home as a result of his grandparents' alcohol abuse: <i>“They drink, then they don't care about things that you are trying to tell them.”</i> ( <i>“Hulle drink, dan worry hulle nie die ding wat jy praat nie.”</i> )
<b>P4</b>	It appears as though he experiences emotional trauma as a result of an accumulation of factors following on his father's alcohol abuse and physical abuse of his mother. She also abuses alcohol. According to him, he cannot live with his cousins who live in the same town, as they are experiencing the same problems: Their father's brother also abuses alcohol. P4 absconded from the children's home after he had a dream that his mother had died: When he reached home, he found that his father had fractured his mother's arm: <i>“I dreamed that he killed my mother, and ... but it wasn't like that. When I got home, he had fractured her arm ...”</i> (He <b>becomes sad</b> and covers his eyes with his hand, <b>tears rolling down his cheeks</b> , but with no sound coming forth.) ( <i>“Ek het 'n droom gehad dat hy gaan my ma doodslaan, en ... maar dit was eintlik nie so nie, en toe ek by die huis kom, is haar arm afgeslaan ...”</i> .)

*iii. Disrupted care*

<b>P1</b>	He never knew his father, his abusive stepfather left, and his mother is on her own now.
<b>P2</b>	His father was sent to jail when P2 was three years old. He acquired a stepfather at the age of five. He lived with his grandparents for a few months, but then returned to the city where his mother lives. His father now lives in the same neighbourhood and he regularly sees him, but does not see him as a father figure as his father is also involved in the 26s Gang.
<b>P3:</b>	Both parents died. P3 lived with his grandparents, but left as a result of their alcohol abuse. He lived on the streets before he was taken to a kid's shelter. One of the workers took him home and he was cared for by the worker's girlfriend till they moved away. He was back on the streets, washing cars for an income, when a friend took him home and he lived with them for a while.
<b>P4:</b>	Although both parents are alive and married, P4 was found in need of care as a result of their alcohol abuse. He was sent to a children's home for two years, but he absconded regularly. He also spent a year in another youth centre. P4 lives with his parents when not in a home or a Centre.
<b>P5</b>	He grew up in the Eastern Cape with his mother, while his father lived in Kwazulu-Natal. He did not meet him until his thirteenth year. He and his mother moved to Cape Town when P5 was in Grade 4, and P5's problem behaviour subsequently started. His mother sent him back to live with his aunt for two years, but she could not cope with him, so he was sent back to his mother. She then sent him to his father in Kwazulu-Natal, but there he was also not accepted and he lived on the streets later on till he was arrested and sent back to his mother in Cape Town. He spent time waiting in a place of safety, wanting to go home for the holidays, but his mother was unwilling due to his problem behaviour.

iv. *Physical abuse in the family/harsh disciplining practices*

<b>P1</b>	<p>His stepfather physically abused his mother and on an occasion when he was three years old, his stepfather struck out with a panga; his mother used P1 as a shield, and he received the blow. He was severely injured and hospitalized and still bears a deep scar on his head.</p>
<b>P4</b>	<p>His father regularly physically abuses his mother.</p> <p>P4's father hit him against the door frame when he spoke up for his mother: <i>“When I got home, my mother was drunk. My father came back from work and started fighting with my mother (his voice starts to quiver). My mother made the food; she began drinking and he hit my mother and I said that he mustn't do it. He hit me. I fell with my head against the door frame. I got up, I cried, I just looked at him, and I left the house. I went to the railway line and sat and waited for the train to come.”</i> (“<i>Dat ek by die huis gekom het en my ma was dronk gewees. My pa het uit die werk uit gekom, begint te baklei met my ma, en (sy stem bewe) my ma het kos gemaak; die kos was klaar en toe het my ma gedrink en hy het my ma geslaan en ek het gesê hy moenie dit doen nie. Hy't vi my geklap dat ek met my kop teen die deurkosyn val. Ek het opgestaan, ek het gehuil, en ek het net vir hom gekyk en ek is uit by die huis en ek het treinspoor toe gegaan en ek het gesit en gewag dat die trein moet kom.</i>”) <b>This information was given in an almost distracted, chanting voice without pauses or emotion, which can be an indication of traumatic dissociation.</b></p> <p>P4's mother's discipline entails throwing objects at him. She once threw a knife at him, which hit the corner of his eye (refer to 3.2.1.i. P4). However, he seems to <b>accept her abuse</b>, but not that of his father.</p> <p>When P4 played with his brother, the latter threw a stone at him, which hit him on the cheek, leaving a scar. <b>He was upset about it and still feels unhappy</b> about it. In another instance when he said that his brother should help him clean the house, his brother did not want to. He then hit his brother on the hand with a knife and also hit him on the nose.</p>
<b>P5</b>	<p>His father was harsh in disciplining him with whippings, which left scars (refer to 3.7.2.ii. P5).</p>

v. *Emotional content related to neglect*

<b>P3</b>	Although P3 also experienced neglect, he did not verbalize his feelings. After his parents died, he lived with his grandparents. He mentioned that his grandmother abused alcohol and that he had left home and lived on the street. <b>It was as though he had become desensitised and did not think he needed to comment on this.</b>
<b>P5</b>	He experienced feelings of <b>rejection</b> when he was chased away by his father after he had returned home with one cow missing (refer to 3.7.2.ii. P5). “What happened then?” “Then he said that I can’t stay there.” (“Wat gebeur toe?” “Dan, hy sê ek moenie daar bly nie.”)

**Summary of 3.7.3: Emotional content related to familial trauma**

**i. Death in the family:** Three of the participants’ parents had died. P3 had lost both parents. By being interested in causal factors and looking for tendencies during the years of practice at the centre, the researcher has observed that adolescents’ behaviour seems to become rebellious and out of control after they had lost a parent or grandparent, if the latter had been a substitute parent.

**ii. The effects of drug and alcohol abuse by parenting figures:** Alcohol abuse is prevalent among **many parents of adolescents at the centre, and although the adolescents are disturbed by it, they are modelling their behaviour** by following suit.

**iii. Disrupted care:** All the participants suffered disrupted care, specifically from the “**absent father**”. Although P4’s father is physically present, he does not provide in any of the emotional, physical, material or spiritual needs expected of a father. P2’s father lives in the same neighbourhood, but does not provide the love and attention that P2 yearns for. P3’s father had died and he had to survive in spite of various informal placements and eventually lived on the street. P5 was shuttled between family members and suffered most from his father’s harsh discipline and the fact that he had chased P5 away and then died before reconciliation could take place.

**iv. Physical abuse in the family/harsh disciplining practices:** There appears to be a very thin line between harsh methods of discipline and physical abuse. The methods followed by P4’s mother are indicative of a lack of parenting skills and borders on abuse. The



participant's reaction to this is also indicative of desensitisation. It also appears as if the adolescents are copying the parents' non-constructive way of problem solving and resolving conflict as they revert to throwing stones and bricks or stabbing when they have differences.

v. *Neglect* does not appear to be as harsh as verbal and physical abuse, but the emotional implications are as bad, if not worse, as it places the participants in a position of having to find "other ways" of acquiring what they need.

**In conclusion, it can be stated that all the participants grew up in harsh environments, characterised by substance abuse, physical abuse, neglect, disrupted care and little or no support from structures outside the family. This caused push factors and they were therefore lured by the pull factors in the environment, becoming entrapped in negative peer groups, street gangs and Number Gangs, which predisposed them to other trauma.**

#### 3.7.4 Theme 3: Exposure to other trauma

**Table 3.4** Combination of participants' other trauma

*i. Prison-related trauma:*

<b>P1</b>	At the age of thirteen, P1 spent three months in the juvenile section of a prison. When the Number gangsters fought, the wardens beat them with batons, but they included the juveniles in the punishment. P1 received a few blows on the ribcage. He was so " <b>stressed</b> " that he decided to join the 28s. He later "wanted to stab a warden", but the 28s prevented him from doing it, and then he made a large tattoo of a knife with a drop of blood on his leg (his version of the reason for making the tattoo).
<b>P2</b>	He spent a year in prison at the age of fifteen after he " <i>made himself older as he wanted to see what goes on inside the prison</i> ".
<b>P3</b>	He spent six weeks in prison, waiting for a court appearance, and he was " <b>stressed</b> " as he was arrested without a warrant. They informed him that it was as a result of housebreaking, but he knew he had not done it (then). He made tattoos as a result of the stress and when he appeared in court, he was informed that it was an old case that had become active again. Then he was satisfied.

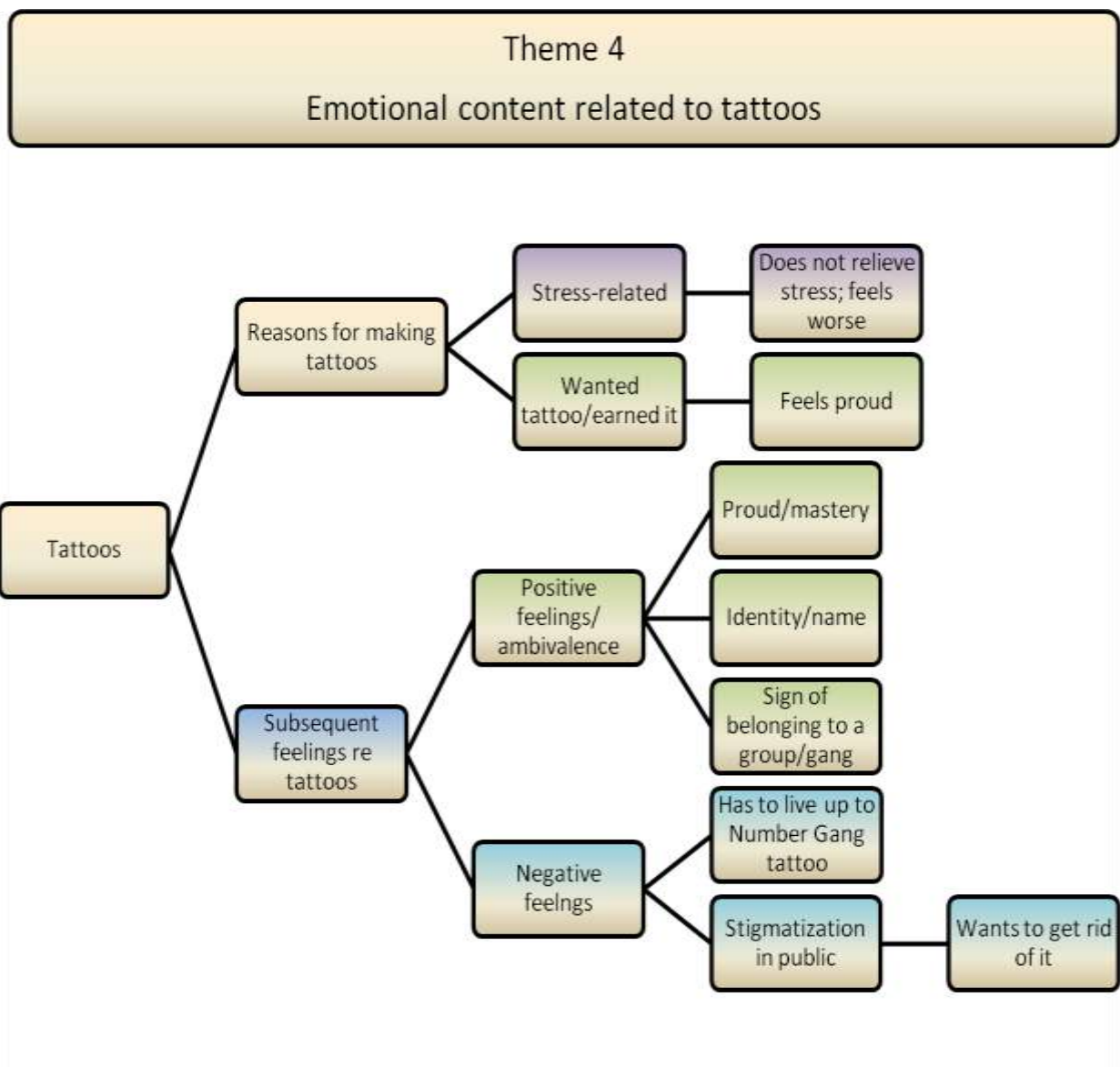
*ii. Gang-related trauma:*

<b>P2</b>	<p>He received a blow in the face with a brick from someone in an opposing gang when he was 12 years old. When aged 13, he was stabbed in the lung, once from behind and once from the front, and spent a week in hospital with a drain. At age 16 he was shot through the thigh. He was stabbed in the head twice by his own cousin in the opposing 28s Gang.</p> <p>He <b>expressed different feelings</b> with regard to these incidents, but <b>mostly said that he wanted to take revenge afterwards.</b></p>
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*iii. Other stab wounds, accidents and illnesses:*

P1	<p>He was stabbed by someone who alleged that P1 robbed him.</p> <p>P1 was stabbed by his accomplice in a robbery, who wanted the loot.</p>
P2	<p>P2 was involved in a fight with his cousin, who was jealous of him, as he walked his cousin's girl home. He persuaded his cousin to fight with fists, "like men", instead of using knives. He cut his hand.</p>
P3	<p>He was stabbed by his friend when their playing became too malicious.</p> <p>He had been stabbed from behind by a player after a soccer match and expressed that he had <b>felt shocked.</b></p> <p>He was in an accident with his bicycle, sustained a head injury and was hospitalized for a week.</p> <p>P3 sustained a burn injury when rescuing a boy from a burning shack. (He <b>was proud of this effort.</b>)</p>
P4	<p>A girl hit him over the head with a wine glass, which broke. The wound bled profusely.</p> <p>He retaliated in sorts and she then broke a beer bottle on him and drew the broken bottle across his back, leaving a scar in the form of a hook. He had to go to hospital and received eight stitches. <b>His voice became almost distracted and his eyes were staring, as though he was dissociating while he spoke about the incident.</b></p>
P5	<p>A man sent P5 to buy wine. When he declined, the man retaliated by hitting him across the head with a brick.</p> <p>He was stabbed by his brother.</p>

**Summary:** It appears as though poor relationships in families often give rise to physical abuse, causing push factors pushing children out of their homes with the result that they become involved in negative peer groups. This leads to further physical and sexual abuse as well as trauma outside the home. The children model the behaviour of the parents and also resort to violence when settling disputes, even with regard to something trivial such as a plate of food. Once they are on the streets and using drugs, the risk of further traumatisation increases.



**Figure 3.3: Theme 4: Emotional content related to tattoos**

### 3.7.5 Theme 4: Emotional content related to tattoos

Responses with regard to the **reasons why tattoos had been made** highlighted two reasons: Four of the participants unanimously said that it was **stress-related and only one participant, P2, said that it was** a purposeful decision of his own choice.

**Table 3.5** Combination of participants' emotional content related to tattoos

*i. Tattoos as an expression of and way of dealing with stress*

P1	<p><i>"I stressed a lot."</i> ("Ek het baie gestres.") He explained that the police beat the juveniles as well whenever the 28s did something, even though the juveniles were not members of the gangs. <i>"Then I stressed and decided, no man, then I'm going to join the gang."</i> ("Dan stress ek; dan besluit ek: Naai, man, dan gaan ek ok sommer in by die bendes.") When asked whether he had made any tattoos while here at the centre, he replied that he made one on each finger as a result of stress: <i>"It's the boys – they cause one to stress."</i> ("Dis die laaities wat mens so laat stres.")</p>
P3	<p><i>"I stressed a lot that evening."</i> ("Ek het baie gestress daai aand.") <i>"The reason was that they arrested me without a docket."</i> ("Hoekom, ek het ... want hulle het my gevang, sien, sonder docket.") "Okay. So what did you write?" "Oukei. So wat staan daar – wat het jy toe geskryf?" <i>"I wrote 'convict', but it didn't come out right."</i> ("Ek het toe geskryf 'convict'. 'Convict', wil ek geskryf het, maar dit het nie reg uitgekome nie.") "Mmm." <i>"See, and here it says, 'why me.'"</i> ("Sien, en hierso staan: 'why me'.")</p>
P4	<p>He gave a long explanation that he had had a disagreement with a teacher and behaved disrespectfully towards her, and later in the day she did not speak to him. He was upset as a result of this and that evening he decided to make a tattoo to show his allegiance to the "group" or gang.</p>
P5	<p>While in a place of safety, his social worker received a call from his mother saying that his father had died. He said that he was "mad" with stress as a result of this and therefore made two tattoos.</p>

**ii. Gang-related tattoos / made by purposeful decision**

<p><b>P2</b></p>	<p>The only other reason given for making tattoos was given by P2, who <b>did not try to hide his affiliation with the gang and how proud it made him feel</b>. When he joined the Young Americans, he made two tattoos related to the gang. <i>“Then I felt proud – why, I am a member of a gang.”</i> (“<i>Toe voel ek trots – hoekom, ek is part van ’n bende.</i>”) When the discussion turned to his tattoos related to the 26s Gang, he described it as feeling “cool”. “Did the feeling of being proud of the first ones ever change?” (“Het dit nou al ooit verander – daai gevoel van trots wat jy oor hulle gevoel het?”) <i>“Yes, when I went to prison, I became a 26. As you can see, I have one, two, three 26s; this one is a Roman 26.”</i> (“<i>Ja, toe ek tronk toe gegaan het, toe raak ek mos ’n 26-bende – ek het mos een, twee, drie 26’s; dié is mos die Romeinse syfers.</i>”) “Mmm.” <i>“See, then I began to think, ag, those are nothing to me now</i> (the Young American tattoos) – <i>forget about those, it’s the 26 now</i>” (while tapping loudly on the table with the pen). (“<i>Sien, toe begin ek te dink, ag, dis niks meer in my oë nie – die nommer 26, oukei – vergeet maar daai</i>” (wys na die vorige American-tjappies en kap heeldyd met die pen op die tafel). <i>“Then I thought to myself: I am fifteen years old and all the guys say, ‘Jo’, you are the youngest 26,’ and so forth.”</i> (“<i>Toe dink ek nou by myself: Ek is vyftien jaar oud en almal die ouens sê: ‘Jo, jy is die jongste 26,’ ensovoorts.</i>”) <b><i>Then I felt kawaii</i></b> (cool) – <i>why, I am the youngest, and they are looking up to me.</i>” (“<i>Toe voel ek nou kawaii – hoekom, ek is die jongste, en hulle kyk op na my toe.</i>”)</p>
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**iii. Retrospective feelings with regard to tattoos**

When asked whether the stress was relieved **after they had made the tattoos**, they denied it, saying that **they had felt worse**.

<p><b>P3</b></p>	<p>Did it make the stress better after you made the tattoo, or not?” (“Maak dit die stres minder as jy getjap het, of nie eintlik nie?”) <b>No</b> (his voice becomes louder and more excited), <i>after I made the chuppies, my arm felt heavy. Then I stressed even more – then I wanted to chup my whole body. But then my thoughts said, no, P3, don’t do it.</i> (“<i>Naai</i> (sy stem raak harder en meer opgewonde), <i>wat ek my getjap</i></p>
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	<i>het, toe voel mos my arm lam. Toe stres ek nog verder – toe wil ek my hele liggaam getjap het. Toe sê my gedagte: Nee, P3, moet dit nie doen nie.”</i>
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iv. After completing the body map with the tattoos, they were asked how they felt about their bodies, and four out of five said that they **regretted making the tattoos**. They also expressed the wish to get rid of the tattoos.

<b>P1:</b>	(He takes a step back (after completing the map) and looks at the map with <b>an expression of sadness</b> .) “Tell me how you are feeling when looking at it – what does it look like?” (“Vertel vir my hoe voel jy as jy daarna kyk – hoe lyk dit vir jou?”) (He shakes his head in the negative.) “ <i>It doesn’t feel nice.</i> ” (Hy skud sy kop in ’n “nee”-beweging.) “ <i>Ek voel nie lekker nie.</i> ” “Don’t you feel good?” (“Voel jy nie lekker nie?”) “How do you feel – can you say in words how you feel?” (“Hoe voel jy – kan jy in woorde sê hoe jy voel?”) “ <b>I regret it.</b> ” (“ <i>Ek voel spyt.</i> ”)
<b>P2:</b>	“ <b>I feel bad</b> ( <i>tap, tap, tap</i> ) – why, I wasn’t born with this stuff.” (“ <i>Ek voel sleg (tik, tik, tik) – hoekom, ek is nie gebore met dié goed nie.</i> ”)
<b>P3:</b>	“And afterwards <b>I felt sorry</b> – why did I do it? My people don’t have chups.” (“ <i>En agterna toe voel ek gaspyt – hoekom het ek dit gedoen, want my mense het ok nie sulke tjappe nie.</i> ”)
<b>P4</b>	He gave an indication that he did not want to make any more either. He also told the researcher how he said no to other learners who were busy making tattoos: “ <b>I don’t want to make more. I refuse.</b> ” (“ <i>Ek wil nie nog tjappies maak nie. Ek weier.</i> ”)
<b>P5:</b>	“When you had completed the chuppy, and you saw it on yourself, how did the stress feel then? (“As die tjappie klaar getjap is, nè, en jy sien hier sit hy nou, hoe voel die stres dan?) “ <i>Jo, I don’t know – I want to die</i> (clears his throat); <i>I want the chup to be gone.</i> ” (“ <i>Jo, ek weet nie – ek soek doodgaan (hy maak keel skoon); ek soek die tjap weg.</i> ”)

v. **Consequences of having tattoos: In the community when having to look for a job**

<b>P1</b>	“ <i>When I look at the chuppies on the front of my body – I’m not going to get a job</i> ”
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	<i>like this.</i> (“As ek die tjappe so kyk, aan die voorkant – ek gaan nie werk kry só nie.”)
<b>P2</b>	“If I go into a factory, and I want to see the boss to look for a job, then he won’t look at me as a person – <b>he’ll look at me as a villain.</b> ” (“As ek instap by ’n fabriek, en ek wil ’n werk gaan soek en die baas gaan dié sien, dan gaan hy my nie aankyk as ’n mens nie – hy gaan my aankyk as ’n skelm.”)

**vi. Consequences with the gang when removing a tattoo**

<b>P1</b>	He believes that it is not possible to break away from the Numbers Gang: “How do you feel about the fact that they are gang (28s) tattoos? Will you be able to turn away?” (“Hoe voel jy oor die feit dat dit bendetjappies is – sal jy kan wegdraai van hulle?”) “ <b>They say there is a way in but not a way out.</b> ” (“Hulle sê daar is ’n way in, maar daar is nie ’n way out nie.”) “Do they tell you that?” (“Sê hulle vir julle so?”) “Yes.” (“Ja.”)
<b>P2</b>	He has ambivalent feelings: He wants to get rid of the tattoos, but he still has reservations about removing them as he believes that this would have consequences for him, as the gang members would take steps which he did not want to discuss with the researcher: “ <b>There are consequences if you want to remove the stuff.</b> ” (“Daar is nagevolge as jy die goed wil uithaal”) “Will the gang take revenge, or what?” (“Dan gaan die bende wraak neem, of wat?”) (Tap, tap, tap). “ <b>It is not that easy to remove it. I don’t want to talk about it, but it is not as easy as other people might think to remove a gangster tattoo.</b> ” (Tik, tik tik) (“Dis nie so maklik om dit uit te haal nie. Ek wil nie nog daarvan praat nie, maar dit is nie so maklik soos ander mense dink om ’n gangster- tattoo uit te haal nie.”) “Okay. So you are afraid of the consequences of removing it, hey?” (“Oukei. So jy is bang vir die gevolge daarvan, nè?”) “ <b>I am not afraid, but I know what the consequences of removing it will be.</b> ” (“Ek is nie bang nie, maar ek weet wat is die gevolge daarvan.”)

**vii. Having to live up to the code of the gang** is another consequence of having number tattoos. He is not allowed to leave that lifestyle behind, even if he desires to do so. The leader

of the opposing group (28s) tried to lure him into fighting to defend his honour, as well as the honour of the 26s at the centre:

<b>P 2</b>	<p>“Okay. And do you think that having chuppies on your body creates problems for you when you are between other gangsters?” (“Oukei. En dink jy nou dat as jy tjappies op jou lyf het, dit vir jou ’n probleem is as jy tussen ander bendelede kom?”) “Yes (a little laugh), <b>big problems.</b>” (“Ja (laggie), <i>groot probleme.</i>”).</p> <p>“Mmm. For instance, here at the centre, between the 26s and 28s?” (“Mmm. Soos nou hier by die skool byvoorbeeld, tussen jou en die 28s?”) “Does it create problems for you?” (“Maak dit vir jou probleme?”) “Big problems.” (“<i>Groot probleme.</i>”)</p>
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**viii. The tattoos symbolize the specific emotions experienced when it was made**

<b>P1</b>	<p>“He gestures towards a large tattoo of a knife with a drop of blood and says: “<i>I wanted to go and stab them (the police); then they (gang members) prevented me from doing so.</i>” (“<i>Ek wou hulle gaan steek het, toe keer hulle my.</i>”) The same participant also has two tattoos of his girlfriend’s name that he made when he missed her.</p>
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**ix. The tattoos also provide a sense of identity and usually depict a name that they are called by others**

<b>P1</b>	<p>He has a tattoo with a few letters and when asked what it says, he replied: “<b>Naughty boy.</b>” (“<i>Stout klong.</i>”) “Mmm. Were you also stressed then, or did something else happen?” (“Mmm. Was jy toe ook gestres, of het iets anders gebeur?”) “<b>I fought a lot.</b>” (“<i>Ek het baie gebaklei.</i>”)</p>
<b>P2</b>	<p>“<i>Then they started calling me... Then I took it that they were giving me praise. Then I put it on my body. It felt... it felt... this is me – I’m the man.</i>” (“<i>Dan begin hulle vir my sê ek is ... Dan vat ek dit so: Hulle prys vir my. Dié, toe het ek dit op my lyf gesit. Dit het vir my gevoel... dit het vir my gevoel... dit is ekke – ek is die man.</i>”)</p>



<b>P 3</b>	<p><i>“This one – this is my name. That they... they should call me: my name. I’m trying that they should call me by that name.” (“Dié ene – dis my naam, wat hulle... lat hulle vir my moet noem: my naam. Ek probeer dat hulle vir my noem dié naam.”)</i></p>
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**x. Tattoos symbolize a feeling of belonging to a group**

<b>P 2</b>	<p><i>“Then, afterwards, I felt I am already part of the gang – I did enough for them; then I made these three (showing the three signs depicting the 26 number with dollars, a Roman 26, the sun and a “26”).” (“Toe voel ek agterna, oukei, ek is nou klaar part van die bende – ek het genoeg vir hulle gedoen; toe maak ek die drie tjappies.”)</i></p>
<b>P4:</b>	<p><i>“Yes, the six of us – they have it [the tattoo depicting their group name]; I was the only one who did not have it and each time we swam and smoked, they looked at their tattoos and then said to me, ‘You should also make one, then you’ll also be one of us.’” (“Ja, ons ses – hulle het dit; ek was al een wat dit nie gehet het nie, en elke tyd as ons miskien geswem het en gerook het en... dan kyk ek hulle tjappies en hulle sê vir my: ‘Jy moet ook vir jou so ’n tjappie kry, dan is jy mos deel van ons.’”)</i></p> <p><i>“I am actually sometimes... as though I want to please them.” (“Ja, ek is eintlik partykeer... is ek so dat ek vir hulle wil please.”)</i></p>

**Summary: Negative consequences of making tattoos:** The participants do not seem to weigh up the pros and cons of making the tattoos before they are made. Later, when they start thinking of the consequences, they cannot remove the tattoos. The adolescents at the centre lack long-term visions, goals and planning. They react to situations instead of responding after reflecting on it (Brendtro & Longhurst, 2005:56). Some of the tattoos are made in reaction to stressful situations, especially when they are in settings such as at the centre, where they are locked up at night, and in prison. They do not have other opportunities of externalizing intense emotions while they are locked up, and therefore these emotions are retroflected onto the body. However, this does not provide the relief that cutting gives to people who self-mutilate. The participants are afraid that they will experience problems with reintegration in the community, when they look for a job (3.7.5.v) and when they want to leave the gang (3.7.5.vi). They believe they cannot do it without dire consequences for them

within their own gang as well as with the other Number Gangs (3.7.5.vii). This is endorsed by Parker Lewis (2006:30) "...and fear of unspecified consequences plays a major role in ensuring that this devotion to The Number stays paramount above all other issues – including that of personal safety".

#### **Positive feelings related to tattoos:**

**They provide a sense of identification:** The participants all identified with a name that they were called or wanted to be called by the group and tattooed that onto their bodies. It is postulated that this could be a way of affirming the poor sense of self. (Two of the participants who are not good at spelling, spelt these names incorrectly, making it difficult to decipher them.)

**They are a means of showing belonging** with the peer group or gang, which is lacking at home. The tattoos provide the external sign of belonging.

**Mastery:** P2 derived a distorted sense of mastery by committing acts that proved his worth and proved that he was worthy of joining the 26s Gang. He therefore feels proud of his achievements and the tattoos are his external sign of being worthy.

### **3.8 SUMMARY AND CONCLUSION**

Four themes were extracted from the dialogue which had been elicited by the body mapping sessions. The transcriptions amounted to a few hundred pages and it was difficult to include only the most pertinent commentary, as most of it was relevant and warranted inclusion. This provides evidence of the fact that body mapping is a suitable tool for enhancing dialogue with adolescent boys in a Special Youth Centre. The mapping of the tattoos elicited a lot of emotion, which was surprising as the researcher had presumed that mapping their lesions would elicit more emotional reaction. The honesty of P2 regarding his distorted feelings of pride about his achievements was surprising, as he knew that it would not be accepted – allegiance to gangs and tattooing are against the centre's rules and therefore are not acceptable to the authority figures (thus including the researcher). His remarks about his yearning for his father's love and attention were especially touching. As the sample was chosen according to specific criteria and the participants were only included on the grounds

of the presence of both tattoos and scars, they were representative of the population of learners at the Special Youth Centre.

The amount of trauma suffered was expected, as the researcher specified this as a reason for undertaking this research. However, a tendency that was hitherto unknown is the destructive or non-constructive coping skills modeled by parents, which are then copied by the children. Scratching, throwing of objects, stabbing siblings because of a disagreement over food, severely whipping a 13 year old son for not finding a missing cow – all point towards the inability to find more constructive ways of coping with situations and settle disagreements. This will be addressed in Chapter 5 in the section “Results of research”, as well as in the section “Recommendations”.

Another hitherto unknown factor was the effect of the Number Gangs on the lives of these young adolescents and the amount of trauma already suffered as a result of allegiance to the street and Number Gangs. A theme running like a thread throughout all the themes concerns unmet emotional and physical needs. These unmet needs will receive further attention in Chapter 4.

The themes extracted from the dialogue had been elicited through the body mapping of tattoos and lesions. These themes, namely emotional responses and reactions with regard to relationships, familial trauma, other trauma, and tattoos, provide evidence that the main goal of the study, namely to enhance dialogue, was attained. The sub-goal of the research study was also successfully attained as the amount and quality of data received via this technique point to the fact that body mapping would be a suitable research tool. After attaining the goals that were set at the beginning of Chapter 3, a literature control was applied to the body of evidence in order to prove its validity in the next phase of the research study. Therefore, in Chapter 4, the process of crystallisation will lead to either proving or disproving the validity of the data obtained during the body mapping sessions.

## **CHAPTER 4: LITERATURE CONTROL**

### **4.1 INTRODUCTION**

In Chapter 4, relevant literature will be presented in combination with the findings of the empirical study in order to do a literature control, following the “theory after” method. This has the aim of proving that the findings of the empirical study are scientific and trustworthy. Mouton (1996:177) advises that interpretation of the findings should be done against the backdrop of the research problem, which reads as follows: “Adolescent boys at the Special Youth Centre experience barriers preventing healthy expression of emotions. They need concrete avenues to explore the mind-body connection and to promote dialogue about their life histories to enhance awareness. The current programme does not provide such an opportunity. If sentenced adolescent boys do not have an awareness of the impact of their life stories, traumatic events can remain unintegrated. Non-adaptive coping such as addiction, seeking identity and belonging to gangs and criminal behaviour can be some of the outcomes of unintegrated life stories. It is hoped that body mapping of scars, lesions and tattoos will provide a key to not only unlock the facts of their life experiences but also appropriate emotion to enable adaptive and appropriate behaviour to emerge.” The four themes (3.7.1) derived from the dialogue are grounded on Gestalt theory (2.1) and controlled by literature. Additional information forms part of the literature control and consists of information from the occupational therapy intake form, the probation officers’ report and the learner profile, which contains the Individual Development Plan with the learner’s strengths, weaknesses and progress, following the Circle of Courage model (see Figure 4.1).

### **4.2 LITERATURE CONTROL**

The themes extracted from the dialogue of participants guided the researcher towards the following fields for the literature control:

- Theories regarding youth misbehaviour, criminal behaviour and psychological trauma
- Information on deviant peer groups, e.g. street children, street gangs and the Number Gangs

- Universal human needs according to different theories and the following motivational models:

Maslow: (Louw & Edwards, 1998:423)

The Circle of Courage model: (Brendtro, Brokenleg & Van Bockern, 1990)

Max-Neef's fundamental human needs: (Max-Neef, 1991)

Bronfenbrenner's bioecological theory (Bronfenbrenner & Ceci 1994:568-586; Papalia, Olds & Feldman, 2008:36)

#### **4.2.1 Theories regarding youth misbehaviour and criminal behaviour**

According to Joubert (2008:93), there are traditional and contemporary theoretical perspectives on youth misconduct. The traditional positivistic theories can be roughly explained as those centering on the individual, e.g. the genetic and biological causes (the born offender) and the psychological causes, personality and intellectual and moral development (the made offender) Joubert, 2008:93-97). The second strain is the social causes (Joubert, 2003:87-93), with the family at its root. This depicts how attachment to the caregivers forms the basis from which a feeling of empathy and generosity towards others and, later, a moral code are developed. From the family it broadens to the community and theories regarding the structure and disorganization of communities as well as the strain theory, cultural deviance (social structure theories) and social learning and control theories (social process theories). These social theories of youth misbehaviour have developed with regard to the role of the community in misbehaviour, which will be denoted when discussing the role of the community according to Bronfenbrenner's bio-ecological theory. According to Joubert (2003:95) "the classical theories have little regard for the 'person', and the focus is on the act and the judicial responses to the act".

**Integrative theories** are attempts at integrating all the theories to produce better explanations for youth misconduct. "According to this approach, many youths are at risk of committing crime but few face all the hazards that result in a criminal career, including an impulsive personality, a dysfunctional family, a disorganized neighbourhood, deviant friends and school failure" (Siegel in Joubert (2003:104). Joubert (2003:114-115) postulates that an attempt at

pin-pointing the causes of youth misconduct in South Africa has resulted in outlining variables such as social risk factors, which include caregivers, institutional deficiencies and economic deprivation. From these social factors the theory follows that "...strain due to structural deficiencies, particularly problems with primary care, educational shortcomings and economic issues is evident, which explains why the preponderance of South African risk factors is of a social nature" (Joubert, 2003:115). Other than the social risk factors, there are also personal factors and moral development. Liese (2008:84-91) names the personal causal factors, namely **limited socio-moral development, emotional poverty** and **thinking errors**.

The **integrated biological approach** does not view young offenders as born criminals, but sees the biological factors as creating a predisposition towards crime. Children are exposed to biological and psychological processes that shape their personality and when they are in school, this personality "manifests itself" with certain types of behaviour. The social influences at school may then further contribute to antisocial behaviour. Eysenck's theory (in Joubert, 2003:103) is that criminal behaviour is the result of an interaction between certain environmental conditions and inherited features of the nervous system. This theory also echoes Bronfenbrenner's view on the interplay between the inherited genetic potential and the influence exerted by the environment (Bronfenbrenner & Ceci, 1994).

The **integrated social approach** postulates that a disorganized community such as Hillbrow in Johannesburg lacks the stability and resources to accomplish collective goals and therefore tends to have higher crime rates (Joubert, 2003:104). The **developmental criminology** trend postulates that if the transition to adolescence is disruptive, it promotes criminality when young people are already at risk due to socio-economic problems or family dysfunction. More than one theory is based on developmental views and suggests that criminality is the result of many causal factors, such as maladaptive personality traits, educational failure and poor family relations (Joubert, 2003:104).

Apart from these causal factors, there are also **criminogenic risk factors** (Maree, 2008:56). Maree describes risk factors as "those conditions that increase the likelihood that a child or young person will develop one or more behavioural problems in adolescence". Criminogenic risk factors are further defined as "factors specifically associated with criminal activities" (Maree, 2003:53). It is interesting to note that one of the types of criminogenic risk factors is dynamic risk factors, and they are described as need factors. They represent conditions that, if

changed, reduce the chances of the youth engaging in antisocial behaviour or continuing with criminal activities. These factors are then divided into **social risk factors** and **individual risk factors**.

These identified risk factors in combination pose a threat, and the more factors present, the stronger the risk. Most researchers identify factors present in the family as the main risk factors (Maree, 2008:78). The Western Cape Status of the Youth Report (2008:106) states:

The question arises as to why juvenile crime is so high in South Africa and particularly in the Western Cape.... However, there are specific unique influences that pertain to South Africa that could contribute to the high rates of criminality amongst youth. These could include the legacy of apartheid, the disruption of the family unit, poverty, the high unemployment rate, limited and poor schooling and the growth of gangsterism.

**Summary:** These factors were all found, either via the dialogue of the participants and the extracted themes or via the additional information gained from the probation officers' reports. The familial factors become the strongest factor when listening to their dialogue, but it has to be kept in mind that the causal factors behind the familial factors can be due to lacking community support, the poor economic climate and unemployment, poor educational level of the parents, poor motivation and little hope for the future. These contributing factors are illustrated in an interview by a reporter from the magazine *Vrouekeur* (Janse van Rensburg, 2011:71) with a former gang leader, Denzil Moses, who told the story of how his brother shot him. They grew up in the same house, with two older brothers who were already involved with gangs and a mother who smuggled drugs after his father's death. His brother had been sent to Pollsmoor prison as a youth and he became jealous of Denzil's success as a gang leader. When he was released, he purposely joined the rival gang. As his initiation into the gang he had to shoot his own brother to prove his loyalty to the gang.

When reading the accounts of Pinnock (1997) and Jensen (2008), some of the factors at play in areas where there is a high prevalence of community disorganization, gangsterism and poverty, the political history of South Africa and specifically the apartheid policy play a major role in the disrupted family life of the communities. People were removed from their neighbourhoods and moved to areas far from places of work. The fact that women found jobs in the city and surrounding areas meant travelling and spending many hours away from home. The effect on the children, growing up without supervision and emotional support,

cannot be underestimated. This theory is substantiated by an article on gangsterism by Maritz (2010:13).

The researcher is surprised that drug dependency/abuse has not been named as a major cause of criminal behaviour, as most of the learners at the Centre use drugs and name this as the reason for housebreaking, theft and robbery. They need the money to purchase drugs. Roper (2005) (in the Western Cape Status of the Youth Report, 2008:109) reports that the overwhelming majority of young offenders had been using drugs prior to imprisonment. Some even reported that they had started using drugs when they had been as young as eight or nine years of age. On the grounds of this report, as well as research done amongst secondary school children in the Western Cape, it is fairly safe to assume that a substantial portion of the young prison population in the Western Cape has a history of drug and substance abuse and that this proportion would be higher amongst persistent offenders.

According to the researcher, another factor which has been underestimated by previous researchers is the role of poor academic performance and subsequent school drop-out. Most of the learners at the Centre say that they started absconding from school and then started hanging around with other absconders. Having so much time on their hands leads to experimenting with dagga, and later they need money to keep up the habitual smoking. Once they have been out of school for some time, they get involved in housebreaking and theft, which leads to their referral to the Centre. However, these children are rarely followed up by the school system or social services in an attempt to find the reason for their absconding. Bezuidenhout and Tshiwula (2008:102) report that a study by Hirschi (1990) found a “causal chain leading to delinquent behaviour: academic incompetence leading to poor school performance that results in a dislike of school, and consequently a rejection of school authority, which leads to delinquent behaviour”. This pinpoints what the researcher has found. These findings should be further elaborated on by investigating the reason for their incompetence and providing suggestions on how these children can be supported at school.

The Centre for Research of Youth at Risk (2002) report the same risk factors as indicated under the criminogenic risk factors, including a **difficult personality or temperament**, problems caused by **brain disease, family violence**, which includes **verbal and emotional abuse**, and **neglect and childhood traumas**, such as physical and sexual abuse, and **low socio-economic status and living in poverty**. Brain disease is the only factor that was not



present in all the participants – only P3 was reported to have had meningitis, and had sustained a head injury which also impacted on his learning ability.

Research done in Inanda near Durban in South Africa (Family Preservation Pilot Project, 1998, in Maree, 2008:78) found that it was common for youths involved in criminal activities to have **stepfathers and these youths generally experienced difficulties with both the father and the stepfather**. This fact was consistent with what was extracted from the dialogue of P1, P2 and P5 (3.7.2.ii; iii.). Most had **difficulties at school, practicing truancy and eventually dropping out of school** (substantiated in 3.6.7). Substance abuse, a lack of social skills, involvement in gang activities and running away from home are common (Maree, 2008:78).

These factors were also reflected in the dialogue of the participants. The exception is running away from home – only P3 had left his grandparents to live on the streets, while P5 lived on the street for a short period after his father chased him away.

Padayachee (in Maree, 2008:79) added **drug and alcohol abuse, limited or no provision in the basic needs of children, abandonment and negligence, various forms of abuse, a lack of role models, knowledge of rights and freedom but not of responsibility, and a lack of spirituality**.

Shaw and Tshiwula add a **lack of facilities and jobs and exclusion**.

**Summary:** Of these factors, the only one not named in the extracted themes is the **knowledge of responsibility**. All but P5 named a form of responsibility which was felt towards their younger siblings or mother. P4 already carries the burden of a child who is caring for his mother and feels responsible for his younger brother. It seems as though there is a cultural tendency towards taking responsibility for their mothers and younger siblings, as this is often mentioned by learners at the Centre. However, responsibility in terms of everyday decisions and behaviour is poor. They find it difficult to respond to situations and have a tendency to react, which is a deterrent to responsible behaviour (responding implies giving thought to a situation or problem before following with a behavioural response, whereas reacting implies an emotional/behavioural reaction on a situation (Brendtro & Longhurst, 2005:56).

**The lack of facilities for further education and skills training, and therefore for finding jobs,** is the most deterring factor, preventing successful reintegration into society. They are often still too young to find a legal means of employment when they return home. Due to the discrepancy between their age and the grade level at which they have to continue at school, returning to school is usually not a possibility. In the few instances when this had been attempted, the adolescents' motivation for returning to school did not bear enough weight to persevere through the difficulties that they face once they are back in their home environment, and which caused them to drop out of school in the first instance.

**In conclusion,** it can be stated that the criminogenic factors were relevant and reflected in the dialogue of the participants. These factors will be highlighted where applicable in the description of the typical adolescent referred to the Centre in terms of Bronfenbrenner's bioecological theory. The researcher also found an intensified risk of becoming more entrenched in criminal behaviour as a result of affiliation to the Number Gangs. There is also a direct link between youths who had been incarcerated in prison while awaiting trial or for other reasons not mentioned by the participants. When they are in prison, they join the Number Gangs and this culminates in a further downward spiral.

Information regarding the incarceration of youths in the Western Cape includes the following:

On 16 April 2007 there were 3 328 youths detained in 42 different prisons in the Western Cape, of which 366 were under the age of 18 years and 12 were younger than 14 years old (Western Cape Status of the Youth Report, 2008:108). This is despite the Constitution (Western Cape Status of the Youth Report, 2008:106) stating that:

Every child has the right [...] not to be detained except as a measure of last resort, in which case, in addition to the rights a child enjoys under sections 12 and 35, the child may be detained only for the shortest appropriate period of time, and has a right to be [...] treated in a manner, and kept in conditions, that take account of the child's age. (The Constitution of the Republic of South Africa, Act 108 of 1996, Section 28)

Beinart (as cited by Crawford and Walker, 2003:89) conducted research in English, Scottish and Welsh secondary schools with 14 000 students in total to assess their involvement in crime, drugs, alcohol misuse and other antisocial activities. Beinart found the following risk factors: poor parental supervision and discipline, family conflict, a family history of

misbehaviour, parental involvement/attitudes condoning problem behaviour, a low income and poor housing, low achievement since primary school, aggressive behaviour, including bullying, a lack of commitment, including truancy, school disorganization, community disorganization and neglect, the availability of drugs, a disadvantaged neighbourhood and a lack of neighbourhood attachment, alienation and a lack of social commitment, attitudes that condone problem behaviour, early involvement in problem behaviour and friends involved in problem behaviour.

The researcher is of the opinion that all these factors are prevalent in the ecology of the participants in the study and it is therefore worth mentioning a British study.

#### **4.2.2 Needs and motivational models**

In order for the occupational therapist to motivate adolescents to partake in the normal occupation of adolescence, she has to understand what motivates the adolescent at risk to partake in devious occupations. Unless their underlying needs are met, the process of self-regulation will continue to bring them to the foreground. Gestalt theory (2.2.2) postulates that human behaviour is driven by the basic need for homeostasis. Perls (1973:7) was of the opinion that in a healthy person the most pressing need becomes the foreground and everything else recedes to the background (2.2.2.viii). The researcher found that most of the emotions mentioned in the participants' dialogue (P2: 3.7.2.ii; P4: 3.7.2.ii) can be related to unmet needs, which would be pressing for attention as unfinished business (2.2.3). The "push and pull" factors at play in the dynamics of becoming street children (Matsemela & Van der Merwe, 1996:129; Street children in S.A., 2010:1), joining street gangs, Number Gangs and unhealthy peer relationships therefore need to be taken into account. Brendtro and Du Toit (2005:16) made the following statement in this regard:

When growth needs are met, youth have positive outcomes. When growth needs are frustrated, youth show problems. Environments that fail to provide belonging, mastery, independence, and generosity cause great pain to children and are toxic to positive development.

The above-mentioned authors find the answer to the reason for the misbehaviour of the youth outside the youth, in the environment, and not as most people would believe due to personal

shortcomings of such young persons. As the Circle of Courage model forms the basis from which the current programme at the Special Youth Centre is implemented, the extracted themes are applied to the Circle of Courage in order to evaluate the unmet needs as part of the literature control. Attention was also given to Max Neef's (1991) Human Development Scale and his theory regarding fundamental human needs, as well as Bronfenbrenner's bioecological theory (Bronfenbrenner & Ceci, 1994:568-586; Papalia *et al.*, 2008:36). For the purpose of this study it is important to have greater clarity on what needs are and how unmet needs cause behaviour which is indicative of resistances (Perls, 1973:32-40) named "contact boundary disturbances" by later Gestaltists (Blom, 2006: 31) or "modifications to contact" by Joyce and Sills (2010:107).

Jordaan and Jordaan (1998:570) explain that the words "emotion" and "motivation" both stem from the Latin word for "move" and that some authors describe emotion as a felt impulse to act, while motivation is commonly understood as being a state of readiness to act. According to Jordaan and Jordaan (1998:571), there are two types of motives: antecedent or "push" motives, impelling one to act, and goal-oriented motives, also described as "pull" motives. The "push" factors, or antecedent reasons, rely on something that happened in the past and are reactions to a preceding event, while the "pull" factors are aimed at a goal that one wants to achieve, directly or eventually. According to the authors (Jordaan & Jordaan, 1998:578), the push and pull factors work together in many life situations and specifically the methods used in conflict situations at home. Parents of the adolescents under study seem to be reacting on situations with violence, using "push" techniques instead of aiming for better ways of interacting and applying "pull" factors. The parents are modeling and teaching their children inappropriate ways to interact and relate, as indicated below in Table 4.1.

**Table 4.1 Non-constructive coping mechanisms as indicated by participants' dialogue**

Chapter 3.7.2 Relationship	Participant 1	Theme 1.iii, Stepfather	Theme 1.iv Siblings		
Relationship	Participant 4	Theme 1.i Mother	Theme 1.ii Father	Theme 1.iv Siblings	Theme 1.v Peers
Relationship	Participant 5	Theme 1.ii Father	Theme 1.iv Siblings		
3.7.3 Familial Trauma	Participant 3	Theme 2.ii Grandparents' Alcohol abuse			
Familial Trauma	Participant 4	Theme 2.ii Parents' Alcohol Abuse			

**4.2.3 Maslow's hierarchical model of needs (1970; 1971) (Louw & Edwards, 1998:423)**

According to Maslow, human functioning is tantamount to self-actualization, and this applies to all people (Jordaan & Jordaan, 1998:582). Maslow developed a hierarchy of seven categories of needs, implying that the basic needs have to be met before a person can move on to the next need. He distinguished the physiological needs as the most basic as life depends on it, followed by the need for security, love, self-esteem and dignity, the cognitive needs for knowledge and understanding, aesthetic needs for order and beauty and the need for self-actualization or realizing human potential. Although the hierarchical structure is criticised for being too linear, these needs are valid and are also reflected by other models, for instance the Circle of Courage model, which is based on the "growth needs" of Maslow (Brendtro & Du Toit, 2005:15). According to Edwards (1998:421), Maslow's theory spells out that people who do not strive for the higher needs (the transcendental and transpersonal) become ill, violent, nihilistic or apathetic and without hope, which is typical of many of the communities in the Western Cape, where gangsterism, unemployment and drug abuse are

common (Pinnock, 1997; Jensen, 2008; Western Cape Status of the Youth Report, 2008:29). This is further substantiated from a neurophysiological point of view, namely that the level at which the brain is functioning is affected by the degree to which situations are perceived. If something is perceived as being a threat to survival, (Maslow's level of security needs), the brain functions at a lower level in a fight or flight mode, and secretes "stress hormones" which aids survival, but is detrimental to higher level cortical functioning and abstract reasoning (Hannaford, 2005:175).

#### **4.2.4 The Circle of Courage model of youth empowerment (1990) (Brendtro, Brokenleg & Van Bockern, 1990a; 1990b)**

According to the authors, the Native American philosophies and their way of disciplining their children is "...perhaps the most effective system of positive discipline ever developed" (Brendtro *et al.*, 1990b:44). It is a holistic approach which the western world is only now beginning to understand and apply.

According to this model, the adolescent's needs are depicted in the Circle of Courage, which is a symbol of the medicine wheel of the Native American and First Nations cultures and is divided into quadrants. The circle is sacred and suggests the interconnectedness of life (Brendtro *et al.*, 2011). They constitute:

- *Belonging* or attachment (the need to be loved and to belong to a family or a group). Lakota anthropologist Ella Deloria in Brendtro *et al.* (2011:1) described the core value of belonging in these simple words: "Be related, somehow, to everyone you know."
- *Mastery* or achievement (the need to attain success in some area). According to Brendtro *et al.* (2011:1), "humans have an innate drive to become competent and solve problems. With success in surmounting challenges, the desire to achieve is strengthened".
- *Independence* or autonomy (the need to have control over one's environment and oneself). Brendtro *et al.* (2011:1) describe the Sioux culture's view on *independence* as follows: "Native teaching was designed to build respect and teach inner discipline. From earliest childhood, children were encouraged to make decisions, solve

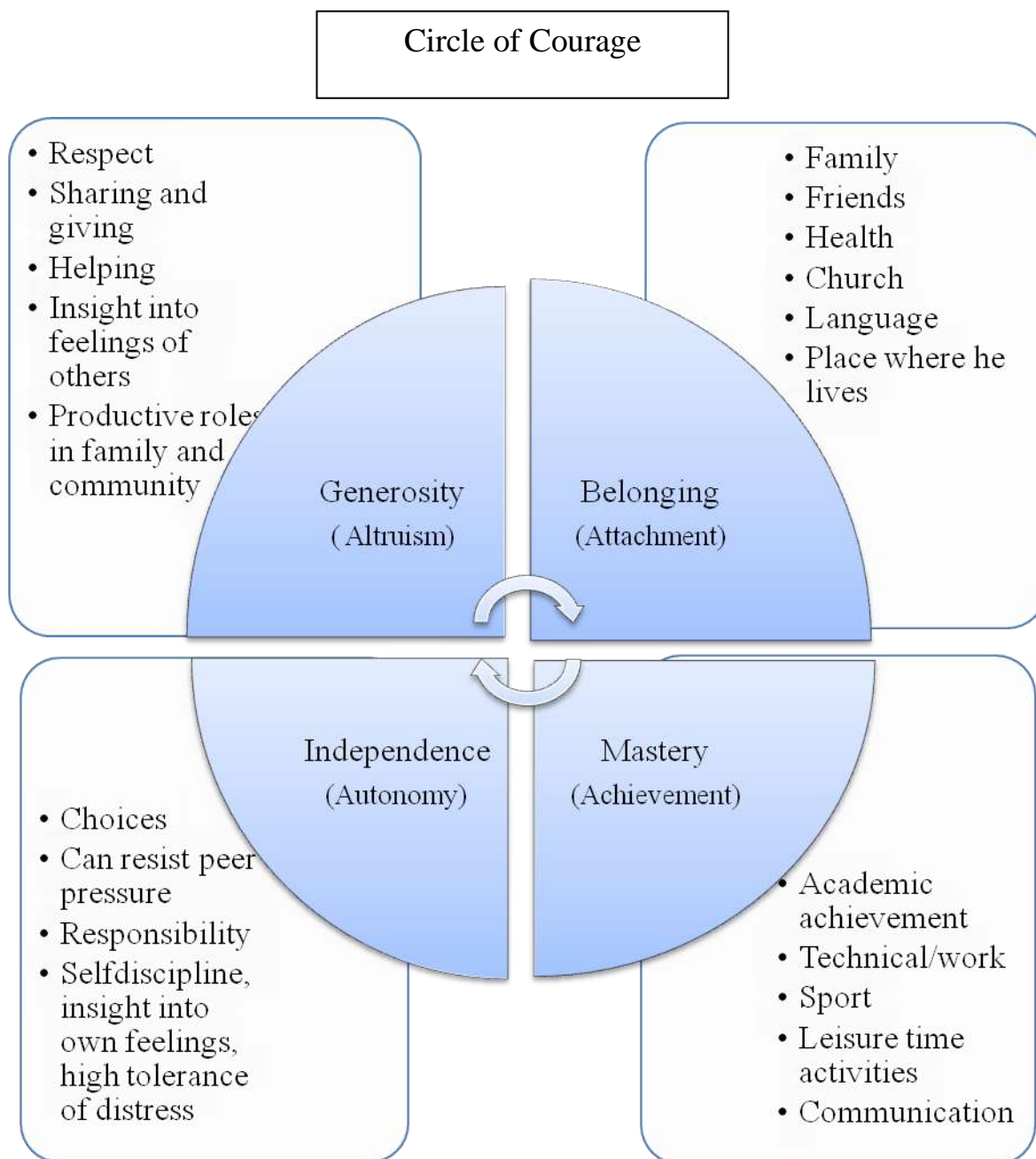
problems, and show personal responsibility. Adults modeled, nurtured, taught values, and gave feedback, but children were given abundant opportunities to make choices without coercion.”

- *Generosity* or altruism (the need to contribute to others in a spirit of generosity). “In helping others, youth create their own proof of worthiness: they make a positive contribution to another human life” (Brendtro *et al.*, 2011:1).

The Circle of Courage (model) was developed by Brendtro *et al.* (Brendtro & Du Toit, 2005: ix) and is based on universal human needs and answers to these needs. It is also described as the Resilience Code (Brendtro & Du Toit, 2005:43), as it provides resilience if these qualities depicted in the four quadrants (Figure 4.1) are developed. Brendtro and Du Toit (2005:44) further postulate, “Children whose physical and emotional needs are met show little high risk behaviour. But when these basic needs are blocked, all manner of difficulties follow.”

According to Brendtro and Du Toit (2005:44), the Search Institute found forty assets which lead to positive outcomes in youth development. Of these, twenty are internal strengths in the young person in the form of motivation, responsibility, interpersonal competence and achievement. The other twenty are external supports provided by the family, positive peer influence and a caring school climate. Youths with ten or fewer assets show an average of nine high risk behaviours while children with more than thirty assets show, on average, one type of risk-taking behaviour (Brendtro & Du Toit, 2005:45).

Beinart’s study (cited in Crawford & Walker, 2003:89) in English, Scottish and Welsh secondary schools found the following protective factors: strong bonds with the family, friends and teachers, healthy standards set by parents, teachers and community leaders, opportunities for involvement in families, schools and the community, social and learning skills to enable participation, recognition and praise for positive behaviour. These factors can be divided into the belonging, mastery, independence and generosity quadrants of the circle of courage.



**Figure 4.1 (based on Brendtro, Brokenleg & Van Bockern's (1990) Circle of Courage)**

In terms of the participants studied, the following table illustrates, from their dialogue, how unmet needs affected their behaviour.



**Table 4.2 Participants' unmet needs/behavioural manifestations**

CHAP- TER	PARTI- CIPANT	THEME	UNMET NEED	BEHAVIOUR
3.7.2	P2	Theme 1.ii	Father's love and attention ( <i>Belonging</i> )	Joined 26s and wanted to go to prison to "see for himself" what his father had experienced
	P3	Theme 1.iii	Love and care from grandparents after parents died ( <i>Belonging</i> )	Left home to live on the streets after he had been neglected by his grandparents, who abuse alcohol
	P4	Theme 1.ii	Father's love and attention ( <i>Belonging</i> )	Started showing abusive behaviour: threw objects, abused alcohol, tried to commit suicide
	P5	Theme 1.i	Parents' love and attention ( <i>Belonging</i> )	Rebellious behaviour from grade 4, lived on the street and used drugs after his father had said that he could not stay with him any longer

### ***Attachment theory***

Bowlby (2004) and Ainsworth in Brendtro & Du Toit (2005:57) were the first researchers who described the importance of attachment and the negative effects of poor attachment. Their viewpoints are emphasized by Cabe (2005:117) who also indicates the importance of attachment and describes the negative behaviour which results from poor, absent or distorted attachment. Recent research reported for the New Zealand Families Commission (Waldegrave & Waldegrave, 2009) which aims at making a difference to outcomes for New Zealand families clearly indicates the importance of children growing up in an environment of secure attachment with parents who model appropriate behaviour:

The research presented in this chapter demonstrates the critical role of parents and caregivers in mediating the interaction of the child with the environment, whether for good or ill. It is

contended that trauma in children leads to delayed or abnormal mind and brain development, which results in impaired intellectual, emotional and social functioning, whereas the active and loving engagement of the caregiver in the child's exploration of their environment will assist their development, even if earlier growth was damaged (Waldegrave & Waldegrave, 2009:5).

In the Circle of Courage, "Belonging" in the first quadrant (Figure 4.1) forms the basis from which the other three themes develop. The child learns to "trust" if there is healthy attachment (Louw & Louw, 2007:129). This forms a secure base from which he can develop psycho-socially (Erikson in Papalia *et al.*, 2008: 225-226). Ellis and Walsch in Joubert (2008:102) also assert that the beginnings of social commitment to others start forming through this initial bonding process. A poor relationship with the mother (or primary caregiver) leads to attachment disorders, identified by Ainsworth (1967; 1978) as *avoidant attachment* and *ambivalent (resistant) attachment* (Louw & Louw, 2007:130). Main and Solomon (1986) identified another type, namely *disorganized, disoriented attachment* (Louw & Louw, 2007:130; Papalia *et al.*, 2008: 225-226). Louw and Louw (2007:134) also emphasize the role of the father, saying that recent research has shown that babies develop a much stronger relationship with fathers than originally thought. Fathers are more spontaneous and their play includes more physical contact and stimulation, encouraging exploration and providing more excitement. They encourage curiosity, which stimulates cognitive and motor development. The role of the father should therefore not be underestimated and a warm and loving relationship between the mother and father promotes the development of both partners' attachment behaviours and particularly benefit fathers (Louw & Louw, 2007:134). Cabe (2005:177) emphasizes the importance of secure relationships when he asserts that:

Most mental health problems, except those that are clearly organic, are caused by a breakdown – a disconnection – in relationship: with self, with others, or with some power greater than ourselves. In the lives of clients, reconnection represents the avenue to recovery, but the losses themselves necessarily lead to an emotionally and psychologically barren state.

Cabe (2005:182) continues by explaining that adolescents with attachment disorders display behaviour which could be categorized as Conduct Disorder, Severe Solitary Aggressive Type Conduct Disorder, Oppositional Defiant Disorder and Attention Deficit Hyperactivity Disorder, when in fact this is an attachment disorder. Cabe (2005:182) therefore postulates that "for many years therapists may have been trying to treat the wrong things".

Bronfenbrenner (in Brendtro *et al.*, 1998:7) said that the gulf between young people and adults has reached such proportions and the community is so disorganized that it cannot meet children's basic human need to belong. This affirms Erikson's first stage of psycho-social development, indicating that "the baby develops a sense of whether the world is a good and a safe place" in order to develop hope (Papalia *et al.*, 2008:30). Bronfenbrenner outlines five propositions that describe how relationships developed at home and school work together for positive development (Paquette & Ryan, 2001:23-25).

Proposition 1: The child must have on-going, long-term mutual interaction with an adult (or adults) who have a stake in the development of the child. These interactions should be accompanied by a strong tie to the child that ideally is meant to last a lifetime. It is important for this attachment to be one of unconditional love and support. This person must believe that the child is "the best", and the child must know that the adult has this belief (microsystem).

Proposition 2: This strong tie and the pattern of interpersonal interaction it provides will help the child relate to features of his mesosystem. The skills and confidence encouraged by the initial relationships will increase the child's ability to effectively explore and grow with the help of outside activities.

Proposition 3: Attachments and interactions with other adults will help the child progress to more complex relationships with his primary adults. The child will gain affirmation from a third party relationship, and will bring those new skills to the primary relationship. Also, these secondary adults will give support to the primary adults and will help the child see the importance of the primary role (bidirectional influencing takes place).

Proposition 4: The relationships between the child and his primary adults will progress only with repeated two-way interchanges and mutual compromise. Children need these interchanges at home and at school or childcare; parents need these interchanges in their neighbourhoods and workplaces (mesosystem).

Proposition 5: The relationship between the child and adults in his life also require a public attitude of support and affirmation of the importance of these roles. Public policies should make available time and resources for these relationships to be nurtured. This includes the work of parents and teachers, but also the efforts of extended family, friends, coworkers, and neighbours.

When comparing the Circle of Courage with Erikson's theory of psycho-social development (2.4.1.3) (Papalia *et al.*, 2008:26, 29-30) similarities are found. These will be presented in Table 4.3.

**Table 4.3 Comparison of Erikson's stages of psycho-social development (Papalia *et al.*, 2008:30) and Circle of Courage (Brendro & du Toit, 2005:43)**

Age	Psycho-social stage	Virtue	Quadrant in Circle of Courage	People/society
Birth to 12-18 months	Trust versus Mistrust	Hope	Belonging is developed through opportunities to build trusting bonds of human attachment	Mother and father
18 months - 3 years	Autonomy versus Shame and Doubt	Will	Beginning of Independence	Parents and Siblings
3-6 years	Initiative versus Guilt	Purpose	Beginning of Mastery (requires opportunities to solve problems creatively)	Wider family circle, neighbourhood
6 years – puberty	Industry versus Inferiority	Skill	Growing Independence (fostered by opportunities to grow in responsibility and autonomy)  Mastery (to meet goals for Achievement) Beginning of Generosity	School, teachers, close friends
Adolescence	Identity versus Identity Confusion	Fidelity	Independence, Mastery, Generosity	Widening circle of contacts and peers are

				important
Early adulthood	Intimacy versus Isolation	Love	Belonging, Independence, Mastery  Generosity (is shown through opportunities to show kindness and sharing)	Owning a family, earning a living, mastering parenting skills and job skills

(The next two stages of middle and late adulthood are omitted as they are not applicable to the study.)

In Gestalt terms adolescence is called the stage of disembedding as the adolescent disembeds him self from the child-parent field and starts creating a wider field of contact in which peers are very important (Toman & Bauer, 2005:182). However, the adolescent still needs the security of knowing that he can return to his parents to restore his balance and find affirmation for this important developmental stage. The ability to make good and responsible choices, which is one of the important aspects of independence, is made possible by abstract reasoning and weighing up pros and cons in social situations. Abstract reasoning develops in the so-called formal operant phase of cognitive development of Piaget (1962) (Louw & Edwards, 1998:464-465; Papalia *et al.*, 2008:33-34) (2.4.1.2). It develops in the adolescent years if both nature and nurture factors are favorable. According to Papalia *et al.* (2008:445), the adolescent years show an increase in the speed of information processing and many adolescents are capable of abstract reasoning and sophisticated moral judgments and can plan more realistically for the future. If the mental capacity or level of cognitive development has not been reached and previous exposure to learning situations is lacking, this will lead to difficulties in attaining a healthy independence. There is also a form of unhealthy or unnatural independence, an example of which is displayed by street children, who function independently but in a maladapted way. Parker Lewis (1998:65) names this an exaggerated sense of independence.

**In summary**, it can be stated that the relationships between the participants and their primary caregivers were all of a poor quality, as indicated by the extensive theme 1 (3.7.2 .i-x; Figure

3). When taking Cabe's (2005:172) statement into account, it is the researcher's opinion that the participants' poor relationships with their primary caregivers (theme 1 (3.7.2 i; ii; iii; iv) might be the underlying cause of the behaviour disturbances shown by many of the adolescents at the Special Youth Centre. They lacked the basic attachment and nurture which forms the basis of hope and *Belonging*. Favorable conditions for the healthy development of cognitive skills together with nature factors are crucial for the development of abstract thinking, reasoning skills and moral development. Hannaford (2005:183) asserted, "The importance of caregiver modeling cannot be overstated. Putting more attention on coherent, supportive early family relationships may reap more benefits with SOSOH [stressed out survival oriented human] people than anything else." She continues by saying, "Good learning and problem solving require active involvement and persistence by the model caregivers."

These abilities form the basis of *Mastery* and the ability to perform the usual tasks or occupations of the adolescent, leading to a feeling of competence. The adolescents in the Special Youth Centre's mastery of communication, life skills, academic work and the normal occupation of adolescence are poor. This causes them to try and achieve mastery in other, deviant ways, such as mastering the art of robbery, vehicle theft, housebreaking and theft and the making of tattoos (theme 4 in 3.7.5). According to the Western Cape Status of the Youth Report (2008:107), "marginalised youth find 'respect' and believe that status is gained by carrying a firearm and that self-confidence is improved by being feared". They need to experience a feeling of self-worth connected to healthy occupation.

*Independence* implies that the adolescent "disembeds" himself from the closeness of the family circle and turns towards a growing circle of peers for emotional support to gain the skills necessary for independent life as an adult. However, the exaggerated independence of the street children and many of the youth at risk is a distorted form of independence. This is illustrated by the fact that two of the participants who had lived on the streets for a while came into conflict with the law. The others became involved in street and Number Gangs, where they started depending on fellow gang members for the belonging and security which should have been provided by their parents at home: "The gang replaces the traditional role of the family unit" (Western Cape Status of the Youth Report, 2008:107).

The above-mentioned impeded the participants’ development of *Generosity*, which develops after the egocentric stage of early childhood (although this should be nurtured in the home environment from early on). It will be difficult for the adolescent to show generosity to someone else if it was not modeled at home and if the adolescent’s basic needs of attachment and belonging had not been met.

According to Brendtro *et al.* (1998:44), fostering self-esteem should be the primary goal in socializing both normal children and youth at risk. This is endorsed by Pinnock (1997a:18) and could be compared to Oaklander’s “sense of self” (Blom, 2006:102; Oaklander, 2006:36). Coopersmith (in Brendtro & Du Toit, 2005:44) distinguished four antecedents of self-esteem, which are depicted in the table below in combination with the Circle of Courage.

**Table 4.4 The Circle of Courage**

**Indicators of self- esteem**

(Brendtro & Du Toit, 2005:43).

(Coopersmith in Brendtro & Du Toit, 2005:44)

<p><b>Belonging (Attachment)</b> is developed through opportunities to build trusting bonds of human relationships</p>	<p><b>Significance:</b> “I am important to someone.”</p>
<p><b>Mastery (Achievement)</b> requires opportunities to solve problems creatively and meet goals for achievement</p>	<p><b>Competence:</b> “I am able to solve problems.”</p>
<p><b>Independence (Autonomy)</b> is fostered by opportunities to grow in responsibility and autonomy</p>	<p><b>Power:</b> “I am in charge of my life.”</p>
<p><b>Generosity (Altruism)</b> is demonstrated through opportunities to show concern in acts of kindness and altruism</p>	<p><b>Virtue:</b> “I am considerate to others.”</p>

#### 4.2.5 Indicators of a distorted Circle of Courage (Brendtro et al., 2011:2-6)

When no opportunities for the development of the adolescent's strengths are provided, a distorted Circle of Courage develops (Figure 4.2). The four themes that were extracted from the dialogue of the participants (3.7.1) are depicted in the "distorted Circle of Courage" (Figure 4.4) to provide a visual cue of the impact they have in the lives of the adolescents. The extracted themes included the emotional responses of the participants with regard to relationships, familial trauma, other trauma and tattoos (feelings before and after making the tattoos as well as the consequences of having tattoos on the body). These themes can be slotted into the Circle of Courage model in the following way:

In the quadrant of **BELONGING** (which also includes health and wellbeing):

Theme 1: *Poor relationships*, which are indicative of broken bonds of belonging (3.7.2 i-ix).

Theme 2: *Familial trauma*, which underlines the broken bonds even further (3.7.3 i-v).

Theme 3: *Other trauma*, which denotes an aberrant lifestyle which is prone to trauma and depicts the adolescent's poor belonging in his community (3.7.4 i-iii).

Theme 4 ii: *Tattoos*, which depict *belonging* to the gang (3.7.5 ii).

Theme 4.ix: *Tattoos as an "embodied sense" of identity* (3.7.5 ix).

In the quadrant of **MASTERY**:

Theme 4.ii: *Tattoos as proof of mastery* (3.7.5.ii). Tattoos were made by one of the participants as proof of mastery of criminal activities (and acts that proved him worthy of belonging to the 26s Gang).



## Distorted Circle of Courage

Adapted from Brendtro *et al.* (1990:47-50)

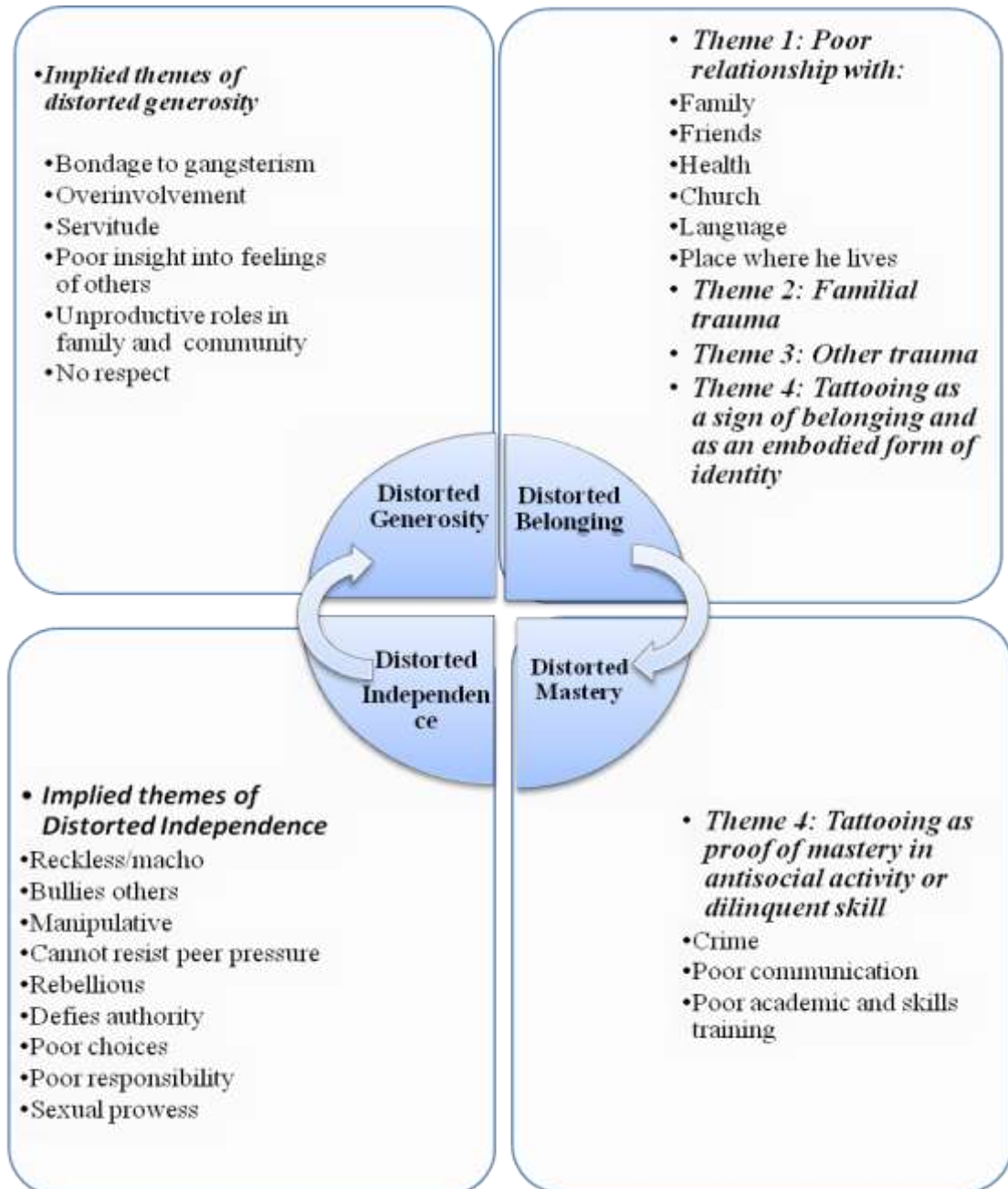


Figure 4.2. Themes in relation to the Distorted Circle of Courage

### *Tattoos and the reason for making them*

Since the 1960s tattoos have become popular with mainstream society and are regarded as a form of art and the wearer considers them in the same way as he would jewelry. They are therefore acquired for different reasons than the **gang tattoos** depicted on the body maps of the participants. Goldberg (2001: no page number indicated) informs the reader that tattoos are part of history, and mankind's way of identifying slaves and criminals. The Romans and Japanese punished criminals by tattooing them. In the third century, in the Mediterranean region, they went so far as branding symbols indicating the crime a criminal had committed on his or her forehead. It can therefore be said that society imposed this as a way of identifying the tattooed as a criminal. Ironically, today, people tattoo these stigmatizing marks on their bodies as a sign of rebellion against society. Goldberg (2001) asserts:

... being an outlaw can be a source of pride as well as shame. Gang members in particular take pride in branding themselves as outside of the boundaries of conventional society. Until recently, tattooing was restricted to stigmatized members of society, including gang members, carnival workers and prisoners – categories that often overlapped. It is significant, however, that tattoos were not imposed on these groups, but chosen by them as a means of **self-identification** and often a symbol of **belonging**.

Goldberg (2010:1) is of the opinion that several people use their tattoos to augment **sub-cultural identities**, of whom the punks, bikers (motorcyclists) and current popular bands and artists, such as “Die Antwoord” (Jansen & Mohamed, 2011:03), are examples. They are using their tattoos to express shared values and norms and also to consolidate personal experience.

According to Armstrong (1998:14), “tattooing is for some young women an outward expression of the internal process of identity building [...] a tattoo makes them feel good – it makes them feel special, different”. Tattoos can therefore be seen as an outward expression of a person's **identity**.

The tattoo also becomes an important way to represent and immortalize one's life experiences. In this way the tattoo is utilized as a **narrative performance of identity** (Langellier in Nichols & Foster, 2005:17). This is illustrated by the old-time convict Moenimors JD, who explained that some of his tattoos have personal meaning, e.g. his tattooed moustache and the pictures of his girls on his body (Jansen & Mohamed, 2011:03).

For gangs, the use of tattoos as a means of **group identification** can be a matter of life or death. This is especially pertinent in the case of gangs in jails, a world in which tattoos can be particularly important. Upon being sent to prison, many people who were not previously members of gangs quickly find that their survival “on the inside” depends on their membership in a prison gang. “Certain tattoos inspire fear and respect and give the wearer an abrasive edge,” says Douglas Kent Hall in his book *Prison Tattoos*, as reported by Goldberg (2001). In prison, that power becomes the reason for acquiring tattoos.

**Belonging:** Tattoos also function as a visible sign of gang members’ bond with one another. According to Bezuidenhout (in Maritz, 2010:13), people who join gangs do it mainly to fulfill the need to belong. Gangs provide rules, regulations and structure, which makes the members feel safe. In terms of **belonging**, Goldberg (2001) states that in the case of gang membership:

Nothing symbolizes gang members’ commitment to their gangs more forcefully than the gang tattoo these symbols proclaim the individual’s allegiance to the group in a way that is both permanent and deeply personal – being written on the body itself.

According to Goldberg (2001), tattoos are a way of both asserting membership in the gang and “flaunting their lack of membership in straight society”. For this reason, street gang members purposefully make tattoos on their hands and faces, which bar them from being a part of normal society. The larger and more prominent the tattoo, the harder it is to hide and the more impressive it is to other gang members. It is for the same reason that some of the most common gang tattoos are often found on the most visible parts of the body: the hands and the face (Goldberg, 2001). The social impact of this practice made many professional tattooists uneasy about providing such visible tattoos. Goldberg (2001) asserts that a hand tattoo complicates a person’s life. Such tattoos cannot be removed by ordinary surgical methods like others. The most common tattoo among gangsters of all nationalities is one that denotes the gang that they belong to, for example the numbers 26 or 28. This is seen as the mark of lifelong membership. Moenimors JD’s other tattoos indicate his membership as well as his rank in the 28s, while the dollar sign on his shoulder denotes that he was an “Ugly American” on the “outside”, before he went to prison and joined the 28s (Jansen & Mohamed, 2011:03). The gang ethos of “blood in, blood out” – the idea that the prospective member must kill someone as the price of admission to the gang and cannot leave except by dying himself – is embodied in the tattoo as a sign of permanent belonging to the gang. In

some gangs the gang tattoo must be earned by completing a serious mission or hit for the gang (Goldberg, 2001).

The name of the gang is often tattooed onto the body, although it can be disguised slightly by giving it an assigned number and/or writing it in Roman script (as the 26s and 28s do). In addition to advertising gang membership, tattoos can provide other details about the bearer, including his rank in the gang and the number of “hits” or other services performed on the gang’s behalf. The side of the body on which the tattoo appears also carries significance (Parker Lewis, 2006:69). Tattoos can also provide more personal details about gang members’ lives, such as memorials to deceased loved ones. A common tattoo among gang members is a small teardrop below the eye. Although some take this symbol to mean that the bearer had killed someone, others use it to show that someone close to the bearer had died, especially if this occurred while the tattooed individual was incarcerated (Goldberg, 2001).

As prison authorities are trying to prevent inmates from making tattoos, the latter have to strip when they enter prison and their tattoos are recorded. When they are caught making tattoos, they face severe penalties. Unfortunately, this has had the effect of giving the tattoo higher status, even causing people on the “outside” mimicking the crude way that tattoos are made inside the prison (Goldberg, 2001). These crude prison and gang tattoos are made by melting plastic and even rubber, e.g. the knob on the lid of a rubbish bin or protectors on chair feet, and mixing these with water or other solvents. The insides of ballpoint pens are removed and the ink is used. According to Goldberg (2001), in America, there are now many popular community initiatives to provide free or low-cost tattoo removal to former gang members. This plan is helping youth in rehabilitation programmes to have their gang tattoos removed, and it is evident that they are more likely to stay out of the gangs and off drugs. A survey conducted by the Bandera Police Department found that 95 percent of former gang members who had submitted to having their gang tattoos removed “are now drug-free and employed” (Goldberg, 2001).

**Summary:** The researcher found that the same indicators discussed above hold true for the participants, namely that they had made tattoos as signs of mastery, to indicate belonging and as signs of their personal identification as well as identification with the gang. After making the tattoos, they regret them as they realize that they will have severe consequences for them in the community and also in their own gang as well as in other gangs, as they will have to

perform according to what their tattoos are “saying”. In this regard, the old inmate Moeniemors JD warns Ninja from the group “Die Antwoord” that he will have to answer to the gang members if he enters their territory with the tattoos that he made on his body. According to Moeniemors JD, the prison authorities in South Africa are also very strict about making tattoos and also record inmates’ tattoos in order to keep an eye on them (Jansen & Mohamed, 2011:03). A converted gangster with whom the researcher had an interview also asserted that the authorities go as far as sending a dangerous gang leader to another prison when they receive him, strip him, “read” his tattoos and realize that his presence in the jail could cause trouble (Anonomous, 2011). Unfortunately, services and programmes for the removal of tattoos have not been found in the area where the Centre is situated. There is a dire need for such services to enable young people to break free from gang membership and rejoin mainstream society.

### ***Street children***

Street children gain their distorted form of independence through necessity, as a means of survival. Two of the participants had spent time on the streets and the youngest learners at the Centre usually had spent most of their time on the streets as “children on the street”. After both P4’s parents had died and his grandparents neglected him due to their alcohol abuse, he moved to the street, where he lived till he was taken in by his friend’s parent. P5 was sent to his father in or near Durban, who chased him away even though he knew that his mother and other family are in the Western Cape. He spent time on the street until he was arrested for criminal behaviour. Parker Lewis (1998:17) states that street children’s decision to forfeit any form of adult control comes at a price: “Unfortunately, when a child says good-bye to adult authority he also turns his back on childhood. Life can never be quite the same again.” The United Nations defines street children as “boys and girls for whom the street has become their home and/or source of livelihood and who are inadequately protected or supervised by responsible adults” (Toybox Charity, 2009:1). A distinction is also made between “children on the street”, and children of the street. The former are:

[...] those children who still sleep at home often or occasionally. They venture out to the streets to make some money and are in danger of becoming more and more engrossed in the street culture. They have not abandoned their families or been abandoned by their families. They are working children. [...] Home circumstances may be extremely difficult.

Children of the street are those children who have abandoned their homes and live on the street permanently (Matsemela & Van der Merwe, 1996:158; Maree, 2008:66). A report in the PE Community News (Street children, 2010) aptly sums up the presence of children in the streets of the city:

Many children come from structurally disadvantaged homes where poor living conditions result in many difficulties. Parental loss through death or abandonment and/or family conflict or shortage of housing may force children onto the streets. In many cases the move to street life is an adaptive response to the stress and severe oppression experienced by families living in a society of conflict. Thus, the move to the streets often represents a desire to take control of one's life and displace old values and conditions with new ones. Pull factors include: excitement and glamour of living in great cities; hope of raising own living standard; and financial security and independence. Push factors include: natural population increase above carrying capacity; international trend of urbanization; cost of living; search for additional income; child abandonment and neglect; family size; and disintegration of the traditional family.

Street children have to satisfy their needs in devious ways such as begging ("skarrel"), pinching, being used by drug dealers and performing sexual favours for adults (male and female) (Parker Lewis, 1998:78; Maree, 2008:66; Toybox Charity, 2009:1). It can therefore be stated that not only their *independence*, but also the area of *mastery* is affected, as they do not have the opportunity to gain the skills taught at school in acquiring the ability to read, write and do arithmetic. Other life skills which are acquired in the middle childhood years, such as moral values, spiritual development, social acceptable standards of behaviour, communication skills and the opportunity to partake in sport and healthy ways of spending leisure time, are all missed.

Street children also tend to be egocentric and it impacts negatively on the development of *generosity*. The ability to be generous towards others is difficult to obtain if a child/adolescent is struggling to meet his own basic physiological needs and also when this ability was not modeled by the parenting figures. Erikson (1902-1994) in Papalia, *et al.* (2008:29) postulates that the virtue of the stage of *identity versus role confusion* is fidelity. This is seriously compromised by the lifestyle followed by youngsters who abuse drugs. Sexual permissive behaviour often accompanies their lowered cognitive and moral reasoning abilities while under the influence of alcohol and drugs. The solvents that they use have

serious health implications for them. After the adolescent has completed the task of identity formation, the following task is intimacy, which implies that he has to be able to make a commitment towards others (also implying generosity).

### *The Number Gangs*

Three of the five participants indicated allegiance to the 26s and 28s Number Gangs through the mapping of their tattoos and lesions. Full-bodied photographs of the body maps could not be placed as this would pose a threat to the anonymity of participants. The researcher could therefore only include the most general tattoos and fragments of body maps of tattooed limbs in order to prevent recognition (Figures 4.3 and 4.4). The other more personal tattoos, indicating identity as well as belonging to smaller gangs, could not be placed out of consideration for anonymity.

Parker Lewis (2006: backpage) describes the Number Gangs as follows:

The Number Gangs in South Africa are living legends and unique when compared with other prison gangs across the globe. They have created their own culture based on an idiosyncratic history, hierarchical structure, invisible garments, laws and punishment rituals and a language that requires the indoctrinated to speak in metaphors and symbols. In prison the gang members dedicate their lives to a dangerous, fantastic mythology that permits the assertion of power through vicious acts of retribution.

Literature enlightening this phenomenon was studied and will be applied in conjunction with the presentation of the themes extracted from the empirical data.

The following figures (4.3 and 4.4) illustrate tattoos as indicated on the body maps of the participants in the study:

### 26s Tattoos

The 26s tattoos often depict a stack of notes, a crown or the dollar sign, as money is important to them. The number 26, or the date on which the 26s Gang was allegedly founded, is also written in Roman script. Sunrise or “sontop” – the sun with rays pointing upwards – is their “sign”.

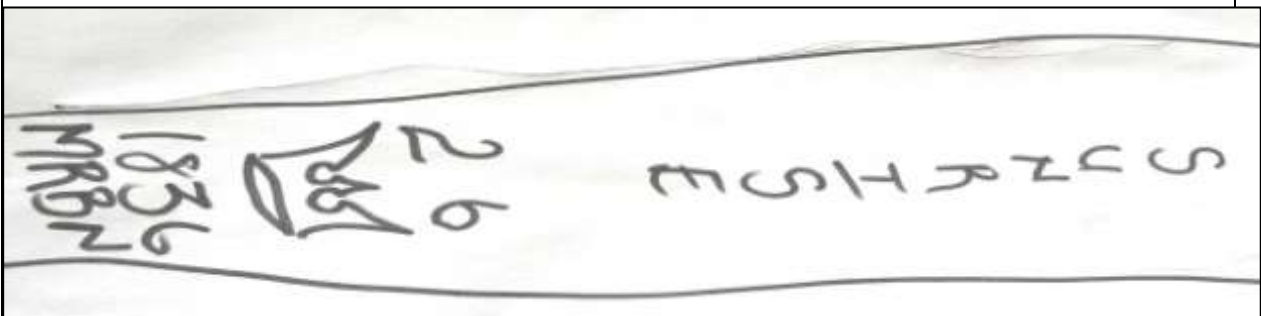
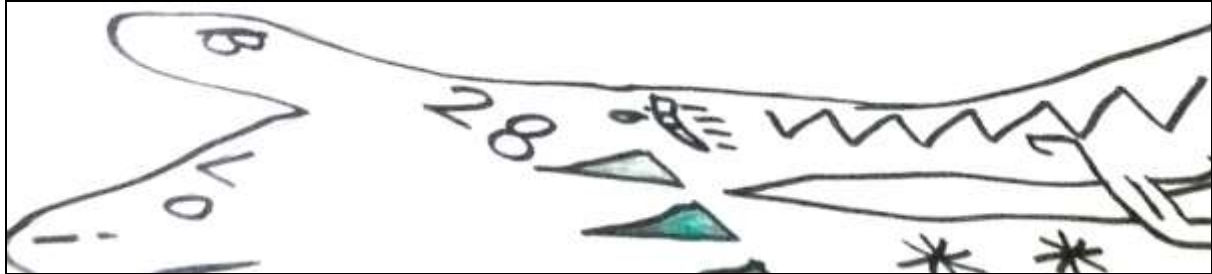


Figure 4.3 Typical 26's Gang tattoos



## 28's Tattoos

Top: a 28 on the wrist with a setting sun and “blood” across the fingers. Very large and prominent knives on the 28s members’ limbs. Bottom left: a cross with the setting sun or “sontaf”, meaning working after the sun has set.



The spelling mistakes made on the body during tattooing were “erased” and redone. “Mum and Dad” is an abbreviation for “men use men day after day”. The hand sign for the 28s is three raised fingers. (For the 27s, the thumb and index finger are raised, and for the 26s the thumb is raised). Even when at ease, the fingers are always ready for a salute (Parker Lewis, 2006:67).

**Figure 4.4 Typical 28s Gang tattoos**

The four themes that were extracted from the participants’ dialogue are depicted on the distorted Circle of Courage in the quadrants of Belonging and Mastery (Brendtro *et al.*, 2011:3-4). One of the participants openly communicated his poor choices (P2: 3.7.v). This was not picked up as a strong enough theme in the dialogue of other participants. However,

the poor choices in addition to other themes came to the fore during the literature study. These **implied themes** which affect the quadrants of Independence and Generosity became clear to the researcher after reading literature on street children (*Also God's Children* by Parker Lewis, 1998), street gangs and their influence in the Western Cape (*Gangs, Rituals and Rites of Passage* by Pinnock, 1997), Johnny Steinberg's *Crime Wave; The South African Underworld and its Foes* (2001), Stephen Jensen's *Gangs, Politics & Dignity in Cape Town* (2008) and *The Choice for Junior Readers* by Cilliers (2007). Research on Number Gangs included Steinberg's *Nongoloza's Children* (2004) and *The Prison Speaks* (2003) and *God's Gangsters?* (2006) by Parker Lewis. This sketched a clearer picture of the world or field of the adolescents who are referred to the Centre. The influence that the gang culture exerts on them and also on the communities in which they grew up was emphasized in the literature. When working with the adolescent in a setting removed from the environment in which they live, it is difficult to imagine what their field circumstances are like. They also prefer not to speak about this.

The information gained through this literature control gave the researcher an idea of how difficult it is for adolescents not to join a gang when they are living in a community where different street gangs all have their own territory that they claim and defend. This boils down to either staying inside the house or joining a gang. They have to cross territory staked out by one gang or another, and in order to be able to go to the park or hang out on the corner with their peers, they have to belong to the gang claiming that area. Jensen (2008:79) describes this as follows: "Being part of a group was often a simple imperative for navigating the streets of the townships." A man in his thirties recounted his childhood years as follows:

"We knew from an early age that we were always fighting for space with another group from another block of flats: whether it was for space to play in the park or to hang out at the shop or carve out a particular corner where we go to play soccer. In later years I could see why gangsterism was important because we were socializing from an early age to operate in groups, and those groups became gangs" (Jensen, 2008:79).

These **implied themes** are reflected in the quadrants of Independence and Generosity on the distorted Circle of Courage Figure 4.2, (p 129) as well as in Table 4.5. As they were not derived purely from the participants' dialogue, they are mentioned but not discussed in detail.

**Table 4.5 Themes in the area of *Distorted Independence***

Reckless/macho	P2 had been involved in dangerous gang fights.
Bullies others and criminal victimization of others	Two of the participants had been involved when a group of adolescents sodomized a fellow learner at the Centre and criminal charges were laid. Two of the participants were also involved in victimizing other learners in gang-related “power play” of the 28s.
Manipulative	P5 manipulates with crying as well as telling lies to get his way, and he often makes promises to his mother although he fails to keep them.
Cannot resist peer pressure	P1 and P3 were involved in housebreaking with older friends and P4 was involved in making tattoos and abusing alcohol and dagga, as well as criminal activities when he has contact with his “group”. P5 used drugs again after he had decided to abstain, in order to please his friends.
Rebellious	(P1, P2, P4 and P5): Their probation reports convey that they could not be controlled at home, nor P3 while he had been living on the street.
Defies authority	All the participants are at the Centre for violation of the law and authority. One of the participants was known to his friends as a hit-man. They all defied the authority of their parenting figures.
Poor choices	All the participants partook in alcohol or drug abuse or both, made tattoos and had been involved in criminal activities.
Poor responsibility	Only P2 took full responsibility for his choices; however, he still continued with irresponsible behaviour.
Sexual prowess	P2 had been involved in more than one incident where girls were involved to some degree. He sustained serious injuries as

	a result of his involvement, but he laughed about this, almost as though it emphasized his status in his experiential field.
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**Table 4.6 Themes in the area of Distorted Generosity**

Bondage to gangsterism	P1 and P2 openly admitted their allegiance to gangs, while P5 did not acknowledge allegiance, but carries the tattoos of a Number Gang. Although both P1 and P2 voiced that they were sorry that they had become involved, both said that it was not easy to break free. P2 openly admitted that he did not know whether he was ready to let go and leave his gang.
Over-involvement with peers and gangs	The participants all turned to either peers or gangs for company and followed their example in using substances, making tattoos and becoming involved in criminal activities.
Servitude – a willingness to follow instructions, however anti-social or detrimental to self	All the participants, with the exception of P3, showed tendencies of this. At the Centre, P1 and P5 were involved in incidences where other learners were victimized by the 28s. P4 did not want to name his associates, but had been involved in serious crime during the holidays as a result of his association with a gang.
Poor insight into feelings of others	Two of the participants had been involved in sodomizing a fellow learner. House-breaking and theft is common.  P2: Gang fights and not being heedful to his mother's feelings.
Unproductive roles in family and community	It became clear from the dialogue that four of the participants did not have roles at home which could be described as productive or satisfying. P4 had the role of an overburdened child; he cared for his blind grandfather, his mother when she was physically hurt and his younger brother. These circumstances did not make him feel good.

<p>An absence of respect</p>	<p>A slang word for the genitals of women are used in the form of a swear word. This is allegedly used as part of the 28s' greeting (Parker Lewis, 2006), and this practice erodes the respect that the adolescents have for themselves as well as for women in general. Absence of respect also leads to dangerous sexual practices. Despite information sessions during which the facts about HIV and Aids are given to them, this seemingly does not deter them from continuing with sexual practices which can compromise their own as well as their partners' health.</p> <p>Almost all criminal acts are detrimental to other people and show disrespect for their bodies or their property.</p>
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**Summary:** The absence of respect for people is one of the main characteristics displayed by the adolescents at the Centre. The researcher is of the opinion that the strong bonds of attachment/belonging or having satisfying human relationships and having respect modeled to oneself would inspire having respect for other people and their belongings. The absence of spiritual development is another characteristic of adolescents with poor attachment and belonging. According to the probation officer's report as well as the participants, they are unwilling to go to church with their mother or grandmother since they became involved with drugs and unlawful behaviour. Parker Lewis' (2006:23) states that belonging to a Number Gang is like a cult. It becomes understandable that for those participants belonging to such a gang it would be difficult to have a spiritual relationship and believe anything other than their indoctrinated (unholy) belief. The Number Gangs have a "Big Book" which is retold orally, and a litany which is learned off by heart (Parker Lewis, 2006:27). In this regard Pinnock (1997a:11) states:

Some gangs also have their own imaginary "book of knowledge" similar to prison gangs. Knowledge of this "book" is a part of the gangs' entrance ritual and defines the way youths are supposed to conduct their lives once a part of the gang:

"In the book of knowledge we don't run away from each other if we are in trouble, we have to stay together. We have to die together. If not, others will kill you for not helping your brother.

No one tells you to become an American, you do it yourself and if so you must die with them.”

The evil practices of the Number Gangs are in total contrast with the Christian and Islamic religions. It increases these adolescents' propensity of increasingly getting involved in unlawfulness and disregard for themselves and other people. It is postulated that it would be more difficult for adolescents who do not have a healthy relationship with a father figure to believe and trust in a higher being depicted as a caring father figure.

### **Needs not specified by the Circle of Courage**

**Security needs:** Maslow was of the opinion that security needs are present “with pervasive intensity” in virtually all our feelings. This was also postulated by Max Neef (1991:52). One of the basic human needs, is the need of protection. People want to be secure, and this need helps in attaining order, safety, stability, shelter and freedom from fear and anxiety. Age plays an important role in how needs are defined. A young child's security is attained when his parents are predictable and consistent (Jordaan & Jordaan, 2005:598), whereas unpredictable behaviour by parents who are addicted to drugs or alcohol creates feelings of anxiety and fear. Hannaford postulates that unexpressed emotions such as fear and anger or sadness at an injustice remain unresolved when they are not expressed. These emotions are then “relegated” to the sympathetic nervous system, where they build up as fear and can later erupt as anger and violence or manifest internally as disease. “In either case, it leads to the stress response, affecting both health as well as the learning process” (Hannaford, 2005:187).

**Summary:** According to the hierarchical order of Maslow's theory, the participants would all be “stuck” in the hierarchy of security needs as they have all experienced times when their security had been compromised. P4 seems especially vulnerable as his parents both abuse alcohol and his father physically abuses his mother and had given P4 a blow. In addition, the dwelling they live in does not have windows to protect them from the elements. Max-Neef (1991:22) postulates that violence directly upsets the need for protection, thus inducing intense anxiety. Isolation, marginalization and political exile destroy people's identity and break up families, destroying natural affection and creating guilt feelings which are often accompanied by suicidal fantasies or attempts. If the same applies to the adolescents' “exile and marginalization” when they are referred to the Special Youth Centre, which is often far from home, this might explain some of their destroyed affection and attempts at suicide

which had occurred in a few cases. This correlates with the findings that stress causes people to function on brain stem level in a fight and flight mode, which leads to erratic emotional behaviour and less rational behaviour, which also affect their ability to learn (Hannaford, 2005:187).

### **The role of society in providing needs**

Erikson was the first to include the role of the society in which the child is growing up in his theory of psycho-social development (as depicted in Table 4.3). The role of the community is further emphasized by Bronfenbrenner's bioecological theory (Bronfenbrenner & Ceci, 1994). Bronfenbrenner divided the community into systems of support for the developing child, from the family (micro-system) to the community and cultural influence (macro-system). Insufficient structures for providing in the developmental needs of pre-school children are only one of the areas of deprivation which impacts negatively on the development of disadvantaged children. The researcher is of the opinion that the participants were all lacking in support from their communities, as they did not receive support in times of loss or when they experienced incidences of violence within their families. In addition, they did not receive any support from their schools to assess where their vulnerability lay, causing them to leave school at an early age.

#### **4.2.6 Max-Neef's human scale development (1991)**

This theory proposes a new/different way of looking at human needs. Max-Neef (1991) identified the basic human needs as: understanding, identity, spirituality, rest and idleness, subsistence, freedom, creativity, participation, protection and affection. Max-Neef (1991:31) postulated that "needs not only indicate deprivations but also, and at the same time, individual and collective human potential". He proposes that factors which are ordinarily seen as needs can be satisfiers of needs. Max-Neef (1991:31) classifies needs according to the existential categories of Being, Having, Doing and Interacting and, on the other hand, according to the axiological categories of Subsistence, Protection, Affection, Understanding, Participation, Idleness, Creation, Identity and Freedom. Some of the satisfiers could supply in more than only one need at a time. Care should be taken when programmes are developed by the state in order to provide the best possible suppliers to satisfy the needs. Max-Neef

(1991:31-37) identified five types of satisfiers, namely: (a) violators or destroyers, (b) pseudo-satisfiers, (c) inhibiting satisfiers, (d) singular satisfiers and (e) synergic satisfiers.

**Destroyers.** Max-Neef, (1991:31) described violators or destroyers as:

“ elements of a paradoxical nature. When applied with the intention of satisfying a given need, they annihilate the possibility of its satisfaction over time. In addition, they also lead to the inadequate satisfaction of other needs. These paradoxical satisfiers seem to be related particularly to the need for protection. These violators are invariably imposed on people, and authoritarianism is an example of this category.

When adolescents spend time in prison, this paradoxical effect comes into play as their need for protection causes them to succumb to the false promises of safety by the Number Gangs, as spelled out by P1 (3.7.4.i).

It is also important to note that the human brain responds to stress in a specific way by secreting stress hormones, which keeps the individual in a state of readiness for fight or flight. This is “hardwiring” or inborn mechanisms which aims at preserving life. The stress hormones which are released also have the effect of cutting out the higher level of cortical control in order for the individual to be in a state of heightened responsiveness. The result is functioning at brain stem level, and the limbic system then causes heightened emotional responses in favour of rational higher level control (Hannaford, 2005:180). It can therefore be postulated that when young adolescents are incarcerated in prison or locked up in places of secure care, where they feel unsafe or threatened, they will be functioning at brain stem level, with resulting emotional reactions instead of higher, cortical control. As previously seen (3.4), joining the Number Gangs for protection and making tattoos would follow under those circumstances. This way of satisfying their need for protection is unsuccessful, as they had chosen a destroyer or violator. The researcher is of the opinion that joining the Number Gangs in an attempt to satisfy the need for protection, understanding and participation, is an example of a destroyer. This links with the view of Parker Lewis (2006:26):

Although it must be accepted that the gangs offer their members status and some protection from ad hoc physical violence and sexual exploitation, The Number can best be envisaged as a living entity and its members little more than worker ants who are there to sustain it and keep it alive. They are discouraged from asking awkward questions. They cannot think for



themselves. Their application of logic is not encouraged. Their first duty is always to the gang and once they become members, their every act and thought is monitored.

**Pseudo-satisfiers.** Pseudo-satisfiers are elements that generate a false sense of satisfaction of a given need. They are not as aggressive as the destroyers, but they may on occasion annul the possibility of satisfying the need they were originally aimed at fulfilling. They are generally induced through propaganda, advertising or other means of persuasion. Examples named are prostitution, which attempts to satisfy the need for affection, and fashions and fads which aims at providing identity (Max-Neef, 1991:31).

In terms of the participants: Both destroyers as well as pseudo satisfiers are present to some degree in futile attempts of learners at the Special Youth Centre at satisfying needs. The driving force behind one of the forms of sexual practices by these adolescents might be an unfulfilled need for “comfort and pleasure” (Lovell, 2002:2) as this occurs without external force or coercion and is more prevalent in the young adolescents who spent time on the streets when younger. It has also come to the researcher’s attention that when making a drawing of a person as part of the initial occupational therapy screening, many learners draw the emblem of a well-named clothing brand on the person. These drawings are often of an immature nature, omitting body parts and other details, but nonetheless sporting this clothing brand. It appears as though the adolescents at the Centre perceive brand-named clothing or “fashion fads” as a supplier of their need for identity.

The most common form of pseudo-satisfiers is the promise of wealth and power made by the gangs as it is made “through propaganda and other means of persuasion”. This robs the adolescent of partaking in normal or age appropriate occupations which leads to growth and attainment of the psycho-social goal of identity formation.

The tattoos made as a part of the gang culture “pseudo”-satisfy the need for identity (3.7.5.ix), mastery (3.7.5.ii) and belonging (3.7.5.ii). This comes at a price, as they prevent true satisfaction and later, when they realize the effect this has on their future and the possibility of not finding a job as a result of having these tattoos (3.7.5.iv), feelings of regret and sadness follow (3.7.5.x).

**Inhibiting satisfiers.** This type of satisfier generally over-satisfies a given need, therefore seriously curtailing the possibility of satisfying other needs. With some exceptions, they share the attribute of originating in deep-rooted customs, habits and rituals. The example named by

Max-Neef is unlimited permissiveness, which abounds amongst many of the adolescents referred to the Special Youth Centre.

Examples of the above-mentioned are the sexual habits of some of the learners at the Centre. After holidays they would boast amongst each other about their sexual encounters with many different partners as well as their drug abuse and lawlessness. They also exhibit an inability to understand why rules and regulations are implemented for the protection of the country's citizens.

**Singular satisfiers.** Singular satisfiers are those that satisfy one particular need. With regard to the satisfaction of other needs, they are neutral. They are characteristic of plans and programmes of assistance, cooperation and development. These satisfiers are similar in that they are institutionalized; that is, their origins are in institutions of the state or the private sector.

**Synergic satisfiers.** “Synergic satisfiers are those that satisfy a given need, simultaneously stimulating and contributing to the fulfillment of other needs. They share the attribute of being anti-authoritarian in the sense that they constitute a reversal of predominant values such as competition and coerciveness (Max-Neef, 1991:34)”.

If adolescents at the Special Youth Centre can accept responsibility for their future and learn entrepreneurial skills which not only satisfy the need for mastery, it can also help them to earn their own income, which can improve their independence. This is in line with an observation in the Western Cape Status of the Youth Report (2008:47) where the following is stated as an issue and challenge related to distorted economic activity in the communities with marginalized youth: “Dysfunctional community structures such as gangsterism which offer a sense of belonging and alternative family support structure and perpetuate a culture of crime as an alternative to legitimate means of economic participation.”

**Exogenous and endogenous satisfiers.** Max-Neef (1991:34) explains these satisfiers as being generated by the society or communities at grassroots level and not induced from the top as the first four categories. Examples of the latter are institutions. “In this sense, they are satisfiers which traditionally have been generated at the top and advocated for all”, The Western Cape Status of the Youth Report (2008:32) names the Field Band Foundation which the researcher views as an example of an endogenous satisfier. “It is the influence of the

community in processes like this that makes them anti-authoritarian, even though in some cases they may originate in processes promoted by the state” (Max-Neef, 1991:34).

**Summary:** The researcher is of the opinion that endogenous satisfiers of this nature would be the ideal form of intervention for adolescents at risk, namely at grassroots level, in the communities where they come from. There should be joint efforts geared towards addressing the needs of both the parents as well as their children and the rest of the community. (Refer to Chapter 5 for recommendations.)

### **4.3 HOLISM, FIELD THEORY AND BRONFENBRENNER’S BIOECOLOGICAL THEORY**

The Gestalt paradigm perspective inclusive of holism and field theory (Yontef 1993:262 in 2.2.4) form the underlying basis of the study. Wheeler (2002:50) and Reynolds (2005:15) emphasized the importance of appreciating the field in which the adolescents exist. Adolescents must be viewed in connection with everything else in their field, as each one has a distinct field that is unique to the environmental influences that affect who he is. In order to attain this ideal, it was necessary to find a model which includes the whole field and Bronfenbrenner’s bio-ecological theory (Papalia *et al.*, 2008:36-37) provides such a model:

This theory looks at a child’s development within the context of the system of relationships that form his or her environment. Bronfenbrenner’s theory defines complex “layers” of environment, each having an effect on a child’s development. This theory has recently been renamed “*bio-ecological systems theory*” to emphasize that a child’s own biology is a primary environment fueling [his] development. The interaction between factors in the child’s maturing biology, [his] immediate family/community environment, and the societal landscape fuels and steers [his]development. Changes or conflict in any one layer will ripple throughout other layers. To study a child’s development then, we must look not only at the child and [his] immediate environment, but also at the interaction of the larger environment as well (Paquette & Ryan, 2001: 1)

This theory has a contextual perspective, where the individual is seen as a part of the environment, both influencing each other. Development occurs through interaction of a developing child [adolescent] and four surrounding, interlocking systems within the perpendicular dimension of time. Bronfenbrenner identified these systems as the micro-,

meso-, exo-, macro- and chronosystems, with the individual and his potential abilities, temperament, age and gender in the centre (Papalia *et al.*, 2008:37). The chronosystem adds the dimension of time. It influences the degree of stability or change in the developing child/adolescent's world and includes changes due to the development of the child in his micro-system but also on the larger scale, such as changes in family systems after the death of a parent or a divorce and changes in patterns of employment. It denotes the importance and the effect of changing personal and societal conditions that take place over the life course of the developing individual. Studies were done by Elder on the effect on the life course of growing up in hard times. These studies pointed out how economic deprivation has different effects on the life course of children who have faced economic hardship at different ages (Papalia *et al.*, 2008:17). According to Paquette and Ryan (2001:20):

The nested environments Bronfenbrenner speaks of can be seen as the physical structure related to these stages. Using the Piagetian terms, when the infant is in the sensorimotor stage its whole world is the microsystem and the most immediate part of the mesosystem. The preoperational stage includes more of the mesosystem as language develops. School and community begin to be more direct influences as the child enters the concrete operational stage. Finally in the formal operational stage higher cognitive abilities reach out farther into the exosystem and even the macrosystem.

Bronfenbrenner added another important concept, namely that the influence exerted is bidirectional; therefore, the developing child influences his world in the same way that the world influences him. This is in agreement with the Gestalt view of the field and everything in the field influencing the rest of the field (Parlett 1991:69). Bronfenbrenner is quoted by Paquette and Ryan in their report (2001:21):

[...] it is the richness of the environment in the microsystem that is important to the development of the child. The mother-child, father-child, and father-mother pairs (or dyads per Bronfenbrenner), being the basis of the early microsystem, can be seen as being most influential at that stage. These two person systems are very bidirectional in nature; both parties develop together (Bronfenbrenner, 1979). Much of a child's behaviour is learned in the microsystem, though as the child ages, the other, more distant, systems will have increasing influence. Internal systems also have an effect on behaviour. The emotional system and the biology of the child are two internal forces that can have a significant influence on behaviour.

Therefore, as the environment influences the adolescent, so does the adolescent who misbehaves and has a criminal record exert a negative influence on his ecological system. The adolescents at the Special Youth Centre seemingly often underestimate their influence on their community and are unhappy when the external social worker does not grant permission for a holiday at home in the community where the crime was committed.

The placement of the extracted themes within the Circle of Courage model explained the role of unmet needs in the life of the adolescent, as well as showing how distorted their Circle of Courage has become due to unmet needs. However, as a human being is growth oriented and has the ability to self-regulate, there is always the possibility of growing and developing, as denoted in the theory of holism (Clarkson & Mackewn, 2006:38). The Resilience Code can turn the distorted Circle of Courage into a healthy one. The code is therefore a holistic view of the developing adolescent and his needs. From a Gestalt as well as an occupational therapy perspective, it is not enough as the field has not been taken into account. The needs cannot be met by the inner strengthening of the adolescent alone; the environment, to a large extent, has to provide in the needs of the developing child/adolescent. Bronfenbrenner’s bioecological theory depicts how family, peer and community influences interact in determining anti-social behaviour and juvenile delinquency (Papalia *et al.*, 2008:490). Starting with the adolescent in the Centre, it is followed by the micro-, meso-, exo-, macro- and chrono-systems. The issue most often debated when discussing development is whether nature or nurture had the biggest effect on the developing child/adolescent. Bronfenbrenner (1994:1) took up this discussion and developed a theory which incorporates both the biological and the social factors influencing the developing child/adolescent.

**Table 4.7 A profile of the participants according to Bronfenbrenner’s bioecological theory**

	<p><b>THE ADOLESCENT</b></p> <p>Developmental and academic delays, with poor communication and interpersonal skills and a poor ability to express emotions verbally. These factors could be ascribed to both nature and nurture.</p>
<b>Nature</b>	<p>Bronfenbrenner’s bioecological theory starts with the <b>individual or child/adolescent in the centre</b>. Paquette and Ryan (2001) wrote a report on Bronfenbrenner’s work in which they explain the effect of the biological (inborn factors), thereby emphasizing</p>

the importance of the developing brain:

The biology of the brain is certainly one of the most important systems in a developing child. The health of the child's brain will have a great impact on the rate and quality of development in all areas. Since all senses and motor functions are centralized here, virtually any activity must begin with the brain. Damage due to disease or injury can impair activity and cause a variety of developmental difficulties (Paquette & Ryan 2001:6).

Anti-social behaviour runs in families. Genes influence 40-50% of the variation in social behaviour and 60-65% of the variation in aggressive anti-sociality within a population (Rhee & Waldman, 2002; Tackett, Krueger, Iacono & McGue in Papalia *et.al.*, 2008:490). Recent research findings prove that different kinds of neuro-physiological factors are at play in the human brain when subjects had been exposed to abuse and constant fear.

**Drug abuse by the parents** as well as the adolescent influences the neurological structure of the brain. Low birth weight as a result of the mother's drinking and smoking habits during pregnancy and poor nutrition lead to 43 to 48 per thousand babies being affected by fetal alcohol syndrome, suffering from physical and mental defects as a result of this (Parker Lewis, 2003:19). According to Paquette and Ryan (2001:10), "fetal alcohol syndrome (FAS) is the leading known preventable cause of mental retardation". Other research has shown that alcohol causes severe mental impairment, as seen in fetal alcohol syndrome and other alcohol-related birth defects. Some of the other disabling effects for adolescents with FAS are low frustration tolerance, a poor ability to foresee the implications of behaviour, attention deficits and a tendency to aggressive behaviour (Louw & Edwards, 1998:190; 329). In the Western Cape 15% of children have a low birth weight, one in ten children suffer from stunted growth (an indication of long term malnutrition) and 7% of children are underweight. This leads to poor academic achievement and poor motivation to continue their schooling careers. It is not unusual for learners to have dropped out of school in the primary or intermediate phase.

Research indicates a weak gene which could lead to boys being at risk for violent and aggressive behaviour when they are subjected to abuse (Parker Lewis, 2003:19).

Paquette and Ryan (2001) also explain the effect of drug abuse on the brain:

There are psychological and pharmacological factors that can affect a developing child in many ways. Depression and substance abuse are two of the largest problems faced by adolescents; both can have serious effects on learning and behaviour.

From as young as eight and nine years of age, tobacco (rolled in paper, called “entjies”) is smoked, and after that dagga (Cannabis) and dagga in combination with Mandrax (Methaqualone), and this combination is the second most common primary drug being abused in Cape Town (Western Cape Status of the Youth Report, 2008:29). The last-mentioned drug is a depressant and is now an illegal drug (Parker Lewis, 1998:57) Although Tik (Metamphetamine) is becoming more prevalent, dagga is still used extensively.

Although the potential of these adolescents can already be curtailed from birth as a result of fetal alcohol syndrome, their own drug and alcohol abuse from a very young age could cause more brain damage. Heavy drinking in the teenage years can permanently damage the frontal lobe of the brain, which affects personality as well as the hippocampus, which is important for memory retention (Parker Lewis, 2003:19). Boys often relate that four or five friends share and drink a bottle of brandy and a crate of beer (12 quarts) at a time. It has been found that the use of dagga in the teenage years is a risk factor for the development of psychosis as well as other psychological problems (Western Cape Status of the Youth Report, 2008:30). At the Centre more than one case of psychosis as a result of drug abuse has been referred to psychiatric hospitals. The drug known as Tik has become prevalent and when adolescents return after holidays, they have lost so much weight that they are hardly recognizable. Weight loss is a well-known side effect of Tik abuse. The Western Cape Status of the Youth Report (2008:29) states that there was a sudden increase in the use of Tik and that more than half of these cases were adolescents under the age of 20. Most of the adolescents at the Centre are willing to own up to their drug abuse, but do not know how to break the habit. They usually think that they are not addicted as they have not used Tik for a few months while waiting in a place of safety and think that they can keep this up. However, on returning home for the holiday they find it difficult to abstain, as this entails not having contact with their friends and not

	<p>going to places which they frequented.</p> <p>The younger children and street children usually start sniffing solvents such as glue, paint or petrol. They do this as it helps to depress the uncomfortable sensations of hunger and cold when living on the streets, and these substances are cheap and easily available (Parker Lewis, 1998:53). A high percentage of people with histories of childhood abuse suffer from addiction. Kepner (2008: xvii) postulates in this regard:</p> <p style="padding-left: 40px;">Addiction itself is also a form of self-abuse, particularly of one’s bodily self. The chemical substances help these individuals control or deny the negative or adverse effect of bodily sensations and feelings which are connected to the abuse. The addict has to work on reclaiming all the hurts and feelings which are part of his bodily self in order to become integrated and move on to higher levels of functioning and it is an area where body process work is useful.</p>
Nurture	<p>Bowlby and Ainsworth emphasizes the importance of the primary relationship of the child with his parents. This is now substantiated by studies conducted and reported on by the New Zealand Health Commission (Happy child, balanced adult, 2011:6). The environment in which children are raised plays a role in developing their brains to acquire social and moral skills. Love and security or the lack thereof is a critical factor in how these children, when adults, will cope with family violence, crime, social and educational issues. Abuse in the family is therefore in direct contrast with the circumstances necessary for the healthy development of the child and it follows that abusive family relationships have a detrimental effect on the adolescent. This is substantiated by Theme 2, “Abuse in the family” (3.7.3), with the subthemes “The effects of drug and alcohol abuse by parenting figures” (3.7.3 ii.), “Disrupted care” (3.7.3 iii), “Physical abuse in the family/harsh disciplining practices” (3.7.3 iv) and “Neglect” (3.7.3 v). An interaction between adverse early environments and genetic and biological risk factors may underlie much anti-social behaviour (Van Goozen, Fairchild, Snoek &amp; Harold in Papalia <i>et al.</i>, 2008:490). Waldegrave (2011:6) states in this regard that ongoing experiences of neglect, abuse or violence can cause damage and serious impairment of their intellectual, -, emotional- and social functioning. These findings also substantiate the Gestalt theory and holism and field theory (2.1.i), which emphasize the interplay of all the elements in the adolescent’s internal and</p>



external world (Perls, 1969:6; Yontef & Jacobs, 2008:320).

Substance abuse by the adolescents themselves further weakens their ability to control their behaviour, and the Western Cape Status of the Youth Report (2008:29) claims that almost one in five HIV patients met criteria for current alcohol abuse or dependence. Patients with alcohol use disorders were more likely to have symptomatic HIV infection. The sexuality of the adolescent at risk is an issue of concern at the Special Youth Centre. The adolescents have the sexual maturity and urges of adults, but have few of the restraints that curb unrestrained sexual practices (Papalia *et al.*, 2008:492). Many of them have sexual relationships with girls and some have already become parents. As some of these adolescents had spent time in the youth cells of prisons and had “decided” to join the 28s. The indoctrinated belief system of the 28s Gang regarding allowed sexual behaviour between male inmates, as “men” and their “wives” (Parker Lewis, 2006:84,85), makes them prone to either becoming victims or perpetrators of sexually abusive behaviour.

The new Children’s Act (38 of 2005) is particularly strict with regard to sexual exploitation of minors, and sodomy is now also regarded as rape. This creates a duality with two opposing viewpoints for the learners. The viewpoint of the 28s, which “caters” for same gender sexual practices while incarcerated, where the one partner (usually the smaller and weaker or younger) is designated the role as a “wife”, and that of the law, which is now particularly strict with regard to sexual transgressions. Unfortunately there are adolescents who become involved in sodomy with fellow learners, possibly as a result of the anti-social norms of the Number Gang, with drawn-out court cases and difficulties in accommodating the needs of both the victims and perpetrators while both are in restricted care at the Centre. Of the five participants, two have been involved in group sodomy of a fellow learner (with resulting regular summons for court appearances) and three have become parents.

Street children are particularly prone to either being sexually exploited or exploiting younger children. According to Parker Lewis (1998:73), street children use sex for two purposes, namely as a means of income and as a weapon to subjugate younger children. When street children are referred to the Special Youth Centre, they prove to

	<p>be difficult to accommodate within the system. They are usually young (13 and 14 years old), and academically they lag behind their age cohorts, finding it difficult to take part in classroom activities due to poor concentration and learning deficiencies as a result of the abuse of solvents, dagga and/or stronger drugs. These adolescents have very few resources to develop and have sexual histories which tend to cause problems. The street kids usually appear to be victims, but are described by the other learners as “asking for it”, trading sexual favours for “smokes” or getting involved in sexual practices as a distorted way of trying to meet the need for belonging. Generally speaking, they are obstinate and do not adjust well to any form of authority and discipline (Parker Lewis, 1998:16).</p>
	<p><b>MICROSYSTEM</b></p>
<p>Family</p>	<p>The microsystem consists of people with whom the adolescent has face to face contact on a regular basis. It is the first domain of emotions found within the family and is central to a child’s development (Paquette &amp; Ryan, 2001:18). Adolescents referred to the Special Youth Centre come from rural as well as urban areas in the Western Cape where substance abuse, poverty, unemployment, crime and gangsterism are described in the probation officers’ reports. Parents, grandparents and older siblings are often unemployed and the only means of income are social grants. The aforementioned contributes to factors described in the dialogue of the participants: The participants have been subjected to familial trauma (Theme 2), including the death of a parent(s) in the case of P3 and P5 (3.7.3.i).</p> <p>Adolescents involved in crime have poor family structures, often growing up without a father, or losing one or both parents or foster parents as a result of death, divorce or the separation of parents, (described as “incomplete families” by Maree, 2003:59). The siblings often have different fathers and the offending youngster is often at odds with the new boyfriend or stepfather (Maree, 2003:74).</p> <p><b><i>Drug and alcohol abuse of parents: P1, P3 and P4.</i></b> Physical and verbal abuse is often reported and some of the young offenders also practice abuse against their fathers, stepfathers and mothers, especially when their parents are intoxicated (3.7.2.ii P4).</p>

Breaking the habit of alcohol and/or drug abuse is especially difficult if the parent, substitute parent, sibling, uncle and peers practice it. A few of the learners had a parent as a drug merchant and find it difficult to understand why the Centre advocates that drug abuse is a dangerous habit and is against the law.

***Disrupted care: P1, P2, P3, P4 and P5 .***

Many of the adolescents grew up with their grandparents, often the grandmother, and when she becomes too old or dies, they return to their mother. As a result of different factors at play, the adolescent then starts acting out, causing more and more problems, usually after starting to use drugs.

***Family violence:*** Violence directly upsets the need for protection, thus inducing intense anxiety (Max Neef, 1991:22). Injuries sustained as a result of violence within the family have a stronger emotional reaction than when violence originates from outside the close family circle. If the violence has occurred over a period of time, it causes type 11 trauma, namely “recurring trauma”. Childhood trauma may be accompanied by biological/neurological changes to the brain, stimulated by external events. Once the events take place, a number of internal changes occur in the child. These changes often cause the symptomatic behaviour which result in referral for help. According to Terr (2003:223), childhood psychic trauma appears to be a crucial etiological factor in the development of a number of serious disorders, both in childhood and adulthood. Gil (1991:3) postulates that the effect of parental maltreatment of children has particular psychological and emotional implications for the child victim, regardless of the form in which it takes place, and states that the findings of research and clinical work done with adult survivors provide evidence of this. In cases where there is chronic stress or abuse, “hyperarousal” occurs in some areas of the brain, and this may result in hyperactivity, sleep disturbances and anxiety, as well as increased vulnerability to post-traumatic stress disorder, conduct disorder and learning and memory difficulties (Dallam in Waldegrave & Waldegrave, 2009:19).

***Neglect: P3, P4 and P5 .***

According to an article by Waldegrave & Waldegrave, parents shape their children’s

pro-social or antisocial behaviour through their responses to children's basic needs. According to Rain, cited by aforementioned authors, it is three times more likely that boys with poor attachment will commit violent crimes. De Bellis notes that "child neglect is the most prevalent, but least empirically studied, form of child maltreatment". Kairys, Johnson and the Committee on Child Abuse and Neglect (2002) refer to this as failing to provide for the emotional, behavioural, physical or educational needs or problems of children. They state that with other forms of maltreatment, this can have adverse effects on emotional health, including a low self-esteem, anxiety and depression, social skills, learning and physical health. (Waldegrave & Waldegrave, 2009:26, 27). Perry *et al.* (in Waldegrave & Waldegrave, 2009:26) is of the opinion that in relationships where the child's needs are continually ignored, the developmental damage can be severe, chronic and irreversible. At the same time, the child may be learning that his future is unsure: "In this sense, neglect is abuse."

Adolescents with severe attachment disorders display aggressive, controlling behaviour and conduct disorders, making it impossible for society to control their behaviour, with the result that they end up in the system of secure care. These youngsters usually depict an anti-social personality with an inability to form emotional relationships with the significant people in their lives. Bowlby (1969) postulated that children with attachment disorders have chronic aggression, poor impulse control and a poor or absent conscience.

***Physical abuse and harsh disciplining practices: P1, P4 and P5 .***

Parents who fail to reinforce good behaviour in early childhood may have been harsh or inconsistent or both in punishing misbehaviour (Coie & Dodge, 1998; Snyder, Cramer, Afrank & Patterson, 2005, cited by Papalia *et al.*, 2008:492). These negative patterns may pave the way for peer influences that promote and reinforce negative behaviour (Collins, Maccoby, Steinberg, Hetherington & Bornstein in Papalia *et al.*, 2008:492). When constant criticism, angry coercion or rude, uncooperative behaviour characterize a parent-child relationship, the child may display aggressive behavioural problems (Buehler in Papalia *et al.*, 2008:492). Ineffective parenting can leave the younger siblings to the powerful influence of a deviant older brother, especially if

	<p>there is a small age difference between the siblings (Snyder, Bank &amp; Burraston in Papalia <i>et al.</i>, 2008:492).</p> <p>Yablonsky (cited in Joubert, 2003:116) is of the opinion that the self-concept of the young person is the most useful concept for understanding youth crime. According to him, there are specific phases and characteristics which are related to one another.</p> <ul style="list-style-type: none"> <li>• The child is abused (sexually, physically or emotionally), neglected or abandoned by his parents or primary caregivers.</li> <li>• This leads to feelings of humiliation and unworthiness. Due to this negative pattern of socialization, the child develops a low self-concept and feels self-hatred.</li> <li>• Together with his low self-esteem, a rage develops against the people who neglected or abused him and this rage is usually directed at people in the society.</li> </ul> <p style="padding-left: 40px;">They care little about what happen to themselves, but also about other people in general. This, mixed with the rage felt from being abused, may create a person who is violent and has disrespect for the rights of others (Joubert, 2003:116).</p> <p>Steinberg (2001:3) also places the relationship between parent and child in the spotlight when he seeks to understand and explain the reason for criminal behaviour.</p>
School	<p>All the above-mentioned factors contribute to developmental and academic delays. The adolescents did not have the opportunity to practice and develop these skills due to absent/poor stimulation in their home environment as well as having no pre-school programmes. The participants did not have the stimulation provided by crèches, nursery schools or pre-primary schools. The Children’s Institute Report (2006) stated that only 8% of the preschool population attended Grade R during the household survey in 2005 (Western Cape Status of the Youth Report, 2008:92). Their preparation for school was deficient and the inability to adapt to the school environment speedily led to an increased incidence of fighting at school and/or absconding as well as using dagga, resulting in either expulsion or staying away from school permanently. These learners are unaware of the underlying reasons, not realizing that if they enjoyed school this would have provided the necessary</p>

	<p>motivation to continue their schooling career. Some learners start using drugs during their late primary/junior school years, and when they reach adolescence, alcohol abuse becomes an added risk factor.</p> <p>According to the Western Cape Status of the Youth Report (2008:29), alcohol, in particular, has been linked to a range of problems such as academic failure and absenteeism from school. (Studies regarding this have been conducted over various years.) Adolescent use of alcohol and other drugs has been associated with academic difficulties, declining grades, absenteeism, truancy and school drop-out.</p> <p>The Western Cape Status of the Youth Report (2008) places emphasis on the inefficient schooling system in South Africa and an inability to provide adequate schooling in disadvantaged communities.</p>
Peers	<p>The usual reason for playing truant is, “My friends led me astray.” (“Ek het agter my tjommiës/vriende aangegaan.”) Poor or no attachment at home causes “push factors”, making bonds with peers desirable and fulfilling the need for belonging, thus supplying the “pull factors”. Gangs provide in the need for identity, connection and a sense of power and control and, for young people who lack positive family relationships, they can become a substitute family (Western Cape Status of the Youth Report, 2008:47). Gangs provide a sense of belonging and protecting their own “turf”, leading to a sense of “us versus them”. Violence against outsiders strengthens bonds of loyalty and support within the gang (Bezuidenhout, 2010:13).</p> <p>Once the child has left school prematurely, the downhill road is usually fast. They become involved with groups of friends who commit house-breaking and theft in order to get money for drugs. They also rob people, especially drunk people, and fights between the victim and the group can become ugly. Perpetrators in robbery and assault cases have reported how, when under the influence of substances, they become aggressive and when the victim resisted giving them money, he was beaten and kicked, which led to serious injuries and/or the death of the victim. Trouble at school as well as at home increases due to factors such as sleeping out, returning late at night, sleeping till late, eating large amounts of bread due to the “munchies” before returning to the streets for the next joint or slowboat, and pinching belongings at home and selling them for drugs. Sometimes the adolescent leaves home and moves</p>

	<p>in with a friend at his home, but later, when things go wrong there as well, they move to the streets. The choice of anti-social peers is affected by environmental factors (Iervolino, Pike, Manke, Reis, Hetherington &amp; Plomin in Papalia <i>et al.</i>, 2008:492). Their anti-social behaviour escalates when they associate with each other (Dishion, McCord &amp; Poulin in Papalia <i>et al.</i>, 2008:492).</p>
Neighbourhood	<p>Weak neighbourhood social organization in a disadvantaged community can influence delinquency through its effects on parenting behaviour and peer deviance (Chung &amp; Steinberg in Papalia <i>et al.</i>, 2008:493). This is substantiated by the work of Jensen (2008) on the gangs and politics in Heideveld during the late 1990s, as well as that of Pinnock (1997) in the Cape Town area. They both postulate that the forced removal from traditional areas during the apartheid regime caused the disorganization of the “instant” communities where neighbours did not know one another and did not form a cohesive community. Strong social connections within a neighbourhood and the extent to which the inhabitants monitor each other’s children can have a positive influence on the children (Sampson in Papalia <i>et al.</i>, 2008:493). The most disabling effects within the neighbourhoods are the overwhelming presence of name (street) gangs and Number Gangs in certain urban communities, and these are on the increase in rural areas as well. Jensen postulates that the reason for joining gangs can be found in the attraction of the gang for young men in that it “ removes the notion of the weak coloured man; it is a site for heroic identification and order, in opposition to dominant society, while it also promises infinite riches” (Jensen, 2008:17). A high percentage of lesions and scars are acquired as a result of violence against them.</p> <p>Gang violence: Jensen (2008:71) seeks an answer to the question why young people would continue participating in gang-related activities in spite of many deaths and gives a twofold answer, namely: (i) The promises of riches, fancy cars and free access to girls and sex, and (ii) the gang provides a mode of identification and order in opposition to the dominant society.</p>
Religion	<p>Although there is a tendency for coloured women to belong to Christian denominations and Muslim men to follow the prescribed rituals and attendance of religious practices, the majority of the learners at the Centre denote that their fathers or substitute fathers do not attend religious meetings. There does not seem to be an</p>

	<p>inclination towards spiritual development in the sense of parents bringing their children to services with them or continuing with the spiritual activities at home. A study by Dickie, Ajega, Kobylak and Nixon (2006) found the following:</p> <p style="padding-left: 40px;">For men, mothers were responsible, more than fathers, for creating a climate for sons' self-esteem through nurturance and discipline, which in turn contributed to seeing God as nurturing, feeling close to God, and being more religious. For women, mothers and fathers created a model of nurturance and power, which contributed to seeing God as nurturing and powerful. Punishing/judging parents directly affected punishing/judging God images in these young adults. Men perceived God to be more punishing/judging than did women, while women perceived God to be more nurturing. Even in adulthood, parents, especially mothers, continue to exert influences on young adults' faith and images of God.</p>
Judicial system	<p>Participant 1 related a situation in prison when he had been beaten by the police at the age of thirteen for things he had not done (thirteen year olds should not be incarcerated). Participant 2 “made himself older” in order to skip the secure care system as he wanted to see the inside of a prison. He was fifteen at the time. P3 was also only fifteen or sixteen when he spent time in the youth cells. Legislation seemingly has loop holes and children as young as this are placed in youth cells while awaiting their court appearance. It could become a few months and when up to fifty youths are incarcerated with nothing to do and only one hour per day outside the cells, it leads to malpractices such as tattooing and joining Number Gangs. They have enough time on their hands to become fully indoctrinated and learn the “sabela” or language used by the gangs, a combination of Afrikaans, and Nguni languages, by heart. According to Parker Lewis, (2006:34) hours are spent learning the “litany”, or the prescriptions and instructions of the “Big Book” (which is passed on orally).</p>
	<p><b>MESOSYSTEM</b></p>
Systems within micro-system	<p>Most of the learners at the Centre had left school at a young age and there had been no intervention to get them to return to school. P2 was suspended after he had been involved in a gang-related fight at school. He had just started with Grade 8 and was “clever at school”. This participant showed the ability to read both Afrikaans and English, was bright and gave the impression that he would be able to complete Grade</p>



	<p>9 in order to continue with studies at a college. He was also a good sportsman and communicated easily. He showed leadership qualities as well. If the school officials had gone to more trouble to address the problem, discussing it with his parents or finding a mentor in order to get him back into school, he might have achieved <i>mastery</i> (as in the Circle of Courage) at school and not in jail. In the eight years of working at the Centre, only one learner recently told the researcher that his teacher had visited his home on more than one occasion in an attempt to get him to return to school.</p> <p>P3 only started his schooling at the age of 12 and stopped again in his second year at school. He is still practically illiterate and is so far behind his age cohort that he cannot return to school when he leaves the Centre. P4 badly wants to complete his schooling, but he is also more than two years behind his age cohort and says that there will not be money to continue his schooling once he leaves the Centre.</p>
Economy	<p><b>MACROSYSTEM</b></p> <hr/> <p>Poverty, especially if it is long-lasting, is harmful to the physical, cognitive and psycho-social well-being of children and families. Poor children are more likely to have emotional or behavioural problems than other children, and their cognitive potential and school performance suffer even more (Evans in Papalia, Olds &amp; Feldman, 2008:13). The Western Cape Status of the Youth Report (2008:18) indicates that in the Western Cape, 20.44% of children live in households with self-reported food insecurity and 6% indicate that hunger is common, indicating severe deprivation. (Due to the economic slump of the past three years, it is suspected that these figures are now considerably higher.)</p> <p>The report for the New Zealand Health Fund emphasises the relationship between poverty and the other risk factors associated with youth at risk in the following words: “Low socio-economic status and poverty can be a cause of the sorts of inadequate conditions that create obstacles for children’s development, as the associations of low socio-economic status (SES) with poor health, low educational attainment and crime attest” (Waldegrave &amp; Waldegrave, 2009:29). This is also</p>

	<p>stressed by the Western Cape Status of the Youth Report (2008:21): “It is commonly recognised that the level of education is closely linked to poverty.” Research indicated that the major sources of poverty for youth are unemployment and the household of origin (possibly indicating that if a child grows up in a poor household, he would find it difficult to escape the cycle of poverty). “In order to address poverty, issues such as employability and whether the youth are correctly trained for the challenges of the modern world should be addressed” (Western Cape Status of the Youth Report, 2008:20). Economic poverty also gives rise to other poverties, as indicated by Max-Neef’s theory indicating that the term <i>poverty</i> applies to any fundamental human need that is not adequately satisfied (Max-Neef, 1991:18). He refers to this as a human poverty, examples of which are: poverty of subsistence (due to insufficient income, food, shelter, etc.), protection (due to bad health systems, violence, etc.), affection (due to authoritarianism, oppression and exploitative relations with the natural environment), understanding (due to poor quality of education), participation (due to marginalization and discrimination against women, children and minorities) and identity (due to the imposition of alien values upon local and regional cultures, forced migration, political exile, etc.). But poverties are not only poverties – they become pathologies. When placing the participants’ needs within this model, it becomes clear that their environment or field in which they live cannot supply in their needs and therefore can be regarded as pathology (Max-Neef, 1991:19).</p>
Political arena	<p>Peoples’ life projects are thwarted by political intolerance, such as happened in South Africa during the apartheid years, as they systematically erode their creative capacity, leading them slowly from active resentment into apathy and the loss of self-esteem. Recognizing and assessing those collective pathologies generated by diverse socio-political systems is a challenge. Both Pinnock (1997) and Jensen (2008) describe the effect of this on the coloured communities in the Cape and how the disorganization of their communities led to increased violence, gangsterism and other associated negative effects. Every system creates obstacles to the satisfaction of one or more needs in its own way, such as the need for understanding, protection, identity,</p>

	<p>affection, creation and freedom.</p> <p>Political trends and eras such as the apartheid era lead to detrimental effects such as the above-mentioned. This is summarized by the following statement by Richards quoted in the Western Cape Status of Youth Report (2008:10):</p> <p style="padding-left: 40px;">Unquestionably, apartheid had an enormous impact on South Africa. It had a detrimental effect on society as a whole, and created greater degrees of disadvantage for some sectors of the population, amongst them the previously disadvantaged youth, by postponing their educational, economic and social development and their integration into society. Since 1994, South Africa has advanced both politically and economically, but still faces many significant challenges.</p>
	<p><b>EXOSYSTEM</b></p>
	<p>There is a bidirectional influence between different systems within the macro-, meso- and microsystem, all impacting either positively or negatively on the developing child/adolescent. In the current study, many of the influences were either negative or insufficient. In hindsight, the effect of the political system of apartheid on education and on the economy is now evident. The Western Cape Status of the Youth Report (2008:11) states that:</p> <p style="padding-left: 40px;">The legacy of apartheid education influenced basic skills levels in two areas. The first was that vast numbers of people, particularly blacks, missed out on the opportunity of a decent education. In 1996 one in four black adults had no education at all and only 6% of all South African adults had a tertiary qualification. Adult education may be an option for some people who were deprived of basic education, but in general their ability to interact with the mainstream economy was severely affected.</p> <p style="padding-left: 40px;">A second level on which the impact of apartheid education is still being felt is in the ongoing difficulties experienced with the poor quality of education in South Africa. The educational infrastructure, in terms of well-equipped school buildings, qualified and motivated teachers and a culture of teaching and learning, has been severally damaged.</p> <p>The above-named factors led to legislature by the new democratic dispensation in</p>

	<p>South Africa to prevent and rectify the dispensation of the past. According to the Western Cape Status of the Youth Report (2008:60):</p> <p style="padding-left: 40px;">South Africa is the only country where the foundation for preferential procurement is entrenched in the country's constitution. Section 217 of the Constitution entrenches a procurement system that caters for a fair, transparent, equitable, competitive and cost-effective supply chain management system. The BEE Act and the Preferential Procurement Policy Frameworks Act legislates this obligation to economic equality. These laws aim to accelerate the inclusion of previously disadvantaged individuals (PDIs) into mainstream business in order to redress the imbalances of the past. In response to this national drive, the Western Cape formulated a provincial policy, Ikapa Elihlumayo, to address the need to increase the skills, identify job opportunities and improve the economic participation of PDIs.</p> <p>According to Max Neef's Human Developmental Scale, this proposal might not be such a good idea, as it is a form of authoritative initiative controlled from the top down. This could be seen as a form of singular satisfier (Max-Neef, 1991:34).</p>
	<p><b>CHRONOSYSTEM</b></p>
	<p>This system adds the dimension of time. It influences the degree of stability or change in an adolescent's world. This includes changes in the microsystem but also on the larger scale, such as political changes and changes in patterns of employment, changing personal and societal conditions that take place over the life course of the developing individual. Factors such as a divorce or the death of a parent and substitute carers impact on the developing child's life and the same trauma at different stages of development might have a larger or smaller impact.</p> <p>An attempt to construct a time line of events that participants mentioned during their dialogue showed an increase of occurrences at the age of 12 and 13. Due to the fact that specific questions were not asked, this could not be done with great accuracy. Bronfenbrenner added the chronosystem to his model, which is lacking in other models. When applying it, it shows the amount of trauma suffered in a short lifespan.</p>

	The accumulative effect of these unresolved traumatic experiences could have a precipitating effect towards joining gangs and becoming involved in drug abuse, as this has the effect of lessening the pain.
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**Summary:** It is clear that the problems in terms of familial trauma and abuse impact on the adolescent, who then experiences secondary problems at school. Such an adolescent needs support from his microsystem, which consists of his peers, family members, the school, the church or his neighbours. Better interaction of the entities within the microsystem, called the mesosystem, could improve psychological support. On the macro level, provision for better educational services would improve learning conditions for the adolescent, enabling him to continue with school and get a better education. Papalia *et al.*, (2008:490) endorses this by explaining how family, peer and community influences interact to lead to a child becoming a delinquent:

As Bronfenbrenner's theory would suggest, antisocial behaviour is influenced by multileveled, interacting factors ranging from microsystem influences-such as parent-child hostility, poor parenting practices, and peer deviance-to macrosystem influences-such as community structure and neighbourhood social support. This network of interacting influences begins to be woven early in childhood.

The inevitable result of poor support in all the ecological systems is that it will be difficult to complete the crisis of identity versus identity confusion successfully. As the participants in this study had so many problems to contend with during their pre-adolescent years, they have not had the opportunity to master the social skills, level of communication and educational levels of their cohorts. This places them at a disadvantage, which often causes adolescents to succumb to the pull factors pulling them into the lifestyle of drug use, street life and/or criminal behaviour.

Maree (2003:71) postulates that personality includes the individual as a whole person, including the biological characteristics, intelligence, temperament, attitude and self-image in a specific situation. Fifty-two "errors in thinking" were identified by Yochelsen and Samenow in Maree (2003:72). These include a lack of interest in schooling, a constant intense anger, sometimes expressed or just under the surface, a tendency to manipulateness, chronic lying, no thought of long term consequences and an orientation towards the present.

Maree (2003:72) postulates, “The criminal’s thinking is dominated by self-centeredness and selfishness, but they demand to be treated with respect and consideration, while displaying no respect for the rights, feeling or property of other people.” These are some of the characteristics that are often displayed by adolescents at the Centre. This implies that the broken bonds of belonging also prevent the other areas of *mastery*, *independence* and *generosity* from developing. More research is needed on these important thinking errors in terms of prevention and intervention with this vulnerable target group.

#### 4.4 CONCLUSION

According to Bronfenbrenner, (Paquette& Ryan, 2001:1) a person shapes his own development and is also being shaped through contact with the environment. Bronfenbrenner’s bioecological theory provides an understanding of the systems pertaining to the world in which a child is raised and in which area the shortcomings can be found. When placing the participants within Bronfenbrenner’s bioecological theory, it becomes apparent that there are systems which should be interacting that are totally absent and others that are ineffective or, as Max-Neef (1991:34) regarded them, exogenous satisfiers. Examples of exogenous satisfiers are destroyers, pseudo-satisfiers and singular satisfiers. Max-Neef explained that these four satisfiers are “...exogenous to civil society as they are usually imposed, induced, ritualized or institutionalized. In this sense they are “satisfiers which have been traditionally generated at the top and advocated for all”. The researcher is of the opinion that however well the planning of the Special Youth Centres were, an important fact was overlooked. The field of the adolescents is excluded from the intervention design and therefore does not change in unison with the change taking place in the adolescents while they follow their individual developmental programmes at the Centre. When they return home for holidays or permanently, little has changed at home and they do not have enough skills to either return to school or find employment easily. Their history of crime, with tattoos as visible evidence of this, further prevents successful reintegration into society. Gestalt and occupational therapy seek to work from a holistic perspective, taking the parents and siblings into account when intervention plans are drawn up and implemented. The models of both Max-Neef and Bronfenbrenner echo a field approach, which includes all the systems in the

adolescent's field and therefore highlights the shortfalls in the environment of the adolescent as well as in the system of secure care.

Chapter 4 has proven that the themes extracted from the dialogue of the participants could be substantiated with the literature control. Although different models were applied, they all explain in different ways that the participants' behaviour arises from unmet needs. This also depicts that society has failed adolescents at risk, or caused them to become young criminals.

## **CHAPTER 5: CONCLUSIONS AND RECOMMENDATIONS**

### **5.1 INTRODUCTION**

Papalia, Olds and Feldman (2008:468) describe adolescence as:

a time of both opportunities and risks. Teenagers are on the threshold of love, of life's work, and of participation in adult society. Yet adolescence is also a time when some young people engage in behaviour that limits their possibilities. Today, research is increasingly focusing on how to help young people avoid hazards that can keep them from fulfilling their potential.

This statement is an apt description of the adolescents taking part in this study and also endorses the researcher's reason for embarking on this particular research. The participants in the study are proof of how adolescents who engage in criminal behaviour limit their future possibilities. However, the body maps and unstructured interviews led to the discovery that these adolescents' basic needs are not met by their parents and those closest to them in their micro-system. It also indicates the failure of the wider community and society (macrosystem) to provide in the basic needs of adolescents who grow up in communities suffering from poverty, unemployment, high levels of crime, drug abuse and social disintegration. The aim of this chapter is to conclude the research report by providing a summary of the previous chapters as well as conclusions to the study and recommendations for improving conditions of youth at risk.

### **5.2 SUMMARY OF THE PREVIOUS CHAPTERS**

A concise description of the study follows, explaining how the research was conducted, in order to give an overview of the complete process before the conclusions and recommendations are presented. The study unfolded as follows in the previous four chapters:

**Chapter I** explained the researcher's interest in the fact that the emotional responses and behaviour of many of the adolescents in the Special Youth Centre seemingly block their own progress while they are "temporarily contained" (Rossouw, 2009:1) at the Centre for crimes committed (1.1). This prevents them from benefitting from the special programme as developed by the Western Cape Education Department (1.2). The result is that incarceration in prison follows on their inability to rehabilitate successfully, thereby diminishing their chances of a normal adulthood even further. An ex convict, Adams, explained how he committed every type of violent crime while he was in prison, declaring that the wardens play



a big role in the proses of “making you aggressive”. He is of opinion that “... ons moet keer dat jong mense tronk toe gaan en hulle lewens verwoes” (Daily Voice, 2011:5). Taking more responsibility for their decisions and making better choices can only come with a greater awareness of the impact of their life history and trauma suffered. If sentenced adolescent boys do not have an awareness of the impact of their life stories, traumatic events can remain unintegrated. It was further postulated that “non-adaptive coping such as addiction, the seeking of identity and belonging in gangs and criminal behaviour” can be outcomes of unintegrated life stories. This necessitates opportunities for emotional expression and growth as part of the occupational therapy programme (Fourie, 2005:117), which the previously mentioned programme at the Centre does not include at present. The occupational therapist utilizes concrete and “hands-on” activities as a mode of therapy, which compares well with the paradigm of Gestalt play therapy. From work by Kepner (2008:xvii) it was gathered that a body-process method would be most appropriate to enhance a body-mind connection. If care is not taken, rather severe post-traumatic reactions could be elicited when the memories connected to the abuse and trauma, are recalled. An article by Van der Merwe (2009:290-297) describes the complicated nature of traumatic memories and the fact that these memories are not verbally accessible. Special training is needed to utilize the correct techniques to access these situationally accessible memories (SAM’S). The researcher decided to utilize the technique of body mapping, using it as a body-process method rather than an art method, as this would be in keeping with the paradigms of both occupational and Gestalt therapy. The **main goal** for this study was to ascertain how the technique of body mapping could be utilized to facilitate dialogue of life experiences connected to the participants’ scars, lesions and tattoos. If it was found that body maps enhance emotion-focused discussions, this would open avenues for therapeutic use, which can be explored in further research. A **sub-goal** of this study was to explore the utilisation of body mapping as a research tool to generate data for this specific target group.

In the rationale it was put forward that a qualitative case study was envisaged as it is a method where an in-depth study using different sources of information can be executed. This gives a thick description of a case and presents the possibility of triangulation. The researcher was especially interested in exploring how body mapping could be used for data collection within the case study design. The multi-method which was used was also intended to heighten the reliability of the research. Thereafter a plan for the execution of the study was

designed, using five participants (or until saturation was reached) between the ages of 14 and 18 and purposive, criterion sampling.

As the aim of the study was to explore the possibility of facilitating dialogue by means of the combination of body mapping and unstructured interviews, the researcher endeavoured to have an attitude of being as present, inclusive and supportive as possible while being committed to dialogue and being careful not to exploit the participants. A “theory after” method was chosen to heighten the validity of the themes extracted from the dialogue, and this was done in accordance with the concept of data crystallization.

**Chapter 2** formed the conceptual framework with Gestalt theory as the underlying paradigm of the study. The theoretical principles of Gestalt were outlined while giving detailed descriptions of dialogue and field theory, as these were regarded as the most important concepts concerning this study. The researcher was conscious of the fact that the home environment or external field of the adolescents, referred to as the Special Youth Centre, does not receive due attention. The current programme and attempts at rehabilitating the serious behavioural problems of the adolescents are executed far from their home environments, with little contact with their families. Understaffed social work support at community level diminishes the success of the programme even further.

The similarities between Gestalt and occupational therapy paradigms were mentioned, indicating that both emphasize the importance of the relationship and a holistic approach. As the participants are between 14 and 18 years of age, the most important theories regarding the developmental phase of adolescence were discussed. It was indicated that Gestalt theorists are not in favour of the stages approach to development and rather prefer a developmental field approach. It was explained that the occupational therapist does make use of the stages approach, as they require some form of guidelines against which adolescents’ abilities and problems can be measured in order to do an assessment and plan treatment. It was also emphasized that there is a more functional approach to development in the occupational therapy framework, as the occupational therapist aims for improved functioning of the adolescent through his participation in the “healthy” occupations of adolescence.

**In Chapter 3** the empirical phase of the study was elaborated on, explaining the execution of the three body mapping sessions as well as how the themes were extracted, The thematic data analysis process described by Whittaker (2009:92) (3.6) was followed. The four main themes

which were extracted from the dialogue include the emotional responses and reactions of the participants with regard to their relationships, trauma experienced at home and elsewhere and the meaning ascribed to their tattoos and why they had been made. The subthemes were also set out and explained with the help of flowcharts (figures 3.3, 3.4, 3.5). From the rich content within the body maps as well as the material expressed through their dialogue it became clear that unmet needs formed the basis of the participants' deviant behaviour. Brendtro and Du Toit (2005:22) spell out that "for optimal development, humans need to be free from want and to feel secure that their basic needs will be met. They also need safe and predictable physical environments that contribute to a sense of health and well-being". The participants' emotional expressions were not congruent with the trauma that they had experienced, which in itself was indicative of desensitization and the effect of the body seeking some way of expressing the emotional content which previously had not been expressed verbally (Perls, 1973:15). There were also themes which were still vague at this stage of the study as they had not been expressed verbally by all the participants.

**In Chapter 4, the literature control** had the aim of proving or disproving the validity of the extracted themes. The basic human needs were discussed according to different motivational models. The motivational theory of Max-Neef, described in his theory "The human developmental scale" (Max-Neef, 1991:8), gives a different view on needs and suppliers and the relationship between the two. Max-Neef proposes that the suppliers of needs should be endogenous, meaning that it should be developed at grassroots level as well as simultaneously supplying in more than one need. The Circle of Courage model (Brendtro, Brokenleg & Van Bockern, 1990) and Bronfenbrenner's bioecological theory (in Papalia, Olds & Feldman, 2008:36) formed the basis against which the extracted themes were examined. Erikson's psychosocial theory of development (Papalia *et al.*, 2008: 26, 29-30) and attachment theory (Bowlby, 2005) proved to be valuable in explaining the behaviour exhibited by the adolescents under study. The research included material that provided more information regarding the phenomenon of the Number Gangs, as three of the participants had tattoos which depict membership of two of the Number Gangs. The research brought the field or external world of the adolescents at the Special Youth Centre into perspective. It emphasized the influence of both the street and Number Gangs on these adolescents, as the participants who had spent time in prison had been "introduced" to the Number Gangs.

It was also necessary to research what the life of a street child entails, as two of the participants spent time living on the streets. Research revealed that street children are usually abused at home, are emotionally deprived and usually have had little or no schooling. Drug abuse, especially sniffing solvents such as glue and petrol, is common. Parker Lewis describes them as “slow learners in the classroom, but quick and proud of their street skills” (1998:129). Both the gangsters and the street children were found to be “lacking in love, support and guidance by a healthy family support system” (Parker Lewis, 1998:14).

The unspoken but implied themes presented by the body maps and additional sources of information were further strengthened by this literature. Whereas the four themes extracted from the dialogue mainly fell in the quadrants of *belonging* and *mastery*, the implied themes fell into the quadrants of *independence* and *generosity* in the Circle of Courage (refer to the Distorted Circle of Courage, fig. 4.2).

Although the Circle of Courage model depicted the areas in the personal domain that were most affected, it does not show how the field or ecological system of the adolescents were contributing to their problems or, vice versa, how the youths’ behaviour impact on their communities. Theory regarding holism and field theory (2.2.5, 4.7) underlines the importance of the organism (adolescent) as part of his field and of not separating the two. Clarkson and Mackewn (1993:42) explained the field as “... all the coexisting, mutually interdependent factors of a person and his environment”. The theory regarding the causes of crime and youth misbehaviour (4.6.2) also emphasizes the interrelationship between the biological, inherent factors and those contributed by the environment. Shore (in Waldegrave & Waldegrave, 2009:8) explains this as follows: “Early life experiences are thought to have a decisive impact on the architecture of the brain and as a consequence, on capacities in adulthood. Early interactions and experiences directly affect the way the brain is wired.”. This fact is explained in the work by the developmental specialist, dr T. B. Brazelton, Purvis, and Cross, and became clear to the researcher in a recently attended workshop on the importance of early attachment (Ring, 2011). Bronfenbrenner’s bioecological systems theory (Bronfenbrenner & Ceci 1994:568-586; Paquette & Ryan 2001; Papalia, *et al.*, 2008:36) provided a model to examine the extent to which the adolescents’ environmental field provided the support needed for healthy, balanced development. It was found to be lacking on all levels and as a result all the systems failed to provide the support that the adolescent at risk needs. If the other subsystems in the micro-system provided the necessary support, the participants would

not have been so deprived of help in times of need. The inadequate support on educational level, as well as the other subsystems of the micro-system, is caused by inadequate structures on the macro level of support. If the support could be provided, the inherent potential for growth could turn the deficits into strengths and resilience (Brendtro & Du Toit, 2005:40).

**Chapter 5** was introduced by means of a summary of the previous chapters. In the following paragraphs the limitations of the study as well as the results of the study in the form of conclusions and recommendations for future research will be presented.

### **5.3 LIMITATIONS OF THE STUDY**

The study is limited by mainly the following factors:

The need for absolute confidentiality prevented photos of the total body maps from being included in this report, and seeing the effect of the tattoos spread across the surface of the body, especially in one of the participants. The impact of this is thus lost to the reader. The need for confidentiality also prevented all the information from being presented as a unit, which would have given a better overall picture, as information regarding the details of participants might appear sketchy and scrambled. The latter was also a result of the sketchy information provided in some of the probation officers' reports.

The sample was chosen on the grounds of the presence of both lesions and tattoos, and no attention was given to the type of tattoos when the sample was selected. The derogatory type of tattoos described in Chapter 1 was absent in the participants. The positive aspect of this is that if the researcher paid more attention to seeking specific types of tattoos, the emphasis would not have fallen on the major effect of gangs and the gang culture on the lives of the adolescents at the Special Youth Centre.

Other models do not include the chronosystem and important information is lost in this way. This is when a timeline is drawn and all the events of the past are noted on this line so that the accumulation of trauma can be appreciated. The researcher did not realize this at the time when the empirical study was conducted. It is therefore recommended that such a timeline should be used in future studies.

Much of the data had to be excluded, due to this being a dissertation of limited scope. It was also not possible to include much of the occupational therapy- and Gestalt play therapy theory as a result of the dissertation becoming too lengthy.

#### 5.4 CONCLUSIONS IN TERMS OF GOALS AND AIMS

The main and sub-goals of the study were accomplished. A summary of these follows in table 5.1.

**Table 5.1 Main and sub-goals**

**The main goal:** To explore how the technique of body mapping with unstructured interviews could be utilized to facilitate dialogue of life experiences connected to the scars, lesions and tattoos of adolescents at the Special Youth Centre.

The technique of body mapping facilitated dialogue to such an extent that sufficient and rich data could be derived and themes extracted for research.

**CONCLUSIONS:** Body mapping is a suitable technique for **improving awareness of the body** (2.3.1). The researcher observed how participant 4 touched places on his body where the tattoos were situated, and then drew them on the map. Whereas he used the tactile sense, P1 and P3 used vision by looking into the mirror to see where their tattoos were situated on their bodies and then drew them on the map. One of the participants spoke softly to himself (auditory) as he processed where his tattoos were situated. This illustrated the fact that there was a disturbance or delay in the integration of the different sensory systems and intellectual knowledge to know, without touching or seeing the tattoos, where they were situated on the body. This improved sensory contact led to improved intrapersonal as well as interpersonal contact, as they spoke with more freedom and ease than when they were just recapping (verbalising) in session three and not drawing or mapping as in sessions one and two. After completing the map, they stood back and looked at the map and their relative length and size, as well as other physical features of which they had become more aware, which also enhanced their awareness of their bodies. Both the occupational and the Gestalt therapist have the aim of improving the development of a healthy awareness of the body. This improves a healthy self-concept, thereby improving self-esteem. Oaklander (2006:50, 51) calls this a stronger sense of self, which she deems as an important stepping stone in the expression of emotions and contact with the world. Oaklander (2006:105) also asserts that “becoming more

aware is a key to building self-support and defining the self". Blom (2006:102) stresses that "children with a strong sense of self do not need to make use of contact boundary disturbances in order to have their needs met". Developmentally, the baby's first interaction with the world is through bodily contact and the sensors in the skin, muscles and joints provide the sensory information to the brain, where it is "perceived" and feedback then stimulates movement and further exploration. It is therefore the basis of sensory-motor development of the child, but also an inner psychological form of perception of who he is and how other people in the world react to him (body scheme). The perception of the body forms the basis of the rest of the perceptual development and sensory integration.

Body mapping **improved awareness, which stimulates learning**. Joyce and Sills (2010:105) postulate that "... improved awareness results in learning taking place as figures that lead to a good outcome are recognized and utilized again. This learning takes place after successful relationships with other people or with the environment took place". Gutman, McCreedy and Heisler (2004:13) propose that occupational therapists should aim at making their clients aware of the dysfunctional behaviour with the underlying assumption that awareness ultimately leads to change. They further propose that children should be aware of their own emotions in order for them to be able to manage these, and therefore need the suitable vocabulary to describe their feelings. Once they are able to verbalize these feelings, it is possible to bring less pleasant emotions to the surface (Gutman *et al.* 2004:13). As body mapping was found to be a successful tool in improving body awareness, it can lead to learning taking place on more levels than only the physical. The close link between sensations and emotions via the limbic system, and therefore the body sensations and emotional responses, makes body mapping an ideal tool to promote awareness on a sensorial and an emotional level. Incorporation of additional tools in the form of an emotion chart further promotes the identification of feelings by studying the expressions of the faces on the chart, and then learning the names of the emotions experienced.

Body mapping **opened up dialogue of a confidential and sensitive nature**, e.g. discussions concerning involvement in the Number Gangs. The participants might not have felt free to disclose such information in normal therapist/learner conversations. The same applies to the disclosed feelings regarding their relationships with their parents. This has to be respected and although revealed in the dissertation, care was taken to protect participants' anonymity. It should be stressed that the verbal extroverts seemed to disclose more, but for the introvert

who has few verbal skills, coming as far as admitting that he is saddened by the sight of his body covered with tattoos is of equal importance and just as big an accomplishment. Taking the process of the participant/client into consideration is important in order to be able to ascertain whether the body mapping session did indeed enhance dialogue.

Body mapping **improved emotional expression**. A variety of emotional responses were named by the participants, as mentioned in Chapter 3.

Participant 1 was uncertain or did not know the names of emotions and also had difficulty expressing emotions. When he looked at all the tattoos drawn on his body map, **his facial expression and description depicted sadness**; however, he did not name the emotion as sad.

Participant 2 was vocal and spoke openly about his views, but the tapping of the Koki pen while he spoke about controversial topics gave the impression that he experienced polarities which might have become dichotomies. According to Oaklander (2006:11), “adolescents are plagued by polarities, feeling one way inside and expressing [him-] self another way outside”. P2 named secondary emotions on the feeling chart, saying that he felt **regretful, frustrated, irritated, puzzled and miserable**, and it appears as though he might be intellectualizing and not expressing his primary emotions. He named his feelings of **pride**, as well as feeling “strong” when other men called him by his nickname and also due to being a member of the 26s Gang. P2 was very critical of his father, saying that the latter was not “there” for him.

Participant 3 tried to explain how he felt as he is Xhosa speaking and did not know the Afrikaans names. He described his **intense frustration** when he had been incarcerated for something he thought he had not done. He retroflected by making tattoos as a result of being unable to voice this frustration and anger.

P3 **felt proud** after saving a boy from a burning hut. He also said that he felt **proud and happy** about his body, but he was **unhappy** about all the marks on his legs, which he acquired during soccer and rugby games. He mentioned twice that he felt “**lucky** as God gave him another chance”. He felt **anger** after he had been stabbed in the back with a knife but although he wanted revenge he managed to overcome the feelings by playing with his younger brother.

P4 seemed traumatized by his alcoholic father and mother who also abused alcohol. He had



taken the role of the parent, caring for his mother and younger brother, which can be seen as examples of being an “overburdened child”. He related how he had considered suicide. He experienced **feelings of pride** when he started with classes for his confirmation. It appeared as though he **became dissociated** when he spoke about an injury when he had been stabbed with a broken bottle, as well as an incident when he had found his mother with a fractured arm. He **cried** about his deprivation and the agony of his feelings due to his parents’ alcohol abuse and the neglect that resulted from it.

P5 explained that he **nearly went mad with stress when his father died and his mother left for the funeral without him**. (When the adolescents at the Centre are cross, angry or upset, they typically refer to this as stress.) Having no other way of relieving the stress might have caused the act of retroflection, namely making the tattoos. He also became very **angry** with his brother who had stabbed him and wanted to retaliate by stabbing his brother. He did not mention any emotions regarding his mother. From these examples it is clear that body mapping evoked emotional expression.

**The sub-goal:** To explore the utilisation of body mapping as a research tool to generate data for this specific target group.

From the data extracted and the literature control enough material was generated to make suggestions for future research. It can therefore be concluded that body mapping proved to be useful as a research tool for data collection. (See **Suggestions for further research**, which follows after the conclusions.)

**Objectives** towards reaching the goals were:

- To compile a conceptual framework on relevant Gestalt theories and developmental theories, as well as body mapping.

**This aim was obtained.** A short description of body mapping was given at the end of Chapter 1. Chapter 2 presented an overview of:

- Gestalt theory as applied in Gestalt play therapy.

- Different developmental theories from the stages, occupational therapy and Gestalt developing field perspective.
- The paradigms of Gestalt and occupational therapy were compared – holism and the relationship were emphasised strongly by both.
- Research where body mapping was applied was studied, and the internet was also searched for applications within the South African context. The examples found had all been conducted with an emphasis on an art perspective, whereas in this context, more emphasis was placed on the body process perspective, as it fits in well with both occupational therapy practice and Gestalt play therapy. Both therapies work with the premise that the senses provides information about the body, and good integration produces a healthy body image, body concept and body scheme (occupational therapy) or sense of self (Gestalt play therapy). Alternatively, poor body integration has a negative effect on the development of the other perceptual functions, especially on body/space integration, spatial relationships and laterality. In Gestalt terms, poor sensorial contact leads to a poor sense of self (Oaklander, 2006:221). Both these view points lead to further implications, namely the effect on a healthy self-esteem and emotional expression.

- To conduct empirical research by utilizing body mapping during unstructured interviews as a research tool with selected participants.

This process was successful to the extent that rich data were gathered from the body maps and the dialogue, as described in detail in Chapter 3 (3.2).

- To analyse data and extract themes.

Four main themes with sub-themes were extracted from the dialogue (3.7.2 – 3.7.5).

In the area of *belonging* in the Circle of Courage:

Theme 1: Emotional responses with regard to RELATIONSHIPS. From the dialogue it was found that the participants had poor relationships with their families, friends and own bodies, which impacted on their health, church/religious community, language and places where they live. This indicates *poor belonging in their whole ecological system*.

Theme 2: Emotional responses and reactions to FAMILIAL TRAUMA: The trauma suffered

at home further strengthened the theme of *poor belonging in their microsystem*.

Theme 3: Emotional responses and reactions to OTHER TRAUMA: This information also pointed towards *poor belonging* in their community/micro- and ecosystems and macro- and exosystems.

Theme 4: Emotional responses in the period before the TATTOOS were made indicated that **tattoos were made as a sign of belonging, as well as an embodied form of identity**. However, afterwards there were **feelings of regret** and a desire to remove them, as experienced by four of the five participants.

In the area of *mastery* in the Circle of Courage: Participant 2: **Tattooing was proof of mastery in antisocial activity or delinquent skill**.

In addition to these four themes, **additional themes were implied** through the additional information derived from the learner profiles, the probation officers' reports, the occupational therapy intake forms as well as the literature control.

*Implied themes of distorted independence* were evident in: reckless/macho behaviour, bullying others, being manipulative, not being able to resist peer pressure, being rebellious, defying authority, making poor choices, poor responsibility and sexual prowess.

*Implied themes of distorted generosity* were evident in: bondage to gangsterism, over-involvement with antisocial peers, gangs, servitude to them, poor insight into feelings of others, unproductive roles in family and the community, and little respect shown to other people or their belongings.

It can be stated that this goal was successfully achieved, as four main themes were extracted from the transcriptions. The vague themes which were suggested by the transcriptions were fully endorsed by the additional information from the other data sources forming the implied themes.

- To conduct a literature control by means of data triangulation. This objective was addressed in Chapter 4 and proved to be difficult due to the volumes of information that had to be integrated. The emphasis fell on the needs of the participants and different

motivational models were applied. The Circle of Courage model (as prescribed by WCED) was applied as the literature control as it forms the basis of the evaluation of youth at risk by the probation officers. The Circle of Courage is used in conjunction with the Developmental Assessment and Individual Developmental Programme at the centres of secure care and the Special Youth Centre. Bronfenbrenner's bioecological theory (Dietrich, 2008:71) put the perspective on the field of the adolescent. Different theories regarding the causes of criminal behaviour in young people were studied. The same information was gained from different perspectives, namely that it is the interdependence of biological and social factors working together which places the adolescent at risk of offending (Bronfenbrenner, 1994; Perry, 2000; Maree, 2003:52; Western Cape Status of the Youth Report, 2008; Waldegrave & Waldegrave, 2009).

The aim of the literature control was successfully concluded.

- To compile a research report with conclusions and recommendations.

Chapter 5 is the culmination of the process of executing the above-mentioned objective.

#### **5.4.1 Conclusions in terms of the extracted themes**

##### ***Theme 1: Poor relationship with caregivers***

The relationship themes (3.7.2.:i-x) confirmed the importance of a stable relationship. According to Crawford and Walker (2003:45), the initial attachment theory (Bowlby, 1953; 1969; 1973; 1988) put emphasis on the role of the mother and child relationship. More recent work emphasizes the role of a caring relationship which could be supplied by the father or other carers. More recent research confirming the importance of belonging and attachment is provided by Bronfenbrenner (1994), Ainsworth (2005), Bowlby, (2005), Brendtro and Du Toit (2005:57), Cabe, 2005, and Waldegrave and Waldegrave, 2009. The themes extracted did not necessarily bring new information to the fore, but confirmed the belief that *belonging* is crucial in the development of a young child, continuing through adolescence when stable and firm role models are needed. When the bonds of belonging are strong, the adolescent will develop healthy mastery and independence. However, the broken bonds at home and specifically the absent father figure have a detrimental effect on the developing (male)

adolescent, as these distort his forming of identity, which includes a sexual and occupational identity as well as a personal one.

Max-Neef (1991) indicated in his Human Scale Development that any fundamental human need which is not adequately satisfied generates pathology. This notion is described in Liese's (2003:168-9) causal factors of youth criminality, where she indicates that many young people living in economically impoverished areas do not engage in criminal behaviour, whereas others in the same economic circumstances also have poor socio-moral reasoning and therefore engage in criminal activities. Liese (2003:168) describes Payne's (1998) framework for understanding poverty where he postulates that poverty is the extent to which a person has to go without resources, and the resources for survival and success include financial, emotional, spiritual, mental and physical support systems, relationships and role models and knowledge of hidden rules. Liese (2003:168) continues by saying that "of particular interest is Payne's assertion that young people need emotional resources in order to have the stamina to withstand difficult and uncomfortable emotional situations and feelings". Garbarino's (1999) emphasis on the importance of a child feeling loved by a person with whom he has a strong attachment as being a critical component influencing his capacity for resilience is also included by Liese (2003:168). Feeling loved and having a sense of belonging are not only strong needs of children, but also resources aiding healthy development (Brazelton, Cross & Purvis in Ring, 2011). This supports the view of Brendtro, Brokenleg and Van Bockern, presented as the Circle of Courage (4.4), and Brendtro and Du Toit's (2005:43) Code of Resilience (4.4). This is substantiated by Max-Neef's theory that needs can also be suppliers. Liese (2003:168) asserts that young people who grow up feeling emotionally impoverished may find themselves in "a chronic pattern of deep emotional pain that directly influences their actions and behaviour". In addition to the chronic pain, the experience of rejection, abandonment and abuse is likely to elicit additional feelings such as shame, fear and anger (Liese, 200:169). Salovey and Sluyter (in Liese 2003:169) found that when victimizers show little empathy and sympathy for their victims, there is a lack in competence for developing pro-social behaviour and thus a lack in the capability to show *generosity* (4.4). These feelings are further motivation for low-level socio-moral reasoning resulting in aggression and violence (Liese, 2003:169).

When these relationships of the participants are compared to the studied theories, the following conclusions can be reached:

Conclusion: Attachment and belonging are crucial for the healthy emotional and psychosocial development of a child/adolescent.

New research has proved that caregivers play an important role in helping infants learn to moderate and regulate their emotions. This is supported by Paquette and Ryan (2001:3, 21):

It is the richness of the environment in the micro-system that is important to the development of the child. The mother-child, father-child, and father-mother pairs (or dyads per Bronfenbrenner), being the basis of the early microsystem, can be seen as being most influential at that stage ... Much of a child's behavior is learned in the micro-system, though as the child ages, the other, more distant, systems will have increasing influence. ... Similar behavioral variations can come from emotional causes such as stress, depression, and grief.

Bronfenbrenner (Paquette & Ryan, 2001:23-25) outlines five propositions (4.2) that describe how relationships developed at home and at school work together for positive development. Children need these interchanges at home and at school or childcare (mesosystem), while parents need these interchanges in their neighbourhoods and workplaces. The relationship between the child [adolescent] and his parent(s) requires assistance from a public system of support and an affirmation of the importance of these roles. Public policies should allow time and resources for these relationships to be nurtured (macrosystem).

Strong relationships are important throughout the developmental stages, especially in adolescence when stable and firm role models are needed. When the bonds of belonging are strong, the adolescent will develop healthy mastery and independence.

Conclusion: The relationships sketched by the participants in their dialogue show shortcomings on all the above-mentioned levels. It also depicted that they lack support in all ecological systems, as explained in Bronfenbrenner's five propositions. Research provides strong evidence of the importance of having a strong relationship with a caregiver to form healthy attachments and an "internal working model" (Ring, 2007; 2010) which enables the child to become a capable and loving parent. It has now also been indicated that poor attachment can lead to different psychopathologies (Cozolino in Waldegrave & Waldegrave, 2009:13) (refer to 2.4.1) as well as possible criminal behaviour (Waldegrave & Waldegrave, 2009:107). It also shows that the relationship with the basic caregiver enables the child to form relationships in the wider micro- and mesosystems. The aforementioned research therefore explains the reason for the delays in emotional development as well as the tendency towards criminal behaviour exhibited by the participants in the study.

The broken bonds of belonging of the participants, and specifically between the sons and their fathers, have an impact on their development. According to Erikson, the adolescent's identity forms as he resolves three major issues, namely the choice of an occupation, the adoption of values to live by and the development of a sexual identity (Papalia *et al.*, 2008:469). A father's frequent and positive involvement with his child, from infancy onwards, is directly related to the child's well-being and physical, cognitive and social development (Cabrera, Tamis-LeMonda, Bradley, Hofferth & Lamb in Papalia *et al.*, 2008:390; 469).

Conclusion: The absent father figure has a detrimental effect on the developing adolescent as it affects the forming of the male identity, work identity and social and moral behaviour as well as his sexual identity.

lives of the participants as well as the rest of the population from which the sample was taken is reflected in their poor belonging, mastery, independence and generosity. Pinnock (1997a:8): "Not receiving any blessing from your father is an injury and, as Robert Moor has said: "If you're a young man and you're not being admired by an older man, you're being hurt". The Circle of Courage originated from the Sioux culture, where the role of the wise older man and male role model is ever present, leading the young boy into adulthood with stories and encouragement, providing an example as well as guiding the adolescent with regard to his role. The Native Indian people of America teach their sons and grandsons and are role models of the father being involved in bravery to protect his own as a sign of generosity (Brendtro & Du Toit, 2005:44). This bravery is distorted in antisocial gang wars. Pinnock (1997) maintains that involvement in gang wars is an expression of youths seeking acceptance into the adult world and is a substitute for the initiation practiced by many cultures but which is absent in the coloured community. He warns as follows:

"If a culture does not deal with the warrior energy of its young men and the spirit energy of its young women – take it in consciously, discipline it, honour it – it will turn up outside in the form of gangs, wife beating, depression, drug violence, brutality to children and even aimless murder" (Pinnock, 1997a:6).

By the participants' dialogue it became clear that the physically and emotionally "absent father", as well as the alcoholic and abusive father, plays a major role in dysfunctional relationships. This fact is substantiated by Bezuidenhout and Tshiwula (2008:98) when they

name “being rejected and abandoned by parents and, for males, perhaps particularly by fathers” as one of the factors contributing to juvenile delinquency.

Conclusion: The qualities of the four quadrants of the Circle of Courage has to be modeled to children by both fathers and mothers, as both parents bring different qualities to *belonging*, *mastery*, *independence* and *generosity*. As these qualities constitute the basic needs of children, if they are not supplied at home, the child seeks them outside the home and then they become distorted and can lead to antisocial and eventually criminal behaviour.

“Although adolescents long for greater freedom, they still need the stability of a loving home to return to and to use as a sounding board against which they can sound all their new-found ideas and role models” (Bowlby, 2005:12). If they do not have this at home, they are pulled towards unhealthy relationships with deviant peers and groups such as street and Number Gangs where they find a sense of belonging and mastery, as explained by Participant 2 (3.7.2.ii).

Conclusion: The absence of a secure base and belonging at home creates push factors, and the lure of belonging to a deviant peer group by becoming a street kid or joining street or Number Gangs provides pull factors, moving them away from the home and onto the streets.

*Generosity* is developmentally the last to develop and is also negatively affected if the other quadrants of the Circle of Courage are affected. According to Piaget’s theory of cognitive development, the child outgrows the stage of egocentricity during the middle childhood years (Phillips in Oaklander, 2006:8) and there is a shift towards incorporating the needs of other people. Toman and Bauer (2005:187) describe this as developing from egocentricity to companionship. This develops in contact and socialization with others (Toman & Bauer, 2005:188). Research (Shore in Waldegrave & Waldegrave, 2009:5) found how important pleasurable and loving experiences with at least one caring adult are for the maturing of the orbitofrontal cortex and the development of the social brain and emotional intelligence,



learning to regulate their emotions and engage in increasingly complex interactions, picking up everything from language and writing and important social and moral skills, such as knowing how to control emotions and desires and having empathy for others.

Conclusion: One of the detrimental effects of an emotionally deprived childhood is that it stifles the emotional and moral development of the child, which predisposes him to criminal tendencies. It is a function of having had a loving relationship (nurture) which then enables the development of the genetic ability (nature). It also affects cognitive development such as language and writing skills, which cannot develop optimally when under stress (Hannaford, 2005:62, Brendtro & Longhurst 2005:54).

The implied themes depicted the unhealthy relationships/distorted generosity displayed in gangs, where there is no real feeling of generosity and love, but where it is substituted with a distorted bondage and fidelity, staying true to the codes of the gang despite the desire to break free.

Conclusion: Gangsterism has a negative effect on generosity. The needs of individuals are sacrificed while the ethos of the gang is favoured.

### ***Theme 2: Abuse in the family***

The participants' dialogue expressed the **pain of trauma and neglect suffered at home** instead of them receiving the love, care and nurturance that every child is entitled to. This correlates with research done on criminogenic factors and causes of criminal behaviour in adolescence. The research findings reported by Waldegrave and Waldegrave (2009:10) emphasize "the importance of early life experience; the significance of the interaction between genetics and the environment in brain development; the powerful impact of early relationships as a source of encouragement and adaptation or risk and unpredictability; and the negative consequences of sustained stress and threat". The *Health Times* (2011:6) reports findings published by Waldegrave and Waldegrave to the effect that in circumstances where neglect and abuse abound, the development of children are seriously affected, leading to long-term impairment of intellectual, emotional and social functioning. The authors state that

ultimately “the adult’s willpower, self-control and empathy and ability to modify immediate impulses could be affected”. Perry (2001) also warns that permanent changes take place in the brain of a developing child if he is constantly in a state of fear as a result of abuse in the home.

Conclusion: Children who suffer from abusive situations at home function in a state of “fight or flight”, which prevents them from developing cognitively. They often do not adapt at school as a result of expectations that they cannot fulfill, as their development has been affected negatively by constantly functioning in a state of hyper-vigilance. The emotional environment is therefore critical for the development of the child’s ability to learn and grow” (Hannaford, 2005:62).

Abuse at home (neglect is also a form of abuse) cause push factors, forcing children out of the home and onto the street where the pull factors are feelings of belonging and acceptance amongst peers.

Conclusion: When adolescents had lived on the streets, functioning within either informal or more formal street gangs. they often have an abnormal type of streetwise independence. The contact they do have with the environment is unhealthy and not conducive to normal child and adolescent development. Their expertise lie in the field of subversive activities and undermining the morals and laws of the wider community with their drug abuse and criminal activities, such as housebreaking and theft, robbery, rape and even murder

### ***Theme 3: Other abuse***

As is clear from Chapter 3, the participants were subjected to many instances of violence at young ages. Apart from the abuse suffered at home at the hands of parents and substitute parents, their siblings and friends also resorted to using violence. Using a knife to resolve small issues such as eating a brother’s plate of food

Conclusion: Instead of following the leadership of good male role models, which are lacking in their lives, the participants idolize and follow tough gang members and “merchants” who promise them riches and guns in exchange for pedalling drugs. This leads to a distorted

independence and mastery.

- Some of the parents exhibit poor / non-constructive methods for solving problems. Methods used to solve conflict in the home are often violent in nature and are copied by the children. The participants were stabbed by siblings, friends, as well as by other adolescents whenever there was conflict.
- Fights/gang war between members of different gangs cause severe injuries and sometimes even death. Injuries within a gang can be sustained when transgressions are punished.
- Abnormal sexual relationships between same-sex partners, where one partner has all the power and the other none, also affects their relationships with women when they return to the community and resume heterosexual relationships. This is described at length by Jensen (2008). It has a profound effect on adolescents' morals and causes a general lack of respect for women and other people in general, swearing and the sexual exploitation of other boys. Of particular concern is the finding that rape is a common occurrence in the participants' fields, being either experienced by them or perpetrated by them. (Due to the sensitivity of such information, it can only be said that two of the participants had been involved in exploitation of this kind.)
- Children who are victims or spectators of domestic violence, have a high risk of displaying sexually harmful behaviour (Lovell, 2002:3). A study reported by Maree (2008:66) state that child victims are more likely to interpret violence as normal in intimate relationships. "This means that the child victim and the offending child are often the same person at different stages of his or her life".

#### ***Theme 4: Tattoos***

Conclusion:

- Tattoos were made under stressful conditions when there were limited ways of externalising the anger and frustration experienced, and as such they could be seen as a form of retroflection. Two of the participants made tattoos during the time spent in prison

as a result of the absence of constructive ways and means of relieving stress, turning the stress on the self instead of externalizing it.

- **Incarceration of adolescents in prison links with the acquiring of tattoos:** Although there is legislature against incarceration of adolescents except under extreme circumstances (The Constitution of the Republic of South Africa, Act 108 of 1996, Section 28), it is still common practice (two out five participants had spent time in prison). It was found that the Number Gang tattoos had been acquired while they had been incarcerated in prison. Tattoos are proof and a visible sign of belonging to the gang, and therefore provide a form of protection against other Number Gangs. The tattoos denote to which gang the tattooed person belongs, as well as his rank.
- Tattoos were made to prove belonging to a group or gang when belonging at home was poor.
- P2 made tattoos to prove his mastery of devious and antisocial deeds which proved his worthiness of belonging to the gang.
- Participants later regretted making the tattoos, realizing that they have a detrimental effect on their ability to integrate into society and find employment.
- Tattoos can be an external expression of emotions experienced, e.g. when longing for someone, the person's name is tattooed onto the body.

#### **5.4.2 Conclusions in terms of implied themes:**

The implied themes of *distorted mastery, independence and generosity*: The antisocial activity or delinquent skill of Participants 1, 2 and 3 eventually led to their incarceration in prison, joining the 26s and 28s Number Gangs and donning their tattoos. Participant 1 was introverted regarding his expression, both verbally and emotionally. It is not clear whether this is due to his personality type (introversion) or his allegiance to the 28s Number Gang, which prohibits him from talking about the Gang. He did, however, admit to the fact that he was deeply involved and could not see himself breaking free. He also spoke about “when I go to prison again” as though this was inevitable. Participant 2 was more vocal regarding his

allegiance and said that he wanted to break free, but he later said that he won't be able to: "Once you're in, you can't get out again"; "Want hoekom, as jy in die ding is, dan kan jy nie uit nie." This view is substantiated by Parker Lewis in her work *God's Gangsters* (2006:30):

They have a strong sense of loyalty to the gang and fear of unspecified consequences plays a major role in ensuring that this devotion to The Number remains paramount above all other issues – including that of personal safety. In the process the gang members destroy their own opportunity to rehabilitate or to consider the true meaning of restorative justice. They forego the possibility of making sincere amends to society and to their victims.

Participant 5 had been lucky, as he was given another chance and was not incarcerated in prison. He did have 28s Number tattoos; however, he was unwilling to admit to his knowledge of these being Number Gang tattoos.

In prison they are confronted with the Number Gangs and often forced to join them in order to survive. The indoctrination of the particular Number Gang starts when joining the Gang. This indoctrination is severe and is mainly done at night when the litany of the number that they belong to is learnt by heart. They learn to speak the language or sabela, use the hand signs and learn the tokens, such as the uniform, the flag and the structure and ranks of the gang. During the time spent in prison two of the participants made tattoos as a result of retroreflection, or turning the stress on the self instead of externalizing it. In the absence of any other ways and means of relieving stress, this could thus lead to tattooing. Being younger and of slighter build than older inmates immediately puts the adolescent at a disadvantage in terms of the hierarchy and gang structure in prison. The adolescent has to conform or is forced to conform by violent measures. There is ample literature on the sexual exploitation of men by other men in prison (Cilliers, 2006:71; Parker Lewis; 2006:152; Jansen & Mohamed, 2011:03).

Vygotsky (1987) in Rodger and Ziviani (2006:xi) believed that children learn primarily through their social world, which is the source of all their concepts, ideas, facts, skills and attitudes. Rodger and Ziviani (2006:xi) assert that "constructivism recognizes the unique place of roles in providing a framework for the acquisition of knowledge and skills necessary for assuming a productive and acceptable place in the world". The roles acquired in prison would not serve the adolescents well and would not contribute to positive development. Even if they do not partake in the devious gangster activities in prison (as described by Parker

Lewis, 2006), the mere observation of those is detrimental. Christiansen (in Rodger & Ziviani, 2006:ix) asserts: “To observe is to participate vicariously and children [adolescents] are keen observers of their worlds.” It is an enrolment in an antisocial education of far-reaching proportions and leads to bondage to a system which is perceived as having benefits, but in actual fact only has detrimental effects which can be life-long, as such adolescents find it almost impossible to break free even if they want to, as they seemingly believe that this is not possible.

Conclusion: Imprisonment has only negative effects on the adolescents (Pinnock, 1997a:3):

“Indeed, gang formation is an attempted defence against personal pain and isolation which state-inflicted punishment simply compounds.”

Another detrimental effect is the practices between same-sex partners in prison which affect the development of a normal sexual identity, thereby also affecting the normal moral and spiritual development of the adolescent.

Adolescents acquire a sense of having no future except one in prison or within the gang structure. It seems as though they lose all hope of ever rejoining mainstream social life without crime and gangsterism.

## 5.5 RECOMMENDATIONS

*In terms of dialogue:* Hycner (1995:7) emphasised that dialogue “is an approach to others; it should not be equated to speech”. Dialogue requires the ability to listen, and not only hear, and recognize non-verbal forms of communication, such as body language and eye contact. Beisser’s (1970) paradoxial theory of change has to be taken into consideration in order to accept the adolescent client as he is, without having the unconscious desire to change him. Only then change can occur. This is especially important with the adolescents in the Special Youth Centre due to their engagement in antisocial behaviour and criminal deeds.

Recommendation: Although the researcher found that body mapping is a valid tool for opening up and enhancing dialogue with adolescent boys in a Special Youth Centre, it is important to pay attention to the form/quality of the dialogue during the unstructured interview. The tool of body mapping on its own is not the only factor at play. The Gestalt

view of the dialogic relationship has to be applied.

*In terms of improving awareness and the application of body mapping:*

Participant 2 often responded verbally while tapping a Koki pen, which became very loud in some instances. It was noticeable that P2 started tapping the Koki pen each time when he said something of contentious value and in a therapeutic situation this would have been followed up by drawing his attention to that fact to increase his awareness and help him express his true feelings, or the polarity of the feelings. It could thus be interpreted that being unaware of his true feelings, or the polarity of the feeling which he expressed, limited his ability of knowing himself and therefore making healthy choices.

According to Wright and Oliver, and Humphreys, as quoted by Blom (2006:102), childhood experiences of a loveless and harsh nature cause a poor sense of self and result in contact boundary disturbances in order to protect the self against further pain. Desensitization is one of these, as it “deadens” the senses to further pain, but also to other, potentially pleasing sensations. The harsh childhoods experienced by all the participants, and by P2 to a lesser extent, could have resulted in the inability to recognize true feelings and make use of healthy ways to express their feelings.

Recommendation: Further research into the application of body mapping as a tool for improving awareness and intra-personal contact. This refers to being aware of what is happening in the body, with feelings, needs and desires and between the two sides of a polarity, or different aspects of the personality.

Meyburgh (2006:5) reports that traumatized individuals often use alcohol and drugs to numb the pain connected to their trauma. Kepner (2008:xvii) recommended using body process methods with people who are addicted to alcohol and/or drugs for the following reason: The addict has to work on reclaiming all the hurts and feelings which are part of his bodily self in order to become integrated and move on to higher levels of functioning, and this is an area where body process work is useful. This statement by Kepner substantiates the use of a tool such as body mapping with the population at the Special Youth Centre, of whom almost all are regular alcohol and/or drug users.

Recommendation: Research should be done regarding the application of body mapping in programmes for drug rehabilitation with the aim of enhancing awareness and improving integration between mind and body, as well as expressing hurts related to abuse.

***In terms of attachment:*** The study for the New Zealand Health Commission Fund resulted in the Chief Families Commissioner saying that it showed how important it is for governments and society to value parenting and create environments that support strong, resilient and loving families in which children can be raised (*Health Times*, 2011:6). **Family harmony and the family as a unit remain the basis for any successful interaction with the youth. If there is inadequate support from the family unit, then interventions focusing on youths are less likely to be successful. Therefore, youth interventions should also take into consideration changing the habits of the family unit.** “If caregivers had attachment problems with their own parents, they will be more likely to parent poorly” (Perry in Waldegrave & Waldegrave, 2009:28). For the cycle to be arrested, it is necessary to provide enriching and nurturing early experiences and interventions to help those who are currently neglected, and education and support for the parents and caregivers to reduce the likelihood of neglect in the future.

Bronfenbrenner also sees the instability and unpredictability of family life as the most destructive force in a child’s development (Dede & Paquette, 2001:3). Children who look in vain for the affirmations that should be present in the child/parent (or child/other important adult) relationship seek attention in inappropriate places. These deficiencies present themselves, especially in adolescence, as anti-social behaviour, a lack of self-discipline and an inability to provide self-direction. According to Dede and Paquette (2001:3), Bronfenbrenner advises the following:

It is in the best interest of our entire society to lobby for political and economic policies that support the importance of parents’ roles in their children’s development. Bronfenbrenner would also agree “that we should foster societal attitudes that value work done on behalf of children at all levels: parents, teachers, extended family, mentors, work supervisors, legislators.

**The probation officers’** reports fail to mention any intervention with the parents so as to work on the root of the problem, which often includes factors at home, such as alcohol abuse,



an absent father, abusive relationships, economic hardship, or a lack of support from the meso- and exosystems. Probation officers' reports often mention that the parents cannot control the adolescent and that it is therefore advisable to refer him to a Special Youth Centre where there would be stricter discipline. In some instances these adolescents have moved from one centre to another and have spent a few years away from home. Inevitably they have to return home at some time, where there has often been no intervention and little change in circumstances.

***In terms of intervention at a community level:***

**Recommendation:**

- Every effort should be made to develop happy or at least supportive environments for young children, be it at home, pre-school or after-care. When they do not experience mastery at school, they do not experience school as a happy place. If the school environment could be more accommodating for children whose home circumstances are often unstable, providing at least some hours in which feelings of joy and security can be experienced, it should be developed in order to develop the children's cognitive potential. Community programmes at churches or other religious centres and municipal clinics/centres, run on a regular basis in communities, should be advocated, providing fun and games for the whole family, including both the caregivers and the extended family and children, to strengthen bonds and teach ways of experiencing fun as a family without having to spend money.
- Developing an empowering programme for parents to provide them with parenting skills, enhancing constructive problem-solving skills and disciplinary measures.
- Programmes to improve attachment with adolescents can be applied in the above-mentioned format by researching work on attachment programmes, e.g. "Theraplay with adolescents" (Munns, 2005:31) and "Guidelines for alternative caregivers to enhance attachment with the traumatised child" (Nieuwoudt, 2008). A programme could be introduced at primary school level to teach parenting skills and empower children to whom attachment behaviour is not modelled at home.

***The language of the Number Gangs:*** “Sabela” is used by members to communicate in a way which only they understand and which shapes their perception in such a way that it later becomes their reality. The sexual deeds, stabbings and drug trade in prison become their new reality and they are indoctrinated to such an extent that they do not know other ways of perceiving their anti-social acts once they leave prison. Jordaan and Jordaan (1998:345) postulated that the Sapir-Whorf hypothesis can be reformulated by stating that “people of a particular cultural community formulate, inter-subjectively, perceptual ‘rules’ which enable them to make sense of reality. These rules are necessarily incorporated into the language of that community and thus shape the perceptions and behaviour of its members”. This would also apply to a community marginalized from society, and to youths having been incarcerated at a young age. To make sense of such distressing circumstances, the adolescent will be obliged to conform in order to survive.

Recommendation: Research is needed to counteract the psychological grip that Sabela and the rest of the indoctrinated gang perceptions have on adolescents in prison and other places of secure care.

Further research on this topic could supply interesting material; however, this would fall more in the field of sociology and not so much in the field of occupational therapy. A stimulating physical and academic programme providing very little time for these controversial and anti- social practices should be applied, especially in prison.

***Socio-economic factors*** may influence the development of anti-social behaviour. Poor children are more likely to commit anti-social acts (Burke, 2008:200; Western Cape Status of the Youth Report, 2008:107) and those whose families are continuously poor tend to become more anti-social with time (Papalia *et al.*, 2008:493). The child relies on the mother for providing in basic needs and for the caring and tender role that she should be fulfilling in terms of attachment and bonding. This is often neglected in her quest to provide for the child in monetary terms if there is no father providing for the child. In the absence of caring fathers, the mothers carry too many responsibilities and fail to provide the necessary nurturing role. Many of the adolescents at the Centre were raised by their grandmothers as the mothers had left the rural areas where they had lived in order to work in Cape Town (according to the probation officers’ reports). The result is that most of the adolescents grew

up in households where both the father and mother were “absent”. The importance of family support is clear from the following: “A stable and emotionally supportive family life can result in better school performance; higher levels of self-esteem; a reduction in aggression, substance use and crime; and a greater ability to deal with hardships (Waldegrave & Waldegrave, 2009:107).

Recommendation: Further research is needed, incorporating both Bronfenbrenner’s bio-ecological theory (1994) and Max- Neef’s (1991) theory on endogenous suppliers, which simultaneously provide in more than one need.

Recommendation: With good social connections in a neighbourhood, a disadvantaged community and the extent to which residents monitor or supervise each other’s children can influence positive outcomes. A combination of effective parenting and collective efficacy can discourage adolescents from associating with deviant peers (Brody in Papalia *et al.*, 2008:493).

**Substantial improvements** have been found in **children who had been removed from environments in which they had been severely neglected and then placed in *foster care*** (Perry & Pollard; Perry in Waldegrave & Waldegrave, 2009:27). The frontal-occipital circumference (FOC) (considered to be a reasonable measure of brain size in children) of the neglected children was measured at the time of removal and again a year later, and was compared with age-specific norms.. As with the Romanian orphans, the recovery was more robust when less time was spent in a sensory deprived environment.

Recommendation: Early adoption of neglected children or their placement in foster care seems appropriate to maximize the development of these children. However, there are also reports of the detrimental effect of removing children from their parents, separating siblings and the inability of children to adapt in foster care. Research into alternative methods of providing the necessary support for the parents while also providing the necessary stimulation for the development of the child/children seems a viable alternative.

### ***Recreational activities***

The chronic lack of good and easily accessible recreational activities has an impact on youths' and criminal behaviour. The Western Cape Status of the Youth Report (2008:107) states that "young people who are active in some form of organisation, whether it is a youth club or a church, cultural or sports group, are less likely to fall through the cracks of society and engage in risk and self-destructive behaviour". The results of a survey showed that 75% of those surveyed had never participated in a community sports team, 75% had never been involved in a community society or club and 80% had never been members of some form of community organisation. Comments by a member of a focus group clearly illustrated this (Western Cape Status of the Youth Report, 2008: 107): "... they come from a community that has a lot of gangsters, no sporting facilities or recreational facilities; all they do is stand around on street corners."

Recommendation: Communities should be developed around a core of schools, community centres and sport fields, where adolescents can be kept busy constructively. Jensen (2008) reports that soccer plays a major role in some of the areas on the Cape Flats. It is one of the measures by which someone wanting to break free from the Number Gangs can win back some respectability by taking part in team sports such as soccer, rugby and hockey.

### ***Employment***

South Africa has a major problem with unemployment. Official figures given in the 2004 Census Statistics show unemployment to be as high as 39%. The Western Cape Status of the Youth Report (2008:107) mentions that:

Young, unemployed people tend to live in poverty and this in turn has an adverse effect on the growth and development of individuals and communities. Youth are unable to complete their education for a variety of reasons, are therefore unable to obtain gainful employment which in turn increases their rate of vulnerability towards crime or coming into conflict with the law.

According to Johnstone (in Western Cape Status of the Youth Report, 2008:107), "many marginalized youth often turn to criminal activities like drug dealing, car hijacking, gangsterism and terrorizing communities". One of the biggest hurdles facing the adolescents

after they leave the Centre is the fact that they have to compete with many other people who are seeking employment. Taken their poor academic and life skills, few are successful. Although they are taught entrepreneurial skills at the Centre and also receive technical training, they are often still too young (15 to 18 years of age) to enter and compete in the open labour market. They also lack the skills to start an entrepreneurship due to the fact that their academic skills do not equip them for the necessary business skills. Given their histories, they often have not had the privilege of having a father or male breadwinner with a permanent job, with the bonus of having a role model displaying good work habits, persisting under adverse circumstances and spending his salary wisely. They are therefore not in the position to start their own entrepreneurial business and need some form of assistance to exercise their skills.

Recommendation: Community projects where young adolescents can be employed in a variety of jobs, giving them the opportunity to learn the necessary skills to become entrepreneurs while receiving the necessary supervision, teaching and financial aid. When completing their hand- made articles, the latter can be sold under the auspices of the controlling body at the Centre, who can then pay them their portion of the proceeds from the sale. Others might be able to provide services, such as washing cars, cleaning shop trolleys, garden services, etc.

***Drug and alcohol abuse*** have become one of the tendencies amongst the youth of South Africa, causing concern in all the sectors of the ecological system. Answers to the problem of how to curb the escalation and how rehabilitation could be provided for the growing numbers of addicted young people have to be found. Drug abuse leads to increased crime, as money is needed for drugs. Although alcohol and drug use and abuse are a result of alienation, unemployment, despair and lack of education, the consequences affect the community as a whole. Violent crime is often a result and the victims are often innocent, law-abiding citizens who have to suffer the consequences. Trying to provide in rehabilitation services is a one-sided approach and does nothing on a preventative level. Addressing the problem in all the systems of the ecological field may provide answers. Bronfenbrenner (1994: 576) stated the following:

In short, environmental contexts influence proximal processes (mechanisms, through which genetic potentials are actualized ) and developmental outcomes not only in terms of the resources that they make available, but also in terms of the degree to which they provide the stability and consistency over time that proximal processes require for their effective functioning.

**Recommendation:**

In the family context, the areas where most efforts should be concentrated appear to be attachment and belonging.

Providing recreational activities, centres where families can have fun together, job opportunities, special support at school and counseling after trauma, such as the loss of a parent or abuse, is crucial.

Drug and alcohol abuse are often attempts to forget or drown pain and memories connected to trauma and abuse. Therapeutic services after trauma and abuse are indicated. The benefits of using body mapping as a concrete tool to facilitate dialogue could be beneficial to occupational and Gestalt play therapists in settings where drug and alcohol abuse are treated.

*The chronosystem* which Bronfenbrenner included in his bio-ecological system does not receive much attention in the other research material mentioned. As the researcher conducted unstructured interviews, specific attention was not paid to the ages of participants when traumatic incidences had taken place. A later effort at constructing “time lines” had missing details. It was nonetheless noticeable how many traumatic changes or events had taken place at 12/13 years of age. It is also often not one traumatic incident but a constellation of events following on each other which is depicted by the chronosystem. Research by Elder (in Papalia *et al.*, 2008:17) showed that trauma occurring at different developmental stages can have different outcomes, as the child/adolescent is more vulnerable at specific ages.

**Recommendation:** Specific attention to the chronosystem could provide important information regarding the age at which extra provision could be made to support pre-adolescents in vulnerable communities.

*Aftercare and reintegration programmes:* The researcher has already commented on the poor support at home after learners return home and the fact that they find “that nothing has changed at home”. The system of alternative care has been developed with the aid of the Interministerial Commission and the researcher Pinnock. Although much planning and care had been given to legislation and special programmes for learners in alternative or secure care, there are shortcomings. The main problem is highlighted by Rossouw’s (2009:52) report regarding support for learners who return home after “alternative care”:

It is required by the Children’s Act 38 of 2005 (RSA, 2005) that outreach, aftercare and reintegration programmes must be offered to children in alternative care. The children and youth must be provided with the appropriate rituals, programmes and support to make possible their effective disengagement from the YCEC [Youth Care and Education Centre] (WCED, 2004b:52).

In line with the recommendations of Bronfenbrenner (1979), service providers should ensure that the learners will have a supportive ecology around them when they leave the YCECs (Brendtro, 2006 cited by Rossouw, 2009:52). This includes the provision of resources to assist children in finding somewhere to live and employment, as well as building relationships and gaining access to services Children who were reintegrated into their families and communities after some time in an institution indicated to researchers that they had been ill-prepared for such reintegration. They expressed the view that the institutionalization threatened their normal development and that most of them had experienced their stay in the institution as being harmful. Many of these children found it difficult to manage outside of the institution Reasons why children and youth experience problems after their return to their homes have been cited as the longstanding nature of their problems (that led to them being referred to the 53 institutions in the first place), a lack of change in the environment, and the absence of after-care services (Leichtman & Leichtman as cited by Nickerson *et al.*, 2007:74). It is, therefore, important that this minimum standard should be adhered to.

Recommendation: Support in all the systems of the adolescents’ ecological system would be advisable. Rather than removing adolescents from home and sending them to a centre far from home, which brings greater separation from the caregivers and parents, there should be support at every level for youth at risk as well as for their parents/caregivers.

According to Papalia *et al.* (2008:493), “juvenile delinquency has its roots in early childhood; so should preventative efforts. To be most successful interventions should attack the multiple factors that can lead to delinquency”. According to these authors to be effective, developing urban high risk children should partake in effective programmes for at least two of their first five years of life. This should influence the children directly through high quality day care or education, and also indirectly by offering assistance and support to the families as needed (Papalia *et al.*, 2008:493). The researcher is of the opinion that rural children in South Africa are also high risk children. Given South African circumstances, these programmes should start with post-natal follow-up in terms of not only the medical care currently provided, but also psycho-social care as well as early educare provided at crèches or day-care centres. These programmes should follow the ecological systems approach as described by Bronfenbrenner by affecting interactions between the home and the municipal clinic services, the parents and the day-care workers at the crèche or educarers at the crèche or school.

Extra support in terms of psychological and paramedical support teams, followed by the same support in primary as well as secondary school, should be available to all children, not only those with a medical aid. There should be social workers at schools who pay home visits when children start absconding and evaluations should be conducted to find the reasons for adolescents’ behaviour and absconding. Academic support for struggling children would prevent them from losing hope and absconding. Trauma counseling for abuse and trauma is also indicated, and this can be attended to by social workers in schools.

Intervention should include the whole family and not only the child/adolescent who draws the attention with his acting-out behaviour, as this is a symptom of problems/disintegration within the family.

The shortfall in the current programme is the lack of provision for the “rites of passage” as well as the role of “culturally sensitive diversion work” (Pinnock 1997b:97). Pinnock proposed that adventure programmes such as “The Journey” and wilderness programmes with experiential learning provided by “The President’s Award Programme” provide a substitute for unhealthy risk taking in the form of gang culture, gun fighting, etc. This programme replaces the unhealthy “rites of passage” where the adolescents take control and replaces them with healthy, meaningful risk taking under the leadership of older and wiser



men. Rites of passage have been provided in different cultures throughout the ages. Pinnock (1997b:94) argues that the emotional content connected with the welcoming ceremony at the conclusion of “The Journey” programme is very important as it “resonates with deeper feelings of self-worth”. According to him, conventional punishments deaden emotion other than anger in young people, whereas a rite of passage programme works with emotion as a central ingredient and is particularly important to boys as cultural beliefs about boys not showing emotion often give rise to problem behaviour in boys. Modern civilization has depleted the role of the elders and fathers to such an extent that young people do not have respect for older people and do not adhere to cultural norms and values any more (Pinnock, 1997b:98; Steinberg, 2001:3-5; Steinberg, Pelo & Rampa, 2001:96). These norms and values are the golden thread of civilization, passed on by word of mouth through the ages by the older people in the community. They are taught to the young ones during initiation in some cultures and through religious upbringing and practices of acceptance in the religious body, such as bar mitzvah of the Jews, first communion of the Roman Catholics and confirmation in Afrikaans churches. The Presidential Commission advocated the use of rites of passage programmes as a divergence option for youth who have fallen out with the law (Pinnock, 1997b:82).

Recommendation: Introduction of special youth programmes at schools should counteract the propensity for violent measures instead of communicating as a way of solving problems. The wilderness programmes were implemented at the Centre, but have disintegrated as a result of different factors, of which practical implications and costs are the most obvious. As the current provision for youth at risk is being revised again, it would be advantageous if more attention is paid to these adventure programmes as a means of counteracting the thrill, adventure and sensation-seeking activities endorsed by the gangs. However, the danger of grouping anti-social youth together for camps as well as in centres should be taken into account. This can be counterproductive as they reinforce each other’s behaviour. Scouts, sports and church activities can be more successful to integrate deviant youth into the mainstream. These programmes should be monitored by adults and should be structured (Dodge, Dishion & Lansford in Papalia *et al.*, 2008:494). This emphasizes the need to keep youth who have broken the law within their communities, and to work with them as part of an ecological system. Provision should also be made for stimulating programmes after hours at centres where youth at risk are detained in order to counteract the effect of boredom which leads to making of tattoos and engaging in the rituals of sabela and passing on the oral traditions of the Number Gangs.

*Understaffed Social Workers:* The Presidential Commission suggested Family Group Conferences as a way of relocating youth justice issues back to communities and families as part of the new Juvenile Justice Act. Pinnock (1997b:82) mentioned that this would require intensive discussion as well as support on community level. In a recent report in a Sunday paper (Malan, 2011:07) the principal of a school sketches the problem regarding the reintegration of a former pupil after he had terminated from a Special Youth Centre. The community did not want to accept him, pointing fingers at him and blaming him for happenings in town. The principal described the failure of the system, saying that no effort at reintegration had been made. He continued by saying that South Africa has a first class Constitution; the problem occurs when it has to be implemented. This is underlined by Thamm (2011:03) when she quotes statistics which are signs of the disintegration of many households and consequently the community. She endorses a statement by De Lille a few years ago, namely that many more social workers had to be trained (the number 10 000 was mentioned). In actual fact, the researcher has seen the opposite happening, as Huguenot College, a centre training both social and community workers, is ceasing the training of these two disciplines. Thamm reports that in 2005 there were 5 395 children per social worker in Gauteng, and also says that the social workers are underpaid and work in demoralizing circumstances (Malan, 2011:07), which explains why the Constitution cannot be implemented. There is a dire need for many more social workers at all levels of the systems involved in the ecological field of children.

Recommendation: A plan for training more social workers is urgent and needs to be implemented on a national scale.

The headmaster mentioned above, describes an excellent example of Ubuntu, namely a project developed at grassroots level by himself and ten women to create safe homes for children (Malan, 2011:07). The aim is that those will create another ten. By continuing in this way, children in the community will be assisted to have a safer and more nurturing environment. Cloete is conscious of the fact that trauma and abuse are perpetuated from generation to generation. This effort made by him and the women is an example of Max Neef's endogenous and synergic satisfiers (see 4.5).

Recommendation: Programmes at grassroots level, such as those mentioned above, should be implemented in other settings as well, creating circumstances of resilience for children in South Africa.

The above-mentioned recommendations can be summarized as a dire need for supportive relationships with older and wiser people in the community to substitute the role of the gang leaders. Pinnock (1997a:28) states:

City life has increased the need young people have for support, discipline, assistance, protection, teaching and basic physical requirements as well as for experiences of trust, love, values, customs and spiritual traditions. We have seen that in the absence of this support young people create their own support structures and rituals, often with disastrous social consequences. The biggest challenge of any rites of passage programme is to recreate adult and mentor support structures. There is awesome power in relationships which work. In the development of programmes for youth at risk there is a need for adults to serve in many roles, as leader, liaison, resource people, curriculum writer, teacher, facilitator, speaker, mentor, sponsor and elder. These tasks and the need for adult training in adolescent work point to the need for a national Mentorship Programme incorporating parents, teachers, religious leaders, community and programme leaders, elders and those who have specialised skills in a range of areas such as martial arts, history, culture, sport and outdoor education.

Moral discipline is learned at home, in the family. This is the first school of morals, discipline and leadership. This is where virtue is and always will be implanted into the rising generation... as a society we should vigorously shift our energy on ensuring successful families.

## **5.6 FINAL CONCLUSIONS**

Despite the negative findings regarding the field/ecological system of the participants, there is hope, as the human organism has an amazing potential for growth, a thrust towards growth, as postulated by the theory of holism (Clarkson & Mackewn, 2006:38). Brendtro and Du Toit (2005:40-41) emphasize the fact that adolescents at risk can achieve positive life outcomes if their risk is turned into resilience: "Resilience is the ability to rebound from adversity with greater strength to meet future challenges." They also state that even children who were exposed to severe trauma can turn their lives around if they can find support from a caring person (Brendtro & Du Toit, 2005:40). Studies by Werner and Smith (in Brendtro & Du Toit,

2005:41) support their belief. It should be stressed that growth needs do not only depend on an individual's strengths, but also on healthy support from those in the environment (Brendtro & Du Toit, 2005:41). As explained in Chapter 4, the micro-systems of these adolescents under study fail them and therefore an approach is needed where support is also given in the other systems, e.g. the meso-, macro- and exosystems. The researcher hopes that the findings of this research will provide impetus to garner adequate support of the adolescents caught up in circumstances of pathologies of poverty, as described by Max-Neef (1991:19). If not, the danger of the intergenerational cycle of perpetuated violence will cause harm to many more children (Thamm, 2011:03).

Time spent in prison as well as in centres of secure care introduces the adolescents to undesirable practices such as making tattoos and joining the notorious 26s and 28s prison gangs. One of the unfortunate outcomes of this is sexual exploitation and the introduction to unhealthy sexual practices. This description reflects the viewpoint of Dickie (2009:19) when she says that occupation is not always good and that it can be “unhealthy, dangerous, maladaptive, or destructive to self and others and can contribute to societal problems and environmental degradation”.

The programmes followed at the Special Youth Centre were developed as a direct result of former President Mandela's request for an interministerial commission to research and provide recommendations regarding youth at risk. Their recommendations are based on Brendtro *et al.*'s suggestions, as quoted by Pinnock (1997a: 18):

There are better ways to change adolescent behaviour rather than demanding compliance ... This understanding involves an awareness of unmet needs, discouragement, the misery of unimportance and the loss of self-esteem and self-control. But it also involves finding ways to mobilize adventurous spirit, to satisfy the deep need young people have for ritual, to increase their personal, social resilience and to create meaningful bonds with significant adults. We also have to realise that within the tough delinquent exterior is a need to play – with fire perhaps – but also with the world to see what it will answer.

Law (in Kielhofner, 2006:11) postulates that “one of the key concepts of client-centred occupational therapy practice is a focus on the person-environment-occupation relationship ... as they recognized the importance of the interaction between person and environment during daily occupation”. In terms of these named requirements, it is clear that occupational therapists should keep in mind how the client (adolescent) functions within his community, as

well as how the community impacts on him. The recommendations made are in keeping with these aims. Another important aspect which has not been touched on is the fact that the occupation should be pleasurable and should also contribute to the community in which the adolescent grows up. It is stated in the Occupational Therapy Practice Framework's definition of occupation (Ikiugu, 2007:81) as: "... occupation is everything people do to occupy themselves ... enjoying life ... and contributing to the social and economic fabric of their communities." If the adolescents' needs could be turned into resilience through the recommendations made, they will be able to contribute to their communities instead of being destructive and anti-social. The recommendations are attempts to not only promote better circumstances for the adolescents known as youth at risk, but also for those following in the next generation. The researcher is of the opinion that this would empower them to fulfil their own potential as well as that of the community as a whole.

## **5.7 CONCLUDING STATEMENTS**

As set out earlier in Chapter 5, the findings of the study proved that body mapping is a suitable tool for facilitating dialogue with adolescents in a Special Youth Centre as well as providing rich data regarding this target group for research purposes. The Gestalt paradigm, which aligned well with the paradigm of occupational therapy, proved to be valuable. The holistic view of both paradigms proved to be the one that brought the whole field to the fore. The findings have also proven the necessity of taking the field into account when working with people, as their behaviour is affected by all the elements in the field. Bronfenbrenner's bio-ecological model proved to be valuable in this study as it combines both the external and the internal field of the individual, thus combining the nature and nurture factors at play. The case study design and "theory after" approach also proved to be valuable. With reference to the last-mentioned, the information regarding the influence of the Number Gangs and the effect of spending time in prison on the adolescent would not have been discovered if the literature review had been done prior to the empirical phase of the study. The disadvantage is that it opens such a wealth of information that it makes it difficult to stay within the boundaries of the dissertation of limited scope. Although it was not one of the aims of this study, it proved that occupational therapists can use the Gestalt paradigm successfully in

addition to the occupational therapy paradigm to enable better attendance to and intervention for the adolescent with emotional problems and traumatic life experiences.

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## **APPENDICES**

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### **APPENDIX 1**

# CONSENT FROM THE PRINCIPAL

Posbus 529  
Ceres  
6835  
20 April 2010

Die Hoof

[Redacted]  
[Redacted]  
[Redacted]  
[Redacted]

Meneer [Redacted]

Insake toepassing van navorsingsgedeelte van skripsie by [Redacted]

Soos u bewus is, is ek tans besig met die derde studiejaar vir die MDIAC graad in speltherapie. Die praktiese gedeelte word deur Hugenote Kollege aangebied, terwyl die graad deur Unisa toegeken word. Dit behels die skryf van 'n verkorte skripsie, wat navorsing insluit.

Ek versoek hiermee toestemming om die navorsing by [Redacted] te doen. Die navorsing sal nie tydens skoolure gedoen word nie en sal dus nie inbreuk maak op my take by die skool nie. Die bevinding van die navorsing behoort ook 'n bydrae te lewer tot onderwys aan leerders in die hoofstroom aangesien die behoeftes en eienskappe van tieners dieselfde ongeag of hulle in hoofstroom of in 'n OLSO skool is.

Daar is streng etiese riglyne en anonimiteit van leerders word gewaarborg.

Ek vertrou dat my versoek gunstige oorweging sal geniet sodat die nodige aansoek aan die distrikskantoor gerig kan word.

Met dank  
Marinda Pienaar *MPienaar*  
ARBEIDSTERAPEUT

Aanbeveling  
*Versoek word aanvaar.*  
.....  
.....  
.....

Mr [Redacted]  
SENTRUMHOOF

21.04.2010  
DATUM

*Versoek word goedgekeur*  
*Q Q*  
*TBS*



CONSENT FROM WCED

Navrae: Dr A.T Wyngaard  
Enquiries: Dr A.T Wyngaard  
Imithuzo:  
Telefoon: 021 467 9272  
Telephone: 021 467 9272  
Ifoni:  
Faks: (021) 425-7445  
Fax: (021) 425-7445  
Ifekisi:



Wes-Kaap Onderwysdepartement

Western Cape Education Department

IsSebe leMfundo leNtshona Koloni

Verwysing: 20100910-0015  
Reference: 20100910-0015  
Isalathiso:

Mrs Marinda Pienaar

[Redacted contact information]

Dear Mrs Marinda Pienaar

**RESEARCH PROPOSAL: BODY MAPPING AS AN EXPLORATORY TOOL TO ENHANCE DIALOGUE OF LIFE EXPERIENCES WITH ADOLESCENT BOYS IN A SPECIAL YOUTH CENTRE**

Your application to conduct the above-mentioned research in schools in the Western Cape has been approved subject to the following conditions:

1. Principals, educators and learners are under no obligation to assist you in your investigation.
2. Principals, educators, learners and schools should not be identifiable in any way from the results of the investigation.
3. You make all the arrangements concerning your investigation.
4. Educators' programmes are not to be interrupted.
5. The Study is to be conducted from 01 September 2010 till 30 September 2010 and 01 February 2011 till 30 March 2011
6. No research can be conducted during the fourth term as schools are preparing and finalizing syllabi for examinations (October to December).
7. Should you wish to extend the period of your survey, please contact Dr A.T Wyngaard at the contact numbers above quoting the reference number.
8. A photocopy of this letter is submitted to the principal where the intended research is to be conducted.
9. Your research will be limited to the list of schools as forwarded to the Western Cape Education Department.
10. A brief summary of the content, findings and recommendations is provided to the Director: Research Services.
11. The Department receives a copy of the completed report/dissertation/thesis addressed to:  
The Director: Research Services  
Western Cape Education Department  
Private Bag X9114  
CAPE TOWN  
8000

We wish you success in your research.

Kind regards,  
Signed: Audrey T Wyngaard  
for: HEAD: EDUCATION  
DATE: 09 September 2010

MELD ASSEKLEEF VERWYSINGSNUMMERS IN ALLE KORRESPONDENSIE / PLEASE QUOTE REFERENCE NUMBERS IN ALL CORRESPONDENCE /  
NCEDA IIBALE IIMBOLO ZERALATHISO KUYO YONKE IMBALI.WANO

GRAND CENTRAL TOWERS, LAER-PARLEMENTSTRAAT, PRIVAATSAK X9114, KAAPSTAD 8000  
GRAND CENTRAL TOWERS, LOWER PARLIAMENT STREET, PRIVATE BAG X9114, CAPE TOWN 8000

WEB: <http://wced.wcape.gov.za>

INBELSENTRUM /CALL CENTRE

INDIENSNEMING- EN SALARISNAVRAE/EMPLOYMENT AND SALARY QUERIES ☎0861 92 33 22

## **PARTICIPANT CONSENT FORMS**

Note: This form is a simplified version of the Consent form for the benefit of the participants whose first language is Xhosa. They need a simplified version in order to understand all the information

### **CONSENT TO PARTICIPATE IN RESEARCH**

---

#### **Title**

**BODY MAPPING AS AN EXPLORATORY TOOL TO ENHANCE DIALOGUE OF LIFE EXPERIENCES WITH ADOLESCENT BOYS IN A SPECIAL YOUTH CENTRE**

You are asked whether you will be willing to participate in a research study conducted by Marinda Pienaar. She is studying for the Mdiac degree in Play Therapy, Centre for Child, Youth and Family Studies, at Huguenot College, Wellington. This study aims to learn how adolescents like you feel about the marks on their bodies. My interest lies in finding out how a person`s body remembers incidences that happened throughout life. The scars, lesions and tattoos on a person`s body, tells a story about a person`s life experiences. They help a person to recall what happened, how it happened and even remember how you felt when it happened. People do not often get an opportunity to talk about incidences that caused scars or lesions and it becomes like a burden that they carry around. The results of this study will be published as a thesis, that other people can learn from. You were selected as a possible participant in this study because you have scars and tattoos.

#### **1. PURPOSE OF THE STUDY**

I am trying to find out if it would help a person to take part in an activity called body mapping, where the scars and tattoos are drawn onto an outline of the person`s body. It gives the person an opportunity to think back and remember what happened when the lesions/scars/tattoos were acquired. They can then choose one or two to talk about and tell me how they remember feeling at the time that it happened.

Talking about it helps a person to share feelings which the other person might have experienced as well, and if not it helps the person to work through the feelings he had when it happened.

#### **2. PROCEDURES**

The study will be conducted in three weekly sessions of approximately an hour each in the group therapy room.

Time: afternoon after school and the specific date will be decided on according to sports practices.

“If you volunteer to participate in this study, we would ask you to do the following:

#### First session

If you are willing, I will make an outline of your body which is called a map of your body, or you can use a picture of a body-outline, and looks like this (show “gingerbread man”). You can then continue drawing your tattoos in the positions that they are situated on your body. You will be able to choose any materials you like and any colours you prefer. While doing that, you can think about each one and choose which one or two you would like to talk about, telling how you felt when you made the tattoos and how you feel about it now.

#### Second Session

In this session you will draw the scars and lesions of old hurts, such as knife- and bullet wounds, fractured arms or legs or operation scars on a second body map. You will once again have the opportunity to talk about any of these, telling how you felt when you were hurt, as well as how you feel about it now. You will find it interesting to see how well your body remembers things that happened to it.

#### Third session

In this session you will open the two maps, and talk about anything that you did not talk about before, that you might have remembered afterwards, or that you think about or feel when you look at them again. These three exercises should help you to understand feelings which you might have about your body, a little better.

Each time we will be busy for about an hour from start to finish.

Do you have any questions you would like to ask me?

### **3. POTENTIAL RISKS AND DISCOMFORTS**

Talking about your memories may cause you to feel worse than before initially, but can be the start of a process to work with those memories, in order for you to “Heal on the inside”. If

you feel upset or unhappy after the session, you should tell me in order for me make an appointment with the social worker or psychologist to talk to you about your feelings.

Note: [Any strange reactions or vehement reactions would indicate that the process should be terminated with appropriate emotional support.]

#### **4. POTENTIAL BENEFITS TO SUBJECTS AND/OR TO SOCIETY**

You might feel more connected to your body afterwards, when you have remembered things that you forgot, or preferred not to think about before..

It could help other therapists who work with children who also have the same type of problems that you have, to help them understand themselves better.

#### **5. PAYMENT FOR PARTICIPATION**

You will not receive payment or any special benefits for taking part in this study.

#### **6. CONFIDENTIALITY**

All your personal information in connection with this study will remain confidential. It means that people who read the reports of the study will not be able to recognise you. Information will be disclosed only with your permission or as required by law. I will not use the information that you give me connected to your name and paper copies and recordings (voice and or video recordings) will be locked away. I will also keep information on the computer protected by using a password.

A tape recording will be made of our conversation to help me remember everything that we talked about. If you and the principal give your permission, a video recording can be made. You will be allowed to look at recordings of yourself, but not of any other participants. They will be kept locked away for five years and there-after, they will be destroyed.

Your name will not be included when the report is published to prevent people recognising you from things that you told me. You can choose another name that will be used when working with your records, to keep it as confidential as possible.

## **PARTICIPATION AND WITHDRAWAL**

You can choose whether to be in this study or not. If you decide to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you don't want to answer and still remain in the study. I may withdraw you from this research if circumstances arise which might cause you to be recognised or if I think that it can harm you to carry on.

### **7. IDENTIFICATION OF INVESTIGATORS**

If you have any questions or worries about the research, please feel free to contact me, *Marinda Pienaar: telephone no: .....*

or my supervisor: *Dr M van der Merwe. no: .....*

### **8. RIGHTS OF RESEARCH SUBJECTS**

You may withdraw your permission and not continue at any time without penalty. You do not lose any legal claims, rights or remedies because of taking part in this research study. If you have questions regarding your rights as a research subject, contact Dr. Mariette van der Merwe, at the Institute for Child, Youth and Family Studies.

**SIGNATURE OF RESEARCH SUBJECT OR LEGAL REPRESENTATIVE**

The information above was described to [.....] in English and I am in command of this language. I was given the opportunity to ask questions and these questions were answered to my satisfaction.

I hereby consent voluntarily to participate in this study. I have been given a copy of this form.

\_\_\_\_\_

Name of Subject/Participant

\_\_\_\_\_

Signature of Participant

Date

\_\_\_\_\_

Signature of Legal Representative/ Headmaster

Date

**SIGNATURE OF INVESTIGATOR**

I declare that I explained the information given in this document to

\_\_\_\_\_

[*name of the subject/participant*] and/or [his/her] representative \_\_\_\_\_

[*name of Principal*]. He was encouraged and given ample time to ask me any questions. This conversation was conducted in English.

\_\_\_\_\_

**Signature of Investigator**

\_\_\_\_\_

**Date**

**Nota: `n Vereenvoudigde formaat van die toestemmingsvorm vir Afrikaanssprekende deelnemers**

## **INWILLIGING OM DEEL TE NEEM AAN NAVORSING**

---

Titel:

**Liggaamskartering as 'n ondersoekende instrument om adolessente seuns in 'n Spesiale Jeugsentrum se dialoog oor hul lewensondervinding te bevorder.**

Jy word gevra om deel te neem aan `n studie deur die student Marinda Pienaar. Sy studeer om die M Diac graad in speltherapie aan die Instituut vir Kinder, Jeug en Familie studies, Hugenate Kollege te behaal. Jy kan sê of jy gewillig sal wees om aan die studie deel te neem. Die studie gaan meer probeer uitvind hoe jongmense in die Spesiale Jeugsentrum voel en dink oor tekens wat hulle op hul liggame het. Aan die einde van die studie, word dit wat geleer is uit jou liggaamskaart en wat jy vertel het, opgeskryf en in `n boek gebind. Die doel is dat mense wat met jongmense in jeugsentrums, plekke van veiligheid en gevangnisse werk, die verslag sal lees. Moontlik sal dit hulle help om jongmense in aanhouding se gevoelens en gedrag beter te verstaan. Die rede waarom jy gekies is, is dat jy die merke en littekens het wat in die studie behandel word.

### **1. DOEL VAN DIE STUDIE**

Die doel van die studie is om uit te vind hoe jongmense in die Spesiale Jeugsentrum voel oor merke aan hulle liggame. Die merke kan ou seerplekke wees, messteke, skietwonde, arms of bene wat gebreek het of operasielittekens. Ek gaan ook na tatoeëermerke kyk en vir die seuns wat aan die studie deelneem, `n kans gee om te vertel hoe hulle regtig daarvoor voel. Jy sal kan kies om net oor sommige, of oor almal te praat.

Dit is baie interessant dat die liggaam kan onthou en dat jy as jy die merke op jou liggaam teken, dinge sal onthou wat gebeur het en hoe jy daarvoor gevoel het. Ek dink dat dit vir jou sal help om te praat oor dinge wat miskien vir jou in die verlede gepla of seergemaak het en jy nooit geleentheid gehad het om met iemand daarvoor te praat nie. Wanneer `n mens nie praat oor gevoelens nie, dan raak dit soos `n swaar las wat jy moet saamdra deur die lewe. Dit veroorsaak weer dat `n mens nie vandag voluit kan lewe en daarom nie altyd die regte keuses maak nie.

### **2. PROSEDURES**

Indien jy inwillig om aan die studie deel te neem, vra ek dat jy na die volgende sal luister:

Die studie gaan oor drie sessies strek, wat elkeen omtrent `n uur lank kan wees. Dit gaan in die groep-klaskamer plaasvind. Die drie sessies sal `n paar dae uitmekaar plaasvind.

#### Eerste sessie

Indien jy gewillig is, gaan ek om jou liggaam teken op `n groot vel papier, om `n liggaamskaart te kry. Indien jy nie daarvan sal hou nie, sal jy op die `n klaar getekende kaart met die buitelyne van `n lyf op, kan werk (wys die “gemmerbroodmannetjie). In hierdie sessie sal jy jou tatoeëermerke (tjappies) op die kaart van jou liggaam teken op die plekke waar dit regtig op jou liggaam voorkom. Dan kan jy kies oor watter een of meer van hulle, jy vir my meer wil vertel. Jy sal praat oor wat jy kan onthou van die tyd toe jy dit gemaak het, hor jy toe daarvoor gevoel het en hoe jy nou daarvoor voel.

#### Tweede sessie

In die tweede sessie gaan jy weer op so `n kaart van jou liggaam werk maar dan gaan jy merke of littekens van seerplekke, messteke, skietwonde, gebreekte arms of bene, of operasiemerke op die kaart teken. Jy sal dan ook kan kies oor watter jy wil gesels om te vertel wat jy kan onthou daarvan en hoe jy gevoel het toe dit gebeur het.

#### Derde sessie

In hierdie sessie gaan ons kyk na die twee kaarte wat jy in die vorige sessies geteken het en dan gaan ons gesels oor enigiets wat jy dalk verder daarvoor onthou het, of wat jou nog pla.

Hierdie drie oefeninge behoort vir jou te help om jou liggaam en die gevoelens wat jy oor jou liggaam het, beter te verstaan.

Elke sessie behoort ongeveer een uur te duur.

Het jy enige vrae wat jy hieroor wil vra?

### **3. MOONTLIKE RISIKO'S EN ONGEMAKLIKHEID**

Miskien is jy bang dat ek vir jou sal vra om oor dinge te praat waarvoor jy nie wil praat nie. Jy hoef nie daarvoor bang te wees nie, want jy gaan self kies oor watter merke jy wil praat en wat jy daarvoor wil vertel. Indien ek iets vra wat jy nie wil antwoord nie, dan kan jy net so sê.

Indien jy enige tyd tydens of na die sessie voel dat daar dinge is wat jou ongelukkig of gestres laat voel, kan ons ophou met die sessie en dan sal ek vir jou `n afspraak maak met iemand van jou keuse by Hulpdienste, wat met jou daarvoor kan praat.



#### **4. MOONTLIKE VOORDELE VIR PROEFPERSONE EN/OF VIR DIE SAMELEWING**

Dit is belangrik dat jy sal verstaan dat jy nie enige voordele sal kry omdat jy aan die studie deelgeneem het nie.

Jy gaan egter help dat ander volwassenes wat met jongmense werk, beter kan verstaan wat seuns soos jy al deurgemaak het en hoe dit voel om in 'n Spesiale Jeugsentrum te wees.

#### **5. FINANSIËLE VOORDELE**

Jy sal nie betaling ontvang omdat jy aan die studie deelneem nie

#### **6. VERTROULIKHEID**

'n Bandopnemer sal gebruik word om alles wat jy sê vas te lê sodat ek nie vergeet waaroor ons gesels het nie. Indien jy en die hoof toestemming gee, sal daar moontlik ook 'n video opname van die drie sessies gemaak word. Jy sal daarna mag kyk, maar nie na opnames van ander deelnemers nie.

Inligting wat jy vir my gee, sal slegs met jou toestemming, en soos deur die wet vereis, bekendgemaak word. Alles wat jy my vertel en wat deur die bandopnemer/en of videokamera opgeneem word, sal vir 5 jaar toegesluit word en niemand anders sal dit kan sien nie. 'n Kodewoord sal toegang tot die inligting op die rekenaar beskerm. 'n Nommer of 'n skuilnaam wat jy kies sal saam met dit wat jy vertel het in die navorsingsverslag gebruik word. Niemand behalwe ek sal weet wie die persoon is nie.

#### **7. DEELNAME EN ONTTREKKING**

Jy kan self besluit of jy aan die studie wil deelneem of nie. Indien jy inwillig om aan die studie deel te neem, kan jy enige tyd onttrek en dit sal nie teen jou gehou word nie. Jy kan ook weier om sekere vrae te antwoord, maar steeds aan die studie deelneem. Ek kan jou aan die studie onttrek as dit noodsaaklik is om jou te beskerm. Miskien kom ek agter dat ander mense jou tog sal herken aan dit wat jy vir my vertel het en ek mag jou nie blootstel nie.

## 8. IDENTIFIKASIE VAN ONDERSOEKERS

Indien jy enige navrae of onsekerhede het wat jou pla, kan jy my skakel [Marinda Pienaar], telefoon nommer.....of die studieleier, dr Mariette van der Merwe by telefoon nommer.....

## 9. REGTE VAN DEELNEMERS

Deur deel te neem aan die navorsing doen jy nie afstand van enige wetlike regte, eise of regsmiddel nie. Indien jy vrae het oor jou regte as proefpersoon by navorsing, skakel met die studie Supervisor Dr. M van der Merwe by die Eenheid vir Kinder, Jeug en Gesins Studies.

<b>VERKLARING DEUR PROEFPERSOON OF SY/HAAR REGSVERTREENWOORDIGER</b>
--

Die bostaande inligting is aan my, [.....], gegee en verduidelik deur Marinda Pienaar in *Afrikaans* en ek is dié taal magtig. [Ek,.....] is die geleentheid gebied om vrae te stel en my vrae is tot my bevrediging beantwoord.

Ek willig hiermee vrywillig in om deel te neem aan die studie. 'n Afskrif van hierdie vorm is aan my gegee.

\_\_\_\_\_  
Naam van proefpersoon/deelnemer

\_\_\_\_\_  
Handtekening van proefpersoon

\_\_\_\_\_  
Datum

## Handtekening van Regsverteenvoordiger/ Skoolhoof

<b>VERKLARING DEUR ONDERSOEKER</b>
------------------------------------

Ek verklaar dat ek die inligting in hierdie dokument vervat verduidelik het aan [.....]. Hy/sy is aangemoedig en oorgenoeg tyd gegee om vrae aan my te stel. Dié gesprek is in *Afrikaans* gevoer en *geen vertaler is gebruik nie*.

---

Handtekening van ondersoeker

---

Datum

**An example of the substitute for a personal body map, (“gingerbread man”) shown to the participants**

Interview information

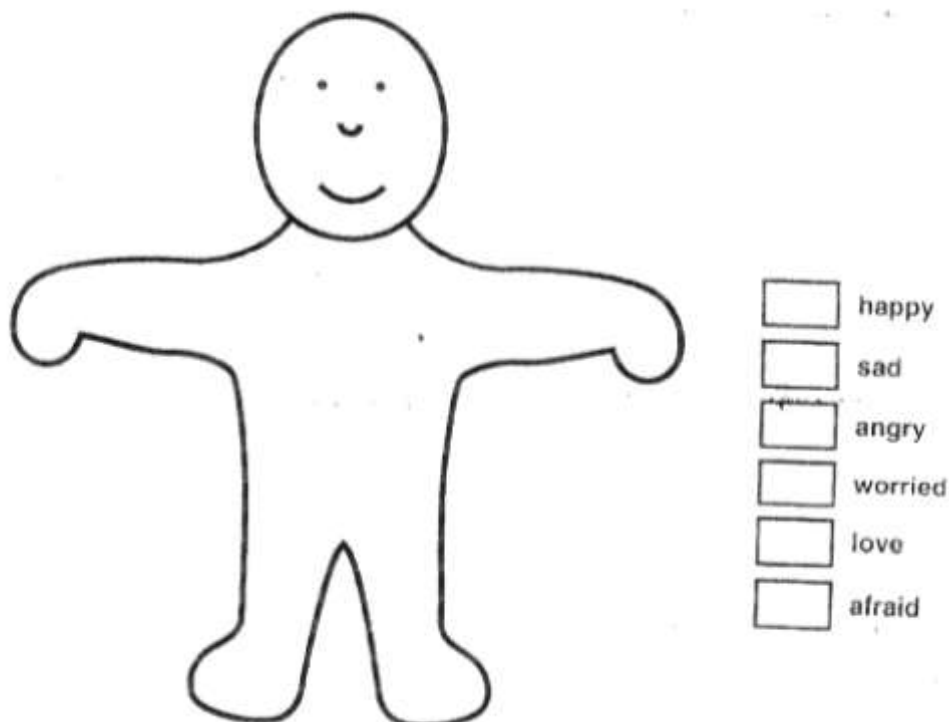
**Making a Body map/ outline of participant`s body for exploration of scars, lesions and tattoos**

Session 1- Discussion of tattoos and indicating it on body map

Session 2- Discussion of lesions and scars and indicating it on body map

Session 3- An overview and discussion of meaning found in the experience as well as an in-depth discussion on one or two of the scars or tattoos, of adolescent`s choice.

**Guidelines:** Use life size tracing of body of participant and indicate tattoos, scars and lesions on body map or use the representation of a body map to indicate scars, tattoos and lesions. Notes will be made on the drawings and voice and video recordings will aid data capturing



## Appendix 2

### ETHICS COMMITTEE APPLICATION FORM 2010

Application to the Huguenot College/UNISA SUBCOMMITTEE A  
for clearance of new/revised research projects

**This application must be typed or written in capitals**

**Name:** Marinda Pienaar

**Position/Professional Status:** Occupational Therapist

**Affiliation: Research Programme/Institution:** Special Youth Centre

**Telephone and extension no.**                      **Code:**

**Fax:**    **Code:**

**Email address:**

**Title of research project: (*Do not use abbreviations*) English and Afrikaans**

**English:** Body mapping as an exploratory tool to enhance dialogue of life experiences with adolescent boys in a Special Youth Centre

**Afrikaans:** Liggaamskatering as 'n ondersoekende instrument om adolessente seuns in 'n Spesiale Jeugsentrum se dialoog aangaande hul lewensondervinding te bevorder

**Where will the research be carried out?**

At a Special Youth Centre

**1. FUNDING OF THE RESEARCH: How will the research be funded?**

Researcher will be responsible for costs

**2. PURPOSE OF THE RESEARCH:**

The purpose of the study is partially basic research with the aim of investigating whether

body mapping is an effective tool for the purpose of generating evidence about body scars, lesions and tattoos. This research is also applied as it is focused on solving specific problems in practice. The research will be exploratory and descriptive.

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### **3. AIMS AND OBJECTIVES OF THE RESEARCH:**

The **main goal** is to ascertain whether the technique of body mapping can be utilized as a tool to facilitate dialogue, with the view of opening up and expressing emotional content connected to the scars, lesions and tattoos. The **secondary** of this study is to explore the utilisation of body mapping as research tool to generate data. If found that body maps enhance emotion-focused discussions it will open avenues for therapeutic use.

**Aims** towards reaching the goals:

To compile a conceptual framework on relevant Gestalt- theories and relevant developmental theories

To conduct empirical research utilizing body mapping as research tool with selected participants

To study probation officers` reports as well as learner-profiles

To analyze data and extract themes

To conduct a literature control as means of data triangulation

To compile a research report with conclusions and recommendations

### **4. SUMMARY OF THE RESEARCH** *(give a brief outline of the research plan – not more than 200 words)*

The qualitative and explorative study will be undertaken at a Special Youth Centre with 14-18 yr old sentenced, adolescent boys. Research will be done from the stance of a Gestalt practitioner, which will be in agreement with the occupational therapist's viewpoint as both are founded on the principles of holism, field theory and the dialogic relationship. The technique of Body mapping will be applied as an explorative tool to stimulate narratives of life experiences. The aim is to enhance the adolescents` capability of expressing emotions which are not expressed, due to delayed psychosocial development and poor academic skills. Shifting traumatic memories from SAMS to VAMS will enhance function as there are signs of delayed traumatic memory integration. Both the inability to express emotions and traumatic memories deter learners from gaining full benefit from the Rehabilitation Model followed at the centre.

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A Multi method approach will be followed, with the case study as the type of design. It is proposed to do the literature control after empirical study in order to prevent contamination as far as possible.

If found that body maps enhance emotion-focused discussions it will open avenues for therapeutic use, for which there is currently a great need in South- African schools .

**5. NATURE AND REQUIREMENTS OF THE RESEARCH**

**5.1 How should the research be characterised (Please tick ALL appropriate boxes)**

<b>5.1.1 Personal and social information collected directly from participants/subjects</b>	<b>X</b>
<b>5.1.2 Participants/subjects to undergo physical examination</b>	
<b>5.1.3 Participants/subjects to undergo psychometric testing</b>	
<b>5.1.4 Identifiable information to be collected about people from available records</b>	
<b>5.1.5 Anonymous information to be collected from available records</b>	<b>X</b>
<b>5.1.6 Literature, documents or archival material to be collected on individuals/groups</b>	<b>X</b>

**5.2 Participant/Subject Information Sheet attached? (for written and verbal consent)**

<b>YES</b>	<b>X</b>
<b>NO</b>	

**5.3 Informed Consent form attached? (for written consent)**

<b>YES</b>	<b>X</b>
<b>NO</b>	

**5.3.1 If informed consent is not necessary, please state why:**

**NB: If a questionnaire, interview schedule or observation schedule/framework for ethnographic study will be used in the research, it must be attached. The application cannot be considered if these documents are not included.**

**5.4 Will you be using any of the above mentioned measurement instruments in the research?**

<b>YES</b>	
<b>NO</b>	<b>X</b>

## **6 PARTICIPANTS/SUBJECTS IN THE STUDY**

**6.1 If humans are being studied, state where they are selected:**

At the Special Youth Centre

**6.2 Please mark the appropriate boxes:**

<b>Participants/subjects will:</b>	<b>YES</b>	<b>NO</b>
<b>be asked to volunteer</b>		
<b>be selected</b>	<b>X</b>	

**6.2.1 State how the participants/subjects will be selected, and/or who will be asked to volunteer:**

Participants have to comply to the selection criteria of having scars, lesions and tattoos, being present at the Centre, English or Afrikaans speaking, but will only be included if they are willing to participate.

The Occupational therapy intake form with relevant information regarding learner will give an indication of learners with criteria for selection. The learner will be questioned about the presence of scars and tattoos and if the answer is positive, he will be asked whether he would be willing to participate in the study.

**6.3 Are the participants/subjects subordinate to the person doing the recruiting?**

<b>YES</b>	<b>X</b>
<b>NO</b>	



**6.3.1 If yes, justify the selection of subordinate subjects:**

If being a learner implies that they are subordinate, it will be counteracted by giving them a choice of participating, not bribing them in any way and explaining the reason for the research.

**6.4 Will control participants/subjects be used?**

<b>YES</b>	
<b>NO</b>	<b>X</b>

**6.4.1 If yes, explain how they will be selected:**

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**What records, if any, will be used, and how will they be selected?**

The probation officer`s report will be used for information regarding their home-environment and traumatic experiences. It will be used after the learner had participated in the body mapping technique. The profile of the learner will provide information regarding the learner`s progress, or lack there of, at the centre

**6.5 What is the age range of the participants/subjects in the study? 14 – 18**

**6.5.1 Was assent for guardians/consent for participants/subjects obtained?**

<b>YES</b>	<b>X</b>
<b>NO</b>	

*If YES, please attach the appropriate forms.*

**6.5.2 If NO, please state why**

The principal acts as the learner`s guardian at the centre, therefore his permission was obtained.

**6.6 Will participation or non-participation disadvantage the participants/subjects in any way?**

<b>YES</b>	
<b>NO</b>	<b>X</b>

**6.7 If yes, explain in what way:**

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**6.7.1 Will the research benefit the participants/subjects in any direct way?**

<b>YES</b>	
<b>NO</b>	

**6.8.1 If yes, please explain in what way:**

Indirectly, in the form of being more aware and having had an opportunity to share life experiences

## **7. PROCEDURES**

**7.1 Mark research procedure(s) that will be used:**

<b>Literature</b>	<b>X</b>
<b>Documentary</b>	<b>X</b>
<b>Personal records</b>	<b>X</b>
<b>Interviews (Unstructured)</b>	<b>X</b>
<b>Survey</b>	
<b>Participant observation</b>	<b>X</b>
<b>Body Mapping</b>	<b>X</b>

**7.2 How will the data be stored?**

Written data and tape/video recordings will be locked in a vault and records on computer will be password protected

**7.3 If an interview form/schedule; questionnaire or observation schedule/framework will be used, is it attached?**

An example of the template for body mapping (gingerbread man)

<b>YES</b>	<b>X</b>
<b>NO</b>	

**7.4 Risks of the procedure(s): Participants/subjects will/may suffer:**

<b>No risk</b>	
<b>Discomfort</b>	
<b>Pain</b>	
<b>Possible complications</b>	
<b>Persecution</b>	
<b>Stigmatisation</b>	
<b>Negative labeling</b>	
<b>Other (please specify)</b>	<b>X</b>

**7.4.1 If you have checked any of the above except “no risk”, please provide details:**

There might be an emotional reaction as a result of emotional release during the process of body mapping and narrative of life experience. There will be support if needed.

**8. RESEARCH PERIOD**

(a) **When will the research commence:** August 2010

(b) **Over what approximate time period will the research be conducted:**

6 months

**9. GENERAL**

**9.1 Has permission of relevant authority/ies been obtained?**

<b>YES</b>	<b>X</b>
<b>NO</b>	

**9.1.1 If yes, state name/s of authority/ies: (Confidential)**

**Principal of Centre as well as from W.C.E.D.**

**9.2 Confidentiality: How will confidentiality be maintained to ensure that participants/subjects/patients/controls are not identifiable to persons not involved in the research?**

By assigning a number to participants

Taking care not to include total body maps

Not including all information of a participant individually, but reporting on trends within the group of participants.

**9.3 Results: To whom will results be made available, and how will the findings be reported to the research participants?**

The participants will each be involved in his own process of body mapping and explanations regarding the research. Each participant would be seen individually and will not have any insight into other participant`s responses or life stories. They will also not be informed who else is partaking in the study and it will only become known if they themselves inform other learners or staff members.

The finalised thesis will be made available to the Special Youth Centre and other interested educational centres, including W.C.E.D.

The participants may not be at the Centre after completion of the study. If they ask for information, arrangements will be made prior to their leaving the Centre.

**9.4 There will be financial costs to:**

<b>participant/subject</b>	
<b>Institution</b>	
<b>Other (please specify)</b>	<b>X</b>

**9.4.1 Explain any box marked YES:**

Researcher will be responsible for costs regarding materials used for research, including paper, cost of copying and binding

Materials for body mapping,

Proof reading

**9.5 Research proposal/protocol attached:**

YES	X
NO	

**9.6 Any other information which may be of value to the Committee should be provided here:**

---

**Date: 3.June 2010**

**Applicant`s signature**

---

**Who will supervise the project?**

**Name:** Dr M van der Merwe

**Programme/Institution/Department:** Institute for Child, Youth and Family Studies  
Huguenot College

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

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**Director/Head/Research Coordinator of Department/Institute in which study is conducted:**

**Name:**

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

### **Appendix 3.**

#### **TRANSCRIPTION OF UNSTRUCTURED INTERVIEW WITH PARTICIPANT 2.**

##### **14 September: Leerder 2 – Sessie 1: Kartering van tatoeëermerke**

Goed, voel jy reg om te begin?

*Ja, Juffrou.*

Nou goed, wat ons gaan doen: Eers gaan ek jou hier teen die papier laat staan, met jou rug teen die papier en dan moet ek reg rondom jou liggaam afteken. Is dit oukei vir jou as ons dit so doen?

*Ja, Juffrou.*

Dink jy dat jy genoeg verstaan uit wat ek vir jou voor die tyd verduidelik het, of wil jy vir my vrae vra wat ek vir jou moet antwoord?

*Ek het verstaan, Juffrou.*

Jy kan solank bietjie daar na die gesiggies kyk. Daar is twee verskillende kaarte. Dan kyk jy watter gevoelens kan jy alles herken daar op die kaart. Lyk dit vir jou of dit pas by die Engelse name wat hulle onderaan geskryf het?

*Ja, Juffrou.*

Watter van daardie gevoelens dink jy voel jy min of meer redelik gereeld?

*Regretful, Juffrou.*

Regretful. Voel jy spyt?

*Ja, Juffrou.*

En wat nog?

*Somtyds dan voel ek frustrated, Juffrou.*

Mm, gefrustreerd, nè.

(Hy wys na “thoughtful”.) *Soms, maar meeste van die tyd in die klas, Juffrou.*

Oukei, nou die dag het jy so gevoel, nè? (Ek wys na die gesiggie wat kwaad lyk.)

*Ja, Juffrou.*

En voel jy darem af en toe happy ook?

*Somtyds.*

Meer by die huis as wanneer jy hier is?

*Meer by die huis, maar meeste van die tyd voel ek ... (Hy wys na “geïrriteerd”).*

Geïrriteerd?

*Ja, Juffrou.*

(Ek wys ook na die ander gesiggies en noem hulle name.) Miserable ... dié een lyk meer of hy slim voel, nè? Ek dink nogal jy ... voel jy partykeer slim as jy so goed kan lees en die ander kan nie?

Is daar iets anders wat jy redelik gereeld voel? Raak jy verveeld partykeer?

*Puzzled, deurmekaar.*

(Ek lag.) So, jy ken verskillende emosies – dit gaan nie vir jou moeilik wees nie.

*Ja, Juffrou.*

Oukei, as jy wil, kan jy jou hemp uittrek. Ek weet nie hoeveel goed jy op jou lyf het nie. As jy wil, kan jy hom uittrek om beter te sien wat waar sit. (Hy reageer nie; dus weet ek dat hy dit nie wil uittrek nie.) As dit nie nodig is nie, kan jy nou die die swart koki neem en eers jou lyf regmaak, hier waar die been so dun gekom het. Die potlood het seker te veel binnetoe gewys. Dan maak jy eers jou lyne reg, en dan kan jy begin om jou tjappies op te teken. Soos jy nou voel reg is.

En soos ek gesê het, dit gaan veral oor die gevoel wat saam met dit gaan, nè. Dit gaan nie soveel oor die tjappies self nie, maar dit gaan oor die gevoelens, as jy nou terugdink, daai tyd toe jy dit gemaak het – hoekom het jy dit gemaak; hoe voel jy nou oor hulle?

Hy teken in stilte die buitelyne met die koki-pen.

(Hy teken en werk in stilte). Gee vir my jou geboortedatum – ek het nie daaraan gedink om dit op te sit nie. (Hy gee dit vir my. Hy het vyf maande gelede 17 geword.)

Nou kan jy besluit waarmee wil jy die tjappies teken – wil jy die koki gebruik, wil jy gekleurde koki's gebruik? Dan kan jy maar eers dit inteken en later kan jy besluit of jy miskien in kleure wil werk om jou gevoelens te wys wat saamgaan.

*Moet ek almal inteken, Juffrou?*

As jy wil. Jy kan mos nou kies: As jy almal wil teken, teken jy almal. As daar een of twee is wat jy voel meer gevoelens daaroor het, en jy wil net oor dít praat, dan teken jy net hulle, nè.

(Hy werk in stilte daaraan.) *Dit is al wat ek het om te teken, Juffrou.*

Voel jy gelukkig – so, met dit? Wil jy dalk jou gesig inteken of is jy oukei met dit?

*Dit is oukei so, Juffrou.*

Watter een kies jy om oor te praat? Wat wil jy vir my oor een van hulle vertel?

(Lang stilte.) *Ek wil eerste oor dié een praat, Juffrou – my bynaam, Juffrou.* (Hy wys na een met 'n afkorting van sy naam en “.....” langs dit.)

Mm.

*Aan die begin het ek eerste gedink, toe begin loop ek saam met die verkeerde vriende, sien Juffrou. Dit is amper so: Ek het altyd pluck vir alles doen, sien Juffrou? Dan begin hulle vir my sê ek is (naam, plus agtervoegsel), sien Juffrou? Dan vat ek dit so, hulle prys vir my, sien Juffrou. Dié, toe het ek dit op my lyf gesit, sien Juffrou?*

Het jy dit self gedoen?

*Ja, Juffrou.*



Terwyl jy nog buite by die huis was? En toe, hoe het jy toe gevoel oor die tjappie – het jy trots gevoel daarop?

*Ek het trots gevoel, ja, Juffrou.*

Oukei. En hoe het dit jou laat voel om trots te voel?

*Dit het vir my gevoel ... dit het vir my gevoel ... dit is ekke, ek is die man, Juffrou.*

Dit het jou sterk laat voel, goed laat voel oor jouself?

*Ja, Juffrou.*

En toe begin noem hulle jou aanmekaar so – as hulle jou roep of so, dan roep hulle jou op daai naam?

*Nou nog, Juffrou, as hulle my roep,*

Oukei. So hoe lank het jy met hom geloop voor daar ander bygekom het?

*Hoe lank het ek hom gehet?*

Mm.

*Sê maar so ses maande, Juffrou.*

En toe?

*En toe begin ek met die twee, Juffrou. (Hy begin tik met die agterkant van die koki-pen op die tafel.)*

Oukei. Was dit ook buitekant, of was dit ...

*Ja, Juffrou. Bende-aktiwiteite, Juffrou.*

So hoe voel jy toe oor hulle?

*Toe voel ek trots – hoekom, ek is part van 'n bende, sien Juffrou?*

En hulle is ouer as jy?

*Ja, Juffrou.*

Jy het amper gevoel hulle is ouer manne en tog kyk hulle op na jou, nè?

*Ja, Juffrou.*

En kan jy onthou hoe het jou ouers miskien gevoel oor die tjappies?

*My ma het my eers uit die huis gesit vir 'n week, Juffrou. (Hy begin tik met die koki-pen se agterkant op die tafel.)*

Ná watter ene?

*Ná die twee, Juffrou.*

Weet sy wat dit beteken?

*Ja, Juffrou, want dit is net daar in ons omgewing – almal dra sulke tjappies, sien Juffrou, almal wat aan onse gang behoort.*

Oukei, so is dit die 26's of was dit nog nie hulle nie?

*Dit was nog nie 26's nie, dit was Americans, Juffrou.*

Oukei. En toe, moes jy iets doen om daai tjappies te kan verdien?

*Ek het mos, Juffrou, want voor ek dié ... sien Juffrou, toe het ons begint om mense te roof. (Hy begin stamp weer met die agterkant van die koki op die tafel terwyl hy dit erken.)*

Mm.

*Sien Juffrou, om gun te skiet en so, Juffrou. Toe gee hulle my mos daai naam (die bynaam wat op sy lyf getatoeër is).*

*Toe voel ek agterna, oukei, ek is nou klaar part van die bende, ek het genoeg vir hulle gedoen, toe maak ek die drie tjappies, Juffrou. (Verwysend na twee 26's met dollartekens en die Romeinse syfers asook "Sunrise" en "26".)*

En het jy oor hulle net so trots gevoel soos die eerste ene?

*Ja, Juffrou.*

Het dit nou al ooit verander, daai gevoel van trots wat jy oor hulle gevoel het, soos...?

*Ja, Juffrou, toe ek tronk toe gegaan het, toe raak ek mos 'n 26-bende. Soos Juffrou kan sien, ek het mos een, twee, drie 26's – dié is mos die Romeinse syfers, sien Juffrou?*

Mm.

*Sien Juffrou, toe begin ek te dink: Ag, dis niks meer in my oë nie . (Hy wys na die vorige American-tjappies en kap die heeltyd op die tafel met die pen.)*

*– die nommer “26” ... oukei, vergeet maar daai*

En die ouens in die gevangenis wat nou self 26's is – het hulle ook afgekyk op daai ... dit tel nie, of... ?

*Nee, Juffrou, hulle het ook vir my begin te skree op die naam (bynaam op lyf getatoeër), sien, Juffrou. Dit is mos nou voor my bors, Juffrou, en wanneer ek my gaan was en hulle sien voor my bors, begint hulle vir my te skree, daai naam.*

Oukei. En toe jy nou eers 'n 26 raak, hoe voel jy toe? Voel jy toe net so trots om een van hulle te wees?

*Ja, hoekom, ek is 'n groot man, Juffrou. (Kap die pen al harder.)*

Oukei, en,... en het jy ... mm ... (Ek probeer vinnig dink hoe om die vraag te stel sonder om aggressie te ontlok.) As jy dit vergelyk met hoe jy by die huis 'n gevoel van trots kon kry? As jy sê nou maar vir jou ma-hulle laat goed voel het, het jy daarop ook trots gevoel partykeer, of was dit nie dieselfde gevoel van trots nie? (Ek probeer vasstel of hy 'n gebrek daaraan ervaar het tuis en of dit vir hom so belangrik was om dit by die bende te kry.)

*Nee, Juffrou, my ma-hulle ... my ma weet nie eintlik van dié (hy kap op die 26-tjappies en die stem raak anders) en dié nie, Juffrou. Dié twee en daai een op my bene nie, Juffrou.*

Oukei.

*My ma weet van dié. (Hy kap met die pen daarop.)*

Maar Juffrou bedoel maar net ... jy sê daai tjappies het jou baie goed laat voel toe jy dit kry, toe jy nou daar op daai naam genoem word. Het iets wat jou ma vir jou sê, jou ooit so trots laat voel? Of dink jy dis miskien juis omdat jy by die huis nie genoeg trots op jouself gevoel het nie, dat dit...?

*Nee, Juffrou. (Hy praat vinnig asof hy nie wil hê daar moet 'n misverstand daaroor wees nie.) My ma-hulle het my te veel geprys, Juffrou ... sien Juffrou, vir my was dit so, Juffrou, ek was amper soos 'n slim klong op skool, sien Juffrou. Nou vir my was geprys gewees (kap met die pen op die tafel) en vir my was alles gegee gewees (kap om te benadruk). Toe het ek misbruik gemaak van alles wat my ma-hulle vir my gegee het.*

Mm.

*Sien Juffrou nou?*

En hoe voel jy nou oor hulle, as jy nou terugdink? As jy nou vir my so sê, watter gevoel kry jy nou oor dié dinge – hoe voel jy in jou hart?

*Ek voel spyt, Juffrou.*

Het jy al kans gekry om dit miskien te sê?

*Nee, ek het nog nie vir my ma so gesê nie, Juffrou. (Sy stem klink nou weer sterker.) Ek voel dit maar as ek voor my ma kom, dan praat ek saam met my ma, maar dan kan ek nie die woorde ... (die pen val; hy tel dit op en herhaal) dan kan ek nie die woorde reg uitspreek nie, sien, Juffrou.*

Mm.

*Dis amper soos iets wat my vashou, hoekom, dat ek nie dít wat ek wil sê, kan reg uitspreek voor my ma nie.*

Dink jy as jy dit skryf, miskien, dat dit eers net op papier kom, dat dit vir jou makliker gaan wees?

*Ek wil dit nie skryf nie, Juffrou – ek wil dit vir my ma sê.*

Ja, Juffrou verstaan dit; ek bedoel maar net, sal dit nie vir jou ... as jy dit net eers geskryf het, en jou brein het daai woorde gemaak en dit staan op papier ... dit vir jou makliker maak om dit volgende keer te sê nie?

*Nee, Juffrou, ek gaan nou huis toe, die vakansie.*

Kan jy?

*Ek gaan huis toe die vakansie en dan gaan ek dit vir my ma sê, Juffrou.*

Oukei.

*Hoekom, ek het jonger broers by die huis, sien Juffrou. Ek wil hê hulle moet opkyk na my toe as 'n goeie voorbeeld vir hulle, Juffrou.*

En dan gaan dit jou net so trots laat voel, of nog trotser.

*Nog trotserder laat voel, Juffrou.*

Oukei, maar dan weet jy mos jy het nou 'n draai gemaak, nè?

*Ja, Juffrou.*

En sê vir my, is daar nog enigiets anders op jou lyf, behalwe dié wat jy nie oor wil praat nie? Dit maak nie saak nie.

*Dis alles wat op my lyf is, Juffrou.*

Oukei. En hoe voel jy nou daaroor? As jy so na jou lyf kyk, hoe voel jy daaroor?

*Ek voel sleg, Juffrou. Oukei, my hele lyf is nie vol nie, maar dié is nie iets om op trots te voel nie, Juffrou.*

Oukei, dit is soos jy sê.

*As ek instap by 'n fabriek, sien Juffrou nou, en ek wil 'n werk gaan soek en die baas gaan dié sien, dan gaan hy my nie aankyk as 'n mens nie – hy gaan my aankyk as 'n skelm, sien Juffrou nou?*

Tensy jy kan iets anders bewys, nè. Hoe sê hulle? Dade praat harder as woorde?

*Ja, Juffrou.*

So, as hulle jou 'n kans gee dat jy jousef kan bewys, dan gaan jy vir hulle kan wys dit lê agter jou?

*Ja, Juffrou.*

Gaan jy jousef 'n kans gee?

*Ek sal probeer, Juffrou.*

En glo jy dit?

*Ja, Juffrou.*

Daar is baiekeer mense, soos die Loewellyn-hulle (lede van die Ubomi Foundation wat uitreik na skole waar bendebedrywighede baie voorkom) wat hier kom praat het, wat vir ons vertel hoe diep was hulle in die bendes in en hulle het omgedraai en hulle lewe verander en vandag help hulle baie ander mense. So, ons glo hulle, verstaan jy?

*Ja, Juffrou.*

'n Mens kan in iemand se oë sien wanneer hy opreg is en wanneer hy iets bedoel, nè. So hierdie gevoelens wat jy voel oor jou liggaam, dat jy spyt is oor dit, is 'n goeie ding. Maar kyk jy nou af op jou liggaam daaroor? (afkyk beteken in hulle idioom om neer te kyk op iemand of iets).

*Nee, Juffrou.*

Hoe voel jy oor jou liggaam?

*Ek voel goed oor my liggaam, Juffrou.*

Oukei. Wat se soort goed doen jy wat jou laat goed voel oor jou liggaam?

*Ek doen sports, Juffrou.*

Watter soorte almal?

*Rugby en sokker, Juffrou.*

En voel jy lekker as jy geoefen het? Voel jy jou spiere is sterk en hulle doen wat jou liggaam vra dat hulle moet doen?

*Ja, Juffrou.*

En dan voel jy goed oor dit?

*Ja, Juffrou.*

Goed, so wat jy sê, is, jy voel spyt oor die goed op jou liggaam, maar gaan nie dat dit jou terughou nie, want jou liggaam vertel nog 'n storie – jou liggaam vertel vir jou hoe mooi en sterk en gesond en kragtig hy is en hoe ver hy jou nog in die lewe in kan dra. 'n Storie van hoop, nè?

*Ja, Juffrou.*

Stem jy saam?

Is daar enigiets anders? Kom ons praat oor jou pa, miskien. Ons praat nou baie oor jou ma – hoe voel jy oor jou pa?

*My pa is ook 'n 26-bende, Juffrou.*

Oukei, so dink jy jy het op 'n manier probeer om op sy standaard te kom, dat jy ...?

*Ja, Juffrou.*

Of dink jy dit het jou nog glad nie beïnvloed nie?

*Dit het my beïnvloed, Juffrou. Sommer baie, Juffrou.*

Ja, want enige seun wil hê sy pa moet trots wees op hom, nè?

*Ja, Juffrou.*

So ...?

*Maar hy was nie eintlik trots op my toe ek 'n bende word nie, Juffrou.*

Het hy vir jou gesê jy moenie, al is hy?

*Ja, Juffrou.*

En toe dink jy dit ... Hoe het jy toe gevoel daaroor?

*Toe dink ek net by myself: Maar djy is dan, hoe kan djy vi my sê ek kan nie. (Sy stemtoon verander na aggressief).*

Mm.

*Sien, Juffrou. Toe wil ek mos regtig sien wat gaan aan in die tronk, sien Juffrou?*

Mm.

*Toe kom dit nou maar so dat ek in die tronk opbeland, Juffrou.*

Hoe lank was jy daar?

*'n Jaar, Juffrou.*

Oukei. En dink jy nou dat jy die tjappies op jou lyf het ... maak dit vir jou probleme as jy tussen ander bendelede kom?

*Ja (laggie), groot probleme, Juffrou.*

Mm. Soos nou hier by die skool, byvoorbeeld, tussen jou en die 28's? Maak dit vir jou probleme?

*Groot probleme, Juffrou.*

En kan jy probeer om nie ... daai tipiese probleme ... saam met dit te gaan nie, of vir jousef te sê jy wil verander?

*Ja, Juffrou. (Hy gaap terwyl hy dit sê.)*

Hoe voel jy dan daarvoor?

*Ek voel ... ek voel só, sien Juffrou? (Hy beduie met sy hande soos 'n weegskaal wat aan die een kant op- en aan die ander kant afbeweeg om te balanseer.) Ek voel goed en aan die ander kant swak, sien Juffrou? Eintlik goed dat ek weggeloop het van dit af, maar nou ... dan kom die 28's nou weer, dan wil hulle nou ... hulle sien nou ek wil nie saam met hulle sabella nie, sien Juffrou.*

Mm.

*Dan wil hulle nou kom met krag om my te overpower, sien Juffrou?*

Mm.

Nou, ek is 'n man, sien Juffrou; ek is mos short tempered, sien Juffrou – ek gaan nie lat 'n man in my gesig mors nie, dan gaan ek nie wegloop nie, Juffrou.

Mm.



*Ek kan nie daai doen nie, Juffrou.*

Jy sal kan as jy jou ... soos die Engelse sê, jou mind daarop sit.

*Ek kan nie, Juffrou.*

Jy moet probeer.

*Dan veroorsaak dit net 'n klomp bakleiery, Juffrou.*

Ja, maar wat gaan meer baklei veroorsaak? As jy nou kwaad word – as hulle nou, soos jy sê, in jou gesig mors, maak dit dan nie dat julle begin slaan aan mekaar nie?

*Maar Juffrou sien, hulle is mos só hier, Juffrou, as jy eenkeer weggeloop het van hom af, dan gaan hy dit aanmekaar wil doen – dat hy wil kanse vat, sien Juffrou. Maar as jy hom gaan terugslaan, dan gaan hy nie weer 'n keer terugkom nie.*

So sal jy sê dat dit die kwaad in jou laat opstaan omdat jy die goed nou wil los en hulle trek jou nou weer terug daarnatoe?

*Is nie daai nie, Juffrou. Om die waarheid te sê, dit is nie eintlik daai nie – ek weet nie of ek regtig bereid is om die goete te los nie, sien Juffrou? Maar my verlange is om die goete te los, sien Juffrou?*

Mm.

*Maar nou ... ek weet nie, Juffrou, ek weet nie wat hou my nog vas nie, Juffrou. Maar die besluite lê by my, Juffrou.*

Mm. En die ... die ... mm ... die feit dat jy nou al 'n jaar in die gevangenis moes wees vir verkeerde goed wat jy gedoen het – laat dit jou voel dat jy liever die verkeerde goed wil los, of maak dit jou kwaad; maak dit jou ... voel jy half verontreg dat mense dit aan jou gedoen het? Voel jy so?

*Vir wat, Juffrou?*

Dat hulle jou gevangenis toe gestuur het?

*Ek voel nie swak nie, Juffrou. Dit was ook nie eintlik die mense wat my gevangenis toe gestuur het nie, sien Juffrou. Ek was vyftien jaar oud, Juffrou. Dertien, toe begin ek sake te*

*vang. Op vyftien jaar toe besluit ek ek is nou klaar met die jeugsentrums, ensovoorts, sien Juffrou. Ek wil 'n bietjie gaan ervaar wat gaan daar binne aan, sien Juffrou. By die grootmense. Toe maak ek my ouer, Juffrou. (Hy kap-kap met die pen.) Toe kom dit nou so dat ek 'n 26 word. Toe dink ek nou by myself: Ek is vyftien jaar oud en almal ... die ouens sê: Jo, jy is die jongste 26, ensovoorts. Toe voel ek nou kwaai, hoekom, ek is die jongste, sien Juffrou, en hulle kyk op na my toe.*

Mm.

*Sien Juffrou nou. Maar ek voel nie swak nie; dit is eintlik maar 'n besluit wat ek gemaak het. Sien Juffrou?*

Oukei. Maar as jy nou dink aan jou toekoms, die feit dat jy eintlik so goed in Engels is en Engels kan lees, Afrikaans kan lees, terwyl die meeste van ons kinders glad nie kan nie, voel jy nie dat daar vir jou 'n beter toekoms wag as die meeste ander kinders in die skool nie?

*Ja, Juffrou.*

Sien jy uit na 'n gewone lewe, amper weg van hierdie dinge af, of ... of is die verlange maar nog sterk om met *guns* en ...

*Juffrou, my verlange is eintlik om uit daai plek uit te kom waar ek gebore is, Juffrou.*

Het jy ander familie op ander plekke waar jy heen kan gaan?

*Ja, Juffrou, ek het ander familie. Maar eerste was dit mos so, Juffrou, toe ek begin te sake vang, dan stuur my ma my weg na my oupa toe in (plattelandse dorpie), sien Juffrou. Dan kry ek ook nie my sin daar nie, sien Juffrou, hoekom, ek mis nou die gangsterskap, en die drugs en die gun-skieterij. Hoekom, toe dink ek, nee wat, hoekom hier bly ... weer terug, Kaap toe. Gaan ek maar net weer aan met my dinge, sien, Juffrou. Daai was oukei, maar net 'n besluit wat ek geneem het. Ek het 'n klomp verkeerde besluite geneem, Juffrou.*

Maar jy sien dit nou, nè. En dink jy nou daai besef is nou sterk genoeg in jou om vorentoe ander besluite te neem?

*Ja, Juffrou.*

En dink jy, of verstaan jy nou beter, hoekom ... al was jou pa 'n 26, wou hy nie gehad het jy moet ook betrokke raak nie?

*Ja, Juffrou. Want hoekom, as jy in die ding is, dan kan jy nie uit nie.*

Mm. So sê nou maar jy dink aan die kinders wat jy gaan grootmaak, nê?

*Ek sal nie wil hê hulle moet so wees nie.*

Oukei. So jy verstaan nou hoe jou pa gevoel het? Dink jy dit bring jou nader aan hom? Sal julle miskien nou meer vriende raak met mekaar?

*Ek weet nie, Juffrou.*

Is jou pa nog aktief in dit, al wil hy nie hê jy moet dit doen nie?

*Ja, Juffrou.*

So hy het dit nie gelos nie, maar hy wil hê jy moet dit los?

*(Stilte)*

En jou ma, hoe dink jy voel sy?

*Teleurgesteld, klomp woorde, Juffrou. Sy voel seer, Juffrou. Hoekom, sy het my gesê sy het my nie grootgemaak vir dié goete nie, Juffrou.*

En jy dink aan jou jonger boeties, nê?

*Ja, Juffrou.*

Hoe oud is hulle?

*Een, drie en vyf, en een jonger as my nog, elf.*

So hulle is nog baie jonk. Maar as jy nou so na jousef kyk soos jy nou hier op die papier geteken is, dan wil ek hê jy moet vir jousef ietsie sê. Maar as jy dit nie hard wil sê nie, sê dit vir jousef in jou kop. Kyk na jousef en sê vir jousef jy het deur iets gekom, jy het iets geleer daaruit, en jy het die besluit gemaak jy wil nie of jy wil – hoe jy self besluit. En dan dink jy oor jou toekoms wat vir jou voorlê. As jy nou net die vakansie vat. Jy is seker opgewonde om huis toe te gaan, nê?

*Nie eintlik nie, Juffrou.*

Is jy bang?

*Ek is ok nie bang nie, Juffrou.*

Hoe voel jy? Het jy gemengde gevoelens?

*(Hy lag.) Daar is die woord wat ek gesoek het: Ek kry mixed feelings, sien Juffrou. Ek kry mixed feelings.*

Oukei, so ... bang dat jy weer gaan toegee aan verkeerde goed?

*Ja, Juffrou. Maar dit is ook eintlik ... dis amper soos 'n kans vir my, sien Juffrou? Om te kyk of ek kan wegloop van die verkeerde ding af.*

Mm.

*Sien Juffrou?*

En die dwelms? Dit speel seker 'n groot rol?

*Nee, Juffrou, nie meer nie.*

Nie meer nie? Dink jy jy sal kan huis toe gaan en ...

*Die dwelms was nog nooit eintlik 'n ding by my nie. Hoekom, daai is goete wat ek verniet kan kry – ek worry nog amper nie oor daai nie, sien Juffrou.*

Oukei. So jy het nie by misdaad betrokke geraak om dwelms te kry nie?

*Nee, Juffrou.*

Was dit vir iets anders – net vir daai gevoel van mag?

*Dit was eintlik omdat hulle my nefie doodgeskiet het, Juffrou. Toe begin ek nou so 'n wraak in my op te bou. Wat ek in standerd ses kom, toe besluit ek: Nee, los ederste die skool .*

En daai wraakgevoelens, hoe voel jy nou oor dit – is dit verby?

*Dit het my niks in my sak gebring nie, Juffrou. Hoekom, die mense wat my nefie doodgeskiet het, is in die tronk, sien Juffrou, en ek het niks daaruit gewen nie.*

Jy het dit vir jouself uitgedink of het iemand dit vir jou gesê?

*Nee, ek het dit vir myself uitgedink.*

So, ek dink jou verstand is skerp genoeg om jou te help om die regte besluite te neem. As 'n mens se verstand nie so skerp is nie, dan is dit makliker om maar net te doen wat ander mense vir jou sê.

*Dan kan ander mense vir jou gou overpower, Juffrou.*

Ja. Maar jy het die verstand om vir jou die regte leiding te gee en ek dink as jy so na jouself kyk, is dit miskien een van die goed wat jy vir jouself moet sê.

*Ek was eintlik nog nooit ge-indoctrinate deur ander mense om goete te doen nie. Dit was alles net my eie besluite en verkeerde besluite wat ek gemaak het, sien Juffrou. So ek kan nie eintlik die skuld op ander mense druk nie.*

Mm. So, as jy dié gemengde gevoelens het oor die vakansie, as jy in die aande in jou bed lê en nie kan slaap nie, dink jy dit sal help om vir jou prente in jou kop te maak van goeie dinge wat jy gaan doen die vakansie?

*Ja, Juffrou.*

Jy weet mos die sportspanne het almal sielkundiges wat hulle voorberei vir groot wedstryde. Nou, een van die goed wat hulle baie gebruik, is wat hulle noem “visualisering”. Jy moet 'n prent sien – die atlete moet sien hoe wen hulle. Ouens wat atletiek hardloop, moet sien hulle gaan eerste deur die wenstreep. Mense wat hoogspring, moet in hulle verbeelding sien hoe gaan hulle oor die lat. Nou hulle sê 'n mens se brein glo wat jy vir hom vertel. So, as jy genoeg vir jou brein vertel, hierdie laaste ruk elke aand as jy lê: Ek sal dit regkry, ek kan dit regkry, want ek het 'n skerp verstand en ek het nou al agtergekom dat dié goed my niks in die sak gebring het nie, soos jy gesê het, en jy praat só met jouself ... Dink jy jy wil dit probeer? Goeters teen mekaar opweeg en dink watter toekoms sal daar vir jou wees as jy miskien aanhou, of watter toekoms sal daar vir jou wees as jy wegbreek, al is dit moeilik. Ons weet daar is definitief mense wat kon wegbreek en wat 'n wonderlike lewe lei. As jy daai goed meer vir jou brein begin vertel dat hy dit glo.

*Ja, Juffrou.*

Moet Juffrou vir jou 'n boek bring dat jy 'n bietjie lees daaroor? Oor visualisasie en hoe 'n mens dit kan gebruik?

*Ja, Juffrou (sonder fut of oortuiging).*

Is daar enige ander gevoelens, enigiets wat jou nog pla, iets waaroor jy nog wil praat?

*Nee, Juffrou.*

Niks nie?

*Net die wonde, Juffrou.*

Ons sal dit die volgende keer doen – is dit oukei?

*Ja, Juffrou.*

Dan gaan dink jy 'n bietjie oor wat ons nou gepraat het. En as jy dink daar is dalk gevoelens waaroor jy nie gepraat het nie, dan kan ons die laaste keer daarvoor praat. Dan kan jy sê of jy dink dit help om oor dié goed te praat en oor die gevoelens te praat. Want jy kan nie eintlik vir die bendelede gaan sê hoe voel jy regtig nie. Jy kan miskien nie hier by die koshuis sê nie, want soos jy sê, party kyk op na jou toe oor jy die nommer op jou dra en jy is so jonk. Ander kyk dalk weer af na jou toe, so hier is dit moeilik om vir mense te sê hoe jy regtig voel. En jy sê jy sukkel bietjie om vir jou ma te sê hoe jy voel, en Juffrou wil regtig hê jy moet dink daarvoor of dit jou al help om dit eers op papier te skryf, dat die woorde net makliker kom as jy jou ma sien.

*Ja, Juffrou.*

En te dink aan die prentjies van sien hoe dit goed sal gaan met jou die vakansie, om nee te sê vir die mense wat jou wil aftrek om die verkeerde goed te doen. Dink jy dat jy dalk liever ... (sy oupa se dorp) toe moet gaan vir die vakansie?

*Nee, Juffrou, ek wil huis toe gaan, my ma verjaar die ... Dan wil ek by my ma wees, Juffrou.*

En sy kan nie ook soontoe gaan nie – werk sy?

*Ja, Juffrou.*

So ek sien op jou gesig jy is opgewonde oor die vakansie, al is jy bang.

*Ja, Juffrou. (Hy gee 'n laggie.)*

Jou gesig helder eintlik so op toe jy praat van jou ma se verjaardag.

*Ek is al 'n jaar weg van my huis af, Juffrou.*

So het jy met hulle oor die foon gepraat om te reël vir die vakansie? Hulle weet jy kom?

*Ja, Juffrou.*

En hoe klink dit vir jou?

*Hulle sien daarna uit om my te sien, Juffrou. Maar aan die ander kant dink hulle seker ook: Hy kom nou net weer uit om verkeerde dinge aan te vang – maar ek moet hulle maar net verras, Juffrou (met 'n ligte klank in sy stem).*

Ja.

*Ek moet vir hulle wys ek is nie dieselfde nie.*

Oukei. Dit sal vir jou ma die wonderlikste verjaardagpresent wees. Maar, (P2), jy moet onthou, 'n belangrike ding is ook: As jy 'n foutjie sou maak, dan moet jy jouself vergewe en opstaan en net weer aangaan, nè.

*Ja, Juffrou.*

'n Babatjie, as hy begin loop ... hy val baie kere voor hy kan loop.

*Maar hy staan weer op.*

Hy staan aanmekaar weer op.

*Tot hy kan loop.*

'n Babatjie sal honderd keer weer terugval en opstaan – dit is wat so wonderlik is, maar as 'n mens groter word, is dit amper asof 'n mens nog voor jy geval het, dink jy gaan val, en dan wil jy nie eers probeer nie.

*Ja, Juffrou.*

So jy glo jy gaan dit regkry? En jy gaan daai prent snags in jou kop sien – is dit reg so?

*Ja, Juffrou.*

Goed, dan sien ons mekaar weer om oor die wonde of seerplekke te praat.